(Rev. January 2020)

Department of the Treasury Internal Revenue Service

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

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

OMB No. 1545-0047

▶ 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 Inspection

A	For the	2019 calend	dar year, or tax year beginning Nov $1$ , 2019, and endi	ng O	ct 31	<b>, 20</b> 2 0					
В	Check if	applicable:	C Name of organization GRASSROOTS INTERNATIONAL, INC.		-	yer identification number					
	Address	change	Doing business as			91159					
	Name ch	nange	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite		one number					
	Initial ret	urn	179 BOYLSTON STREET	4TH FLOOR	(617)	524-1400					
	Final retu	ım/terminated	City or town, state or province, country, and ZIP or foreign postal code								
	Amende	d return	BOSTON, MA 02130-4520			receipts \$12,200,855.					
	Applicati	ion pending	F Name and address of principal officer:			r subordinates? Yes No					
			CHUNG-WHA HONG, 179 BOYLSTON STREET, BOSTON, MA 02130-4	520 <b>H(b)</b> Are all	subordinate	es included? Yes No					
ī	Tax-exe	mpt status:	▼ 501(c)(3)	If "No,"	attach a lis	st. (see instructions)					
J	Website	· > www.c	grassrootsonline.org	H(c) Group	exemption	number >					
K			Corporation ☐ Trust ☐ Association ☐ Other ► L Year of form	nation: 1983	M State	of legal domicile: MA					
100	art I	Summa									
	1		cribe the organization's mission or most significant activities:	INTERNATIONAL MORES IN PARTI	ERSHIP WITH SOCIA	G MONEYEMTS TO CREATE A JUST AND SUSTRIMABLE					
ø			Y ADVANCING THE HUMAN RIGHTS TO LAND, WATER AND								
anc		BUILDING SOLIDARITY ACROSS ORGANIZATIONS AND MOVEMENTS, AND ADVOCACY IN THE UNITED STATES.									
ern	2	Check this	s box ▶ ☐ if the organization discontinued its operations or dispose	d of more than	1 25% of	its net assets.					
ò	3	Number of	f voting members of the governing body (Part VI, line 1a)		3	13					
ě	4	Number of	f independent voting members of the governing body (Part VI, line 1	b)	4	13					
es	5	Total num	ber of individuals employed in calendar year 2019 (Part V, line 2a)		5	20					
Activities & Governance	6		ber of volunteers (estimate if necessary)		6	26					
Acti	7a	Total unre	lated business revenue from Part VIII, column (C), line 12		7a	0.					
_	b	Not unrela	ated business taxable income from Form 990-T, line 39		7b	0.					
	-	NOT UTITOR	tion business tarable means	ear	Current Year						
	8	Contributi	ons and grants (Part VIII, line 1h)	L,806.	10,819,143.						
Revenue	9	51 157									
Ver	10	Investmen	at income (Part VIII, column (A), lines 3, 4, and 7d)	5,634.	179,266.						
Re	11	Other reve	enue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		5,816.	4,481.					
	12	Total reve	nue-add lines 8 through 11 (must equal Part VIII, column (A), line 12)	6,603	5,413.	11,007,290.					
	13	Grants an	d similar amounts paid (Part IX, column (A), lines 1–3)		5,174.	5,813,214.					
	14	Ronofite n	paid to or for members (Part IX, column (A), line 4)								
	45	Salarios o	other compensation, employee benefits (Part IX, column (A), lines 5-10)	9,726.	1,880,048.						
ses	16a	Drofession	nal fundraising fees (Part IX, column (A), line 11e)		0,600.	46,600.					
Expenses	. b	Total func	draising expenses (Part IX, column (D), line 25) 645,715.	MARKET SANSAGE STREET, SANSAGE							
Exc	17	Other eve	penses (Part IX, column (A), lines 11a-11d, 11f-24e)	57	4,273.	545,437.					
	18	Total over	enses. Add lines 13–17 (must equal Part IX, column (A), line 25)	5,27	9,773.	8,285,299.					
		Povonuo	less expenses. Subtract line 18 from line 12		5,640.	2,721,991.					
_	19	neveriue	less expenses. Subtract fine to item into 12	Beginning of C		End of Year					
Net Assets or	20	Total acc	ets (Part X, line 16)	6,40	0,362.	9,920,217.					
Asse	21		ilities (Part X, line 26)	1,01	2,119.	1,790,561.					
let /	22		s or fund balances. Subtract line 21 from line 20	5,38	8,243.	8,129,656.					
	Part II		ure Block								
-		-1416	to I declare that I have examined this return including accompanying schedules and s	tatements, and to	the best of	my knowledge and belief, it is					
tr	rue, corre	ct, and comple	ete. Declaration of proparer (other than officer) is based on all information of which prepared	parer has any know	ledge.						
_					09/10/	2021					
S	ign	Signa	ature of officer	D	ate						
	ere	CHI	UNG-WHA HONG, EXECUTIVE DIRECTOR								
***	0.0		or print name and title								
_			pe preparer's name Preparer's signature	Date	Check	if PTIN					
	aid	Timot	thy F. Hagan, CPA	09/10/202	self-en	ployed P00365920					
	repar	er Firm'a n	TOWNSON A GOMPANY D.C.			04-3068663					
	se Or	Firm's a	ddress ▶ 15 MAIN STREET, TOPSFIELD, MA 01983	Ph	one no. (	978) 887-2220					
N	lay the	IRS discuss	s this return with the preparer shown above? (see instructions)			🛛 Yes 🗌 No					

Part	
4	Check if Schedule O contains a response or note to any line in this Part III
1	GRASSROOTS INTERNATIONAL WORKS IN PARTNERSHIP WITH SOCIAL MOVEMENTS TO CREATE A JUST AND SUSTAINABLE
	WORLD BY ADVANCING THE HUMAN RIGHTS TO LAND, WATER AND FOOD THROUGH GLOBAL GRANTMAKING,
	BUILDING SOLIDARITY ACROSS ORGANIZATIONS AND MOVEMENTS, AND ADVOCACY IN THE UNITED STATES.
	BUILDING SULLDARILL ACROSS ORGANIZATIONS AND MOVEMENTS, AND ADVOCACT IN THE UNITED STATES.
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
7	expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others.
	the total expenses, and revenue, if any, for each program service reported.
4a	(Code: ) (Expenses \$ 6,695,449. including grants of \$ 5,813,214.) (Revenue \$ 0.)
	HUMANITARIAN/SOCIAL JUSTICE - GRASSROOTS INTERNATIONAL SUPPORTS HANDS-ON SOLUTIONS
	TO SOME OF THE MOST PRESSING CHALLENGES WE FACE: HUNGER, VIOLATIONS OF HUMAN RIGHTS,
	CLIMATE CHANGE AND ECONOMIC DISPARITY. THROUGH A COMBINATION OF STRATEGIC GRANTMAKING,
	ADVOCACY AND SUPPORT FOR LEARNING EXCHANGES, GRASSROOTS INTERNATIONAL SUPPORTS
	PROJECTS FOR DEMOCRATIC SOCIAL CHANGE; HUMAN RIGHTS TO LAND, WATER AND FOOD; AND
	ENVIRONMENTAL JUSTICE.
4b	(Code:) (Expenses \$328,341. including grants of \$0.) (Revenue \$0.)
	EDUCATION - SPONSORS EDUCATION PROGRAMS, EVENTS AND PUBLICATIONS RELATED TO
	OVERSEAS GRANTS PROGRAM DESIGNED TO INCREASE AWARENESS AND INVOLVEMENT IN THESE
	PROGRAMS BY NORTH AMERICANS.
4c	(Code: ) (Expenses \$ including grants of \$ ) (Revenue \$ )
	(Country) (2. points v)
4d	Other program services (Describe on Schedule O.)
	(Expenses \$ including grants of \$ ) (Revenue \$ )
4e	Total program service expenses ► 7,023,790.

**Checklist of Required Schedules** 

Part IV

			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 Revenue Procedure 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</i> "Yes," <i>complete Schedule D, Part IV</i>	9		×
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? <i>If "Yes," complete Schedule D, Part V </i>	10	×	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	×	
b	Did the organization report an amount for investments—other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? 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? <i>If "Yes," complete Schedule D, Part IX</i>	11d		×
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		×
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	×	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	×	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		×
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		×
14a	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 for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	×	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV.	16		×
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? 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? <i>If</i> "Yes," <i>complete Schedule G, Part II</i>	18		×
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?  If "Yes," complete Schedule G, Part III	19		×
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		×
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? .	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	×	

Part	Checklist of Required Schedules (continued)			
			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		×
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	04-		.,
h	through 24d and complete Schedule K. If "No," go to line 25a	24a 24b		×
b	Did the organization maintain an escrow account other than a refunding escrow at any time during the year	240		
U	to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		×
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		×
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part II</i>	26		×
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? 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 Schedule L, Part IV instructions, for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If</i> "Yes," <i>complete Schedule L, Part IV</i>	28a		×
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		×
С	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If "Yes," complete Schedule L, Part IV	28c		×
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	×	
30	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	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		×
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		×
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I </i>	33		×
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		×
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		×
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		×
36	<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 in Schedule O for Part VI, lines 11b and 19? <b>Note:</b> All Form 990 filers are required to complete Schedule O.	38	×	
Part	V Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V			
_			Yes	No
1a b	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			
С	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 2a 20			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b	×	
	<b>Note:</b> If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		×
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O.	3b		
	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		×
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		×
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		Ť
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
Va	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	- Ou		<u> </u>
D	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
а	and services provided to the payor?	7a	×	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	×	
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	1.5		
C	required to file Form 8282?	7c		×
d	If "Yes," indicate the number of Forms 8282 filed during the year	70		Ĥ
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 g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		<u> </u>
9 h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the	7.1.		
Ü	sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintaining by the sponsoring organization have excess business holdings at any time during the year?	8		×
9	Sponsoring organizations maintaining donor advised funds.			Ĥ
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		×
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		×
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . 10b			
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders			
	Gross income from other sources (Do not net amounts due or paid to other sources			
D	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		
	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			
D	the organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		×
	If "Yes," has it filed a Form 720 to report these payments? <i>If "No," provide an explanation on Schedule O</i> .	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or	.45		
13	excess parachute payment(s) during the year?	15		
	If "Yes," see instructions and file Form 4720, Schedule N.	.0		
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.			

response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions. Section A. Governing Body and Management Yes No 1a Enter the number of voting members of the governing body at the end of the tax year . . . 1a 13 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. Enter the number of voting members included on line 1a, above, who are independent . 1b 13 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with 2 × Did the organization delegate control over management duties customarily performed by or under the direct 3 3 supervision of officers, directors, trustees, or key employees to a management company or other person? . × Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 4 X 5 Did the organization become aware during the year of a significant diversion of the organization's assets? . 5 6 6 × Did the organization have members, stockholders, or other persons who had the power to elect or appoint 7a X Are any governance decisions of the organization reserved to (or subject to approval by) members, 7b × R Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: X 8b × Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O . . . . . 9 × Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes No 10a × **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 Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a × **b** Describe in Schedule O the process, if any, used by the organization to review this Form 990. **12a** Did the organization have a written conflict of interest policy? *If "No," go to line 13* 12a × Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b × Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," 12c X 13 Did the organization have a written whistleblower policy? . . . . . . . . . . . . 13 × 14 × 14 Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by 15 independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official . . . . . . . . . . . . . . . 15a × 15b X If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement 16a × If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed ▶ See Part VI, Line 17 stmt 17 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (Section 501(c) 18 (3)s only) available for public inspection. Indicate how you made these available. Check all that apply. X Own website X Another's website X Upon request Other (explain on Schedule O) Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, 19 and financial statements available to the public during the tax year. 20 State the name, address, and telephone number of the person who possesses the organization's books and records ▶

ORSON MOON, 179 BOYLSTON STREET , BOSTON, MA 02130-4520 (617)524-1400

Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No"

Form 990 (2019)

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

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

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

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

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

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

(A) Name and title	(B)  Average hours per week (list any hours for related organizations below dotted line)	box, office or directo	unles	Pos neck ss pe	rson	e than of is both or/trust Highest compensated	n an	(D)  Reportable compensation from the organization (W-2/1099-MISC)	(E)  Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
(1) MARIA AGUIAR	1.00					<u> </u>				
PRESIDENT AND CHAIR		×		×				0.	0.	0.
(2) KALILA BARNETT	1.00									
TREASURER		×		×				0.	0.	0.
(3) MIJO LEE	1.00									
SECRETARY		×		×				0.	0.	0.
<b>(4)</b> NIDAL AL-AZRAQ	1.00									
DIRECTOR		×						0.	0.	0.
(5) JANET AXELROD	1.00									
DIRECTOR		×						0.	0.	0.
(6) SHAUN GROGAN-BROWN	1.00									
DIRECTOR		×						0.	0.	0.
(7) SAM JACOBS	1.00									
DIRECTOR		×						0.	0.	0.
(8) M. BRINTON LYKES	1.00									
DIRECTOR		×						0.	0.	0.
(9) KATHY MULVEY	1.00									
DIRECTOR		×						0.	0.	0.
(10) NINAJ RAOUL	1.00									
DIRECTOR		×						0.	0.	0.
(11) JESENIA SANTANA	1.00									_
DIRECTOR		×						0.	0.	0.
(12) DIALA SHAMAS	1.00									
DIRECTOR		×						0.	0.	0.
(13) SAM VINAL	1.00	×							_	
DIRECTOR	10.55							0.	0.	0.
(14) CHUNG-WHA HONG EXECUTIVE DIRECTOR	40.00				×			95,863.	0.	24,377.

Part	VII Section A. Officers, Directors,	Trustees,	Key I	Em	plo	yee	s, an	d F	lighest Compe	nsated I	Emplo	yees (continued	
					•	C)							
	(A) (B)					ition mor	e than o	one	(D)	(E)	(E)	(F)	
	Name and title	Average hours	box,	unles	ss pe	erson	is both	n an	Reportable compensation	Reports compens		Estimated amount of other	
	per week from the from the							from rel		compensation			
		(list any hours for	Individual to	nstit	Officer	ey e	lighe	Former	organization (W-2/1099-MISC)	organiza (W-2/1099		from the organization and	
		related	dual	tior	¥	mpl	st c	<u> </u>	(11 2) 1000 111100)	(11 2) 1000		related organizations	
		organizations below	Individual trustee or director	lal tr		Key employee	omp						
		dotted line)	tee	Institutional trustee			Highest compensated employee						
				Ф			ted						
(15)			1										
(4.0)													
(16)			1										
(17)													
3													
(18)													
(19)													
(00)				_									
(20)			-										
(21)													
31			1										
(22)													
(23)													
(24)													
(24)													
(25)													
3==12													
1b	Subtotal		٠	٠.				<b></b>	95,863.		0.	24,377	
С	Total from continuation sheets to Part							<b>&gt;</b>					
d	Total (add lines 1b and 1c)							<u> </u>	95,863.		0.	24,377	
2	Total number of individuals (including but		d to th	ose	e list	ted	above	e) w	ho received mor	e than \$1	00,000	of	
	reportable compensation from the organ	ization <b>–</b>										Yes No	
3	Did the organization list any former	officer dire	ector	trı	ıste	ا م	(AV A	mnl	lovee or highes	t compe	nsated		
Ū	employee on line 1a? If "Yes," complete											3 ×	
4	For any individual listed on line 1a, is the												
	organization and related organizations	greater th	an \$1	150	,000	? /	f "Ye	s, "	complete Sched	dule J fo	r such		
	individual											4 ×	
5	Did any person listed on line 1a receive of for services rendered to the organization												
Secti	on B. Independent Contractors	: II 165, C	σπρι	ele	301	ieui	ule J I	OI S	sucri persori .	· · ·		5   ×	
1	Complete this table for your five high	nest comp	ensate	ed	inde	epe	ndent	CO	ontractors that r	eceived	more 1	than \$100.000 d	
	compensation from the organization. Rep												
	(A)								(B)			(C)	
	Name and business add	Iress							Description of serv	rices	(	Compensation	
								_					
2	Total number of independent contractor	ors (includin	ng bu	ıt n	ot	limi	ted to	th	nose listed abov	e) who			
	received more than \$100,000 of compens	•	-										

## Part VIII Statement of Revenue Check if Schedule O contain

ı are		Check if Schedule O contain	s a respon	se or note to ar	ny line in this Pa	rt 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 ts	1a	Federated campaigns	. 1a	121.				
ran	b	Membership dues	. 1b					
Contributions, Gifts, Grants and Other Similar Amounts	С	Fundraising events						
	d	Related organizations						
	е	Government grants (contributi						
	f	All other contributions, gifts, gr						
outi the		and similar amounts not included a		10,819,022.				
를 를 했다.	g	Noncash contributions include lines 1a–1f		ф c1г эсэ				
Cor anc	h	Total. Add lines 1a–1f		\$ 615,262. ▶	10,819,143.			
	- ''	Total: Add lines 1a-11		Business Code	10,019,143.			
e .	2a	PROGRAM SERVICE FEES		999999	4,400.	4,400.	0.	0.
Program Service Revenue	b				1,100.	1,100.	0.	<u></u>
gram Ser Revenue	С							
am eve	d							
ogr R	е							
Pro	f	All other program service reve						
	g	Total. Add lines 2a–2f			4,400.			
	3	Investment income (including				_	_	
		other similar amounts)			112,443.	0.	0.	112,443.
	4	Income from investment of tax	•	•				
	5	Royalties	(i) Real	▶ (ii) Personal				
	6a	Gross rents 6a	(i) Hoai	(ii) i ci soriai				
	b	Less: rental expenses 6b						
	c	Rental income or (loss) 6c						
	d	Not rental income or (less)		▶				
	7a		Securities	(ii) Other				
		sales of assets						
		other than inventory <b>7a</b> 1,2	59,839.	549.				
ne	b	Less: cost or other basis						
evenue			.93,565.					
æ	_	, ,	66,274.	549.	66,000		_	
er	d	• ,		<b>-</b>	66,823.	549.	0.	66,274.
Other	8a	Gross income from fundral events (not including \$	sing					
_		of contributions reported on	line					
		1c). See Part IV, line 18						
	b	Less: direct expenses	. 8b					
	С	Net income or (loss) from fund		nts <b>&gt;</b>				
	9a	Gross income from gan	ning					
		activities. See Part IV, line 19	. 9a					
	b	Less: direct expenses						
		Net income or (loss) from gam	_	es <b>&gt;</b>				
	10a	Gross sales of inventory,						
	b	returns and allowances Less: cost of goods sold						
	C	Net income or (loss) from sale:		arv <b>&gt;</b>				
<u>"</u>		THOSE MOOTHS OF (1033) HOTH Sales	S OI IIIVEIIIO	Business Code				
ous e	11a			200000 0000				
Miscellaneous Revenue	b							
elk eve	C							
lisc R	d	All other revenue			4,481.	4,481.	0.	0.
Σ	е	Total. Add lines 11a-11d			4,481.			
	12	Total revenue. See instruction	ns , .	🕨	11,007,290.	9,430.	0.	178,717.

#### 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 expenses (B) Program service expenses Do not include amounts reported on lines 6b. 7b. (A) Total expenses Management and general expenses 8b. 9b. and 10b of Part VIII. Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 3,133,172. 3,133,172. 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 2,680,042. 2,680,042. Benefits paid to or for members . . . . Compensation of current officers, directors, 5 trustees, and key employees . . . . 95,863. 57,517. 19,173. 19,173. 6 Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) . . 7 Other salaries and wages . . . . . . 1,341,977. 311,530. 325,908. 704,539. Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) 54,243. 28,749. 12,476. 13,018. Other employee benefits . . . . . . 143,977. 9 271,654. 62,480. 65,197. 10 Payroll taxes . . . . . . . . . . . 116,311. 61,644. 26,752. 27,915. Fees for services (nonemployees): 11 Management . . . . . . . . . 0. Legal . . . . . . . . . . . . . . . . 2,923. 0. 2,923. Accounting . . . . . . . . . . . 10,724. 0. 10,724. 0. Lobbying . . . . . . . . . 46,600. Professional fundraising services. See Part IV, line 17 46,600. Investment management fees . . . . . 26,907. f 0. 26,907. 0. Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.) 12 Advertising and promotion . . . . . . 13 Office expenses . . . . . . . . 56,883. 3,077. 35,270. 18,536. Information technology . . . . . . 14 15 Occupancy . . . . . . . . . . . . 59,940. 31,769. 13,786. 14,385. 16 65,633. 42,231. 22,011. 1,391. 17 Payments of travel or entertainment expenses 18 for any federal, state, or local public officials 19 Conferences, conventions, and meetings . 20 . . . . . . . . . . . . . 21 Payments to affiliates . . . . . . .  $1, \overline{913}$ . 8,319. 4,409. 1,997. 22 Depreciation, depletion, and amortization . 23 6,649. 3,524. 1,529. 1,596. 24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.) PUBLIC RELATIONS/SP PROJECTS/CRISIS RESPONSE 19,200. 9,757. 53. 9,390. TELEPHONE 2,280. 9,915. 5,255. 2,380. BANK SERVICE CHARGES 15,442. С 0. 5,071. 10,371. FILMS AND PUBLICATIONS 30. 0. 30. 0. All other expenses 262,872. 114,128. 60,886. 87,858. Total functional expenses. Add lines 1 through 24e 25 8,285,299. 7,023,790. 615,794. 645,715. Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ► ☐ if following SOP 98-2 (ASC 958-720) . . .

## Part X Balance Sheet

1 Cash—non-interest-bearing	1 2 3 4	273,257. 4,677,124. 326,009. 5,637.
2 Savings and temporary cash investments	3 4	4,677,124. 326,009.
Pledges and grants receivable, net 1,500.  Accounts receivable, net 32,124.  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.  Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B).  Notes and loans receivable, net 1000.  Inventories for sale or use 1000.  Prepaid expenses and deferred charges 1000.  Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 1000.  b Less: accumulated depreciation 1000.  Investments—publicly traded securities 1000.  Investments—other securities. See Part IV, line 11.  Investments—program-related. See Part IV, line 11.  Intangible assets 1000.	4	326,009.
4 Accounts receivable, net		
trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		
under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)  7 Notes and loans receivable, net  8 Inventories for sale or use  9 Prepaid expenses and deferred charges  10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D  b Less: accumulated depreciation  11 Investments—publicly traded securities  12,867,237.  12 Investments—other securities. See Part IV, line 11  13 Investments—program-related. See Part IV, line 11  14 Intangible assets  15 Other assets. See Part IV, line 11  17 Other assets. See Part IV, line 11  18 Other assets. See Part IV, line 11  19 Other assets. See Part IV, line 11	5	
7 Notes and loans receivable, net 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D  b Less: accumulated depreciation 11 Investments—publicly traded securities 12 Investments—other securities. See Part IV, line 11 13 Investments—program-related. See Part IV, line 11 14 Intangible assets 15 Other assets. See Part IV, line 11 1 Other assets. See Part IV, line 11	6	
8 Inventories for sale or use	7	
10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	8	
10aLand, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D10a74,350.bLess: accumulated depreciation10b43,516.34,611.11Investments—publicly traded securities2,867,237.12Investments—other securities. See Part IV, line 111113Investments—program-related. See Part IV, line 114,951.14Intangible assets4,951.15Other assets. See Part IV, line 1111	9	38,415.
b       Less: accumulated depreciation       .       <		3071131
11Investments—publicly traded securities2,867,237.12Investments—other securities. See Part IV, line 1113Investments—program-related. See Part IV, line 1114Intangible assets15Other assets. See Part IV, line 11	10c	30,834.
12       Investments—other securities. See Part IV, line 11	11	4,564,904.
14       Intangible assets	12	· · · · · · · · · · · · · · · · · · ·
14       Intangible assets	13	
	14	4,037.
16 Total assets. Add lines 1 through 15 (must equal line 33)	15	
7 10 10 10 10 10 10 10 10 10 10 10 10 10	16	9,920,217.
17 Accounts payable and accrued expenses	17	198,074.
<b>18</b> Grants payable	18	1,340,404.
19 Deferred revenue	19	
20 Tax-exempt bond liabilities	20	
21 Escrow or custodial account liability. Complete Part IV of Schedule D	21	
Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons	22	
23 Secured mortgages and notes payable to unrelated third parties	23	
24 Unsecured notes and loans payable to unrelated third parties	24	252,083.
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	25	1 500 541
26 Total liabilities. Add lines 17 through 25	26	1,790,561.
and complete lines 27, 28, 32, and 33.		
27 Net assets without donor restrictions	27	5,856,434.
Net assets with donor restrictions	28	2,273,222.
Organizations that follow FASB ASC 958, check here  and complete lines 27, 28, 32, and 33.  Net assets without donor restrictions		
29 Capital stock or trust principal, or current funds	29	
30 Paid-in or capital surplus, or land, building, or equipment fund	30	
31 Retained earnings, endowment, accumulated income, or other funds	04	
32 Total net assets or fund balances	31	
Total liabilities and net assets/fund balances	31 32 33	8,129,656. 9,920,217.

Form 990 (2019) Page 12
Part XI Reconciliation of Net Assets

Fen	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	1,00	07,2	90.					
2	Total expenses (must equal Part IX, column (A), line 25)		8,28	35,2	99.					
3	Revenue less expenses. Subtract line 2 from line 1									
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))		5,38	38,2	43.					
5	Net unrealized gains (losses) on investments			19,4	22.					
6	Donated services and use of facilities									
7	Investment expenses									
8	Prior period adjustments									
9	Other changes in net assets or fund balances (explain on Schedule O)									
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line									
	32, column (B))		8,12	29,6	56.					
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," expla Schedule O.	in in								
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	ľ	2a		×					
	If "Yes," check a box below to indicate whether the financial statements for the year were compile	- t								
	reviewed on a separate basis, consolidated basis, or both:	0 0								
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis									
b	Were the organization's financial statements audited by an independent accountant?	. 1	2b	×						
	If "Yes," check a box below to indicate whether the financial statements for the year were audited	on a								
	separate basis, consolidated basis, or both:									
	☒ 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 oversig	ht of								
	the audit, review, or compilation of its financial statements and selection of an independent accountant?	. [	2c	×						
	If the organization changed either its oversight process or selection process during the tax year, explain Schedule O.	in on								
0-										
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in Single Audit Act and OMB Circular A-133?	n the	3a		×					
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo	o the								
	required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audit		3b							
				000						

REV 10/27/20 PRO Form **990** (2019)

## Additional information from your Form 990: Return of Organization Exempt from Income Tax

# Form 990: Return of Organization Exempt from Income Tax Part VI, Line 17 (continued)

**Continuation Statement** 

States Where Copy of Return is Required  AZ CA CO CT
CO
CT
DC
FL
GA
ні
IL
KY
ME
MD
MA
MI
MN
NH
NJ
NM
NY
NC
ОН
OR .
PA
RI
TN
UT
VA
AW
WI

#### **SCHEDULE A** (Form 990 or 990-EZ)

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

OMB No. 1545-0047

2019

**Open to Public** Inspection

Department of the Treasury Internal Revenue Service

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.

Name	Name of the organization Employer identification number									
	SSROOTS INTERNATIONAL,					04-2791159				
Par							ns.			
The c	organization is not a private founda		,		-	•				
1	1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).									
2	= =									
4	<ul> <li>3 ☐ A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).</li> <li>4 ☐ A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the</li> </ul>									
4	hospital's name, city, and state:									
5										
6	☐ A federal, state, or local gover	•	mental unit described	l in <b>sectio</b>	on 170(b)	(1)(A)(v).				
7	☒ An organization that normally						the general public			
	described in section 170(b)(1)	<b>)(A)(vi).</b> (Complet	e Part II.)							
8	☐ A community trust described i	n <b>section 170(b</b> )	(1)(A)(vi). (Complete I	Part II.)						
9	☐ An agricultural research organ									
	or university or a non-land-gra	ent college of agr	iculture (see instructio	ons). Ente	r the nan	ne, city, and state of	the college or			
10	university:  An organization that normally	rocoivos: 717 mor	0 than 221/00/ of ito or	innort fro	m contril	outions momborchi	o food and arose			
10	receipts from activities related	to its exempt fu	nctions—subject to c	ertain exc	ceptions,	and (2) no more that	n 33 <sup>1</sup> /3% of its			
	support from gross investmen acquired by the organization a						businesses			
11	☐ An organization organized and		-		-					
12	☐ An organization organized and	-	•	-			rv out the purposes			
	of one or more publicly support									
	Check the box in lines 12a thro	ough 12d that des	scribes the type of sup	oporting c	organizati	on and complete line	es 12e, 12f, and 12g.			
а	☐ <b>Type I.</b> A supporting organ									
	the supported organization					he directors or trust	ees of the			
_	supporting organization. Y	=								
b	Type II. A supporting orga									
	control or management of organization(s). You must				persons	that control of mana	age the supported			
С	☐ Type III functionally integ	=			onnection	n with, and functions	ally integrated with			
Ū	its supported organization						any magnates man,			
d	☐ Type III non-functionally						orted organization(s)			
	that is not functionally inte						d an attentiveness			
	requirement (see instruction	ns). <b>You must c</b>	omplete Part IV, Sec	tions A a	and D, ar	nd Part V.				
е	☐ Check this box if the organ	nization received	a written determination	on from th	ne IRS th	at it is a Type I, Type	e II, Type III			
	functionally integrated, or		tionally integrated sur	oporting o	organizat	ion.				
Ť	Enter the number of supported or Provide the following information									
g	(i) Name of supported organization	(ii) EIN	(iii) Type of organization		rganization	(v) Amount of monetary	(vi) Amount of			
	(i) Name of supported organization	(11) (11)	(described on lines 1–10	listed in you	ur governing	support (see	other support (see			
			above (see instructions))	docui	ment?	instructions)	instructions)			
				Yes	No					
(A)										
(A)										
(B)										
(C)										
(D)										
(E)										
Total										

18

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.) Section A. Public Support Calendar year (or fiscal year beginning in) ▶ (a) 2015 **(b)** 2016 (c) 2017 (d) 2018 **(e)** 2019 (f) Total Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") . . . 2,289,071. 4,406,202. 7,686,305. 6,501,806. 10,819,143. 31,702,527. Tax revenues levied for the 2 organization's benefit and either paid to or expended on its behalf . . . The value of services or facilities furnished by a governmental unit to the organization without charge . . . . 2,289,071. 4,406,202. 7,686,305. 6,501,806. 10,819,143. 31,702,527. Total. Add lines 1 through 3. . . . 4 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) . . . . 7,321,143. **Public support.** Subtract line 5 from line 4 24,381,384. Section B. Total Support Calendar year (or fiscal year beginning in) ▶ **(b)** 2016 (c) 2017 (d) 2018 (a) 2015 (e) 2019 (f) Total 2,289,071. 4,406,202. 7,686,305. 6,501,806. 10,819,143. 31,702,527. 7 Amounts from line 4 . . . . . . 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources . . . . . . . 28,683. 40,631. 89,526. 136,338. 112,443. 407,621. 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 32,110,148. 12 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) 13 Section C. Computation of Public Support Percentage Public support percentage for 2019 (line 6, column (f) divided by line 11, column (f)) . . . . . 75.93% 14 Public support percentage from 2018 Schedule A, Part II, line 14 . . . . . . . . . . . . . . . . . 15 331/3% support test - 2019. If the organization did not check the box on line 13, and line 14 is 331/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization . . . . . . . . . . . . . . . . . . 331/3% support test - 2018. If the organization did not check a box on line 13 or 16a, and line 15 is 331/3% or more, check 10%-facts-and-circumstances test - 2019. 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 10%-facts-and-circumstances test-2018. 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 

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) 2015	<b>(b)</b> 2016	(c) 2017	(d) 2018	<b>(e)</b> 2019	(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 8	Add lines 7a and 7b						
U	line 6.)						
Secti	on B. Total Support						
	dar year (or fiscal year beginning in)	(a) 2015	<b>(b)</b> 2016	(c) 2017	(d) 2018	<b>(e)</b> 2019	(f) Total
9	Amounts from line 6						
10a	Gross income from interest, dividends,						
	payments received on securities loans, rents,						
	royalties, and income from similar sources .						
b	Unrelated business taxable income (less						
	section 511 taxes) from businesses						
	acquired after June 30, 1975						
С	Add lines 10a and 10b						
11	Net income from unrelated business						
	activities not included in line 10b, whether						
	or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital assets						
	(Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11,						
	and 12.)						
14	First five years. If the Form 990 is for the	ne organizatior	n's first, secon	d, third, fourth	, or fifth tax v	ear as a sectio	n 501(c)(3)
	organization, check this box and stop he	_			-		
Secti	on C. Computation of Public Suppor	t Percentag	е				
15	Public support percentage for 2019 (line 8	3, column (f), d	livided by line	13, column (f))		15	%
16	Public support percentage from 2018 Sch					16	%
	on D. Computation of Investment In						
17	Investment income percentage for 2019 (			•			%
18	Investment income percentage from 2018					18	%
19a	33 <sup>1</sup> / <sub>3</sub> % support tests – 2019. If the organ						
	17 is not more than 331/3%, check this box		_			-	_
b	331/3% support tests – 2018. If the organization 19 is not more than 231/204, shock this						
00	line 18 is not more than 331/3%, check this		_		· · · · · ·		_
20	<b>Private foundation.</b> If the organization di	u noi check a	DOX OF TIME 14.	. 19a. OF 19D. (	JUBUK TUS DOX	and see instrill	LUUIIS 📂 🗀

#### **Supporting Organizations** Part IV

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

#### Se

<b>Secti</b>	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 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		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) 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 12a or 12b in Part I, answer (b) and (c) 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	4b		
	despite being controlled or supervised by or in connection with its supported organizations.			
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)			
50	purposes.  Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes,"	4c		
5a	answer (b) and (c) 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	<b>Type I or Type II only.</b> Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b		
С	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5с		
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 <b>Part VI</b> .			
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor	6		
•	(as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).	8		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in <b>Part VI.</b>	00		
b	Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which	9a		
c	the supporting organization had an interest? <i>If "Yes," provide detail in Part VI.</i> Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit	9b		
•	from, assets in which the supporting organization also had an interest? If "Yes," provide detail in <b>Part VI.</b>	9с		
10a	Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated			

10a

10b

b Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to

supporting organizations)? If "Yes," answer 10b below.

determine whether the organization had excess business holdings.)

Part	V Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)			
	below, the governing body of a supported organization?	11a		
	A family member of a person described in (a) above?	11b		
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c		
Secti	on B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to			
	regularly appoint or elect at least a majority of the organization's 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 directors or trustees were allocated among the supported			
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	4		
2	Did the expenientian expects for the banefit of any supported expenientian other than the supported	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? <i>If "Yes," explain in Part</i>			
	VI 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			
	5.1. 5.1. 5.1. 5.1. 5.1. 5.1. 5.1. 5.1.		Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		
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).			
3	By reason of the relationship described in (2), did the organization's supported organizations have a	2		
3	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			l
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see i	nstru	ctions	s).
а	☐ The organization satisfied the Activities Test. Complete line 2 below.			,
b	☐ The organization is the parent of each of its supported organizations. <i>Complete line 3 below.</i>			
С	☐ The organization supported a governmental entity. Describe in Part VI how you supported a government entity (	see in	struct	ions).
2	Activities Test. Answer (a) and (b) below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.			
1-	·	2a		
b	Did the activities described in (a) 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.	26		
3	-	2b		
3 a	Parent of Supported Organizations. <i>Answer (a) and (b) below.</i> Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
а	trustees of each of the supported organizations? <i>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	Ja		
IJ	of its supported organizations? If "Yes." describe in <b>Part VI</b> the role played by the organization in this regard.	3b		

instructions).

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Org	gani	izations	
1 Check here if the organization satisfied the Integral Part Test as a qualifying instructions. All other Type III non-functionally integrated supporting organ			
Section A—Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	1		
2 Recoveries of prior-year distributions	2		
3 Other gross income (see instructions)	3		
4 Add lines 1 through 3.	4		
5 Depreciation and depletion	5		
<b>6</b> Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7 Other expenses (see instructions)	7		
8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Section B—Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
<b>1</b> Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):			
a Average monthly value of securities	1a		
<b>b</b> Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	1d		
e Discount claimed for blockage or other factors (explain in detail in Part VI):			
2 Acquisition indebtedness applicable to non-exempt-use assets	2		
3 Subtract line 2 from line 1d.	3		
4 Cash deemed held for exempt use. Enter 1-1/2% 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 .035.	6		
7 Recoveries of prior-year distributions	7		
8 Minimum Asset Amount (add line 7 to line 6)	8		
Section C-Distributable Amount	•		Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2 Enter 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		
<b>6 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	y int	tegrated Type III support	ng organization (see

Schedule A (Form 990 or 990-EZ) 2019

Part	V Type III Non-Functionally Integrated 509(a)(3	) Supporting Organi	zations (continued)	
Secti	ion D-Distributions			Current Year
1	Amounts paid to supported organizations to accomplish	exempt purposes		
2	Amounts paid to perform activity that directly furthers exe	mpt purposes of suppo	orted	
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purp	nizations		
4	Amounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval required)			
6_	Other distributions (describe in <b>Part VI</b> ). See instructions.			
	Total annual distributions. Add lines 1 through 6.			
8 	Distributions to attentive supported organizations to which (provide details in <b>Part VI</b> ). See instructions.	h the organization is res	sponsive	
9	Distributable amount for 2019 from Section C, line 6			
10	Line 8 amount divided by line 9 amount			
Secti	ion E—Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2019	(iii) Distributable Amount for 2019
1	Distributable amount for 2019 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2019			
	(reasonable cause required - explain in Part VI). See			
	instructions.			
3	Excess distributions carryover, if any, to 2019			
a	From 2014			
b	From 2015			
c	From 2016			
d	From 2017			
e	From 2018			
f	Total of lines 3a through e			
<u>g</u>	Applied to underdistributions of prior years			
<u>h</u>	Applied to 2019 distributable amount			
<u>i</u> _	Carryover from 2014 not applied (see instructions)			
	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2019 from Section D, line 7: \$			
а	Applied to underdistributions of prior years			
b	Applied to 2019 distributable amount			
С	Remainder. Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2019, if			
	any. Subtract lines 3g and 4a from line 2. For result			
	greater than zero, explain in Part VI. See instructions.			
6	Remaining underdistributions for 2019. Subtract lines 3h			
	and 4b from line 1. For result greater than zero, explain in <b>Part VI.</b> See instructions.			
7	Excess distributions carryover to 2020. Add lines 3j and 4c.			
8	Breakdown of line 7:			
а	Excess from 2015			
b	Excess from 2016			
С	Excess from 2017			
d	Excess from 2018			
e	Excess from 2019			

Schedule A (Form 990 or 990-EZ) 2019

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

#### Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service Name of the organization

#### Schedule of Contributors

► Attach to Form 990, Form 990-EZ, or Form 990-PF. ▶ Go to www.irs.gov/Form990 for the latest information. OMB No. 1545-0047

**Employer identification number** 

04-2791159 GRASSROOTS INTERNATIONAL, INC. Organization type (check one): Section: Filers of: 3) (enter number) organization Form 990 or 990-EZ × 501(c)( 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation 527 political organization 501(c)(3) exempt private foundation Form 990-PF 4947(a)(1) nonexempt charitable trust treated as a private foundation ☐ 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. General Rule For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions. **Special Rules** For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 331/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II. For an organization described in section 501(c)(7), (8), or (10) filling Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions 

#### SCHEDULE C (Form 990 or 990-EZ)

### **Political Campaign and Lobbying Activities**

OMB No. 1545-0047

2019

Open to Public Inspection

Department of the Treasury Internal Revenue Service For Organizations Exempt From Income Tax Under section 501(c) and section 527

Complete if the organization is described below.
 ► Attach to Form 990 or Form 990-EZ.
 ► Go to www.irs.gov/Form990 for instructions and the latest information.

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

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

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

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

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

• Se	ection 501(c)(4), (5), or (6) orga	anizations: Complete Part III.			
	of organization	·		Employer ider	ntification number
GRAS	SROOTS INTERNATION	NAL, INC.		04-27911	.59
Part		e organization is exempt unde	er section 501(d	c) or is a section 527 of	organization.
1	Provide a description of definition of "political can	the organization's direct and incompaign activities")	direct political ca	mpaign activities in Part	IV. (see instructions for
2	Political campaign activit	y expenditures (see instructions) .			
3		cal campaign activities (see instruc			
Part		e organization is exempt unde			
1 2 3 4a b Part 1 2 3 4 5	Enter the amount of any of the organization incurred Was a correction made? If "Yes," describe in Part I-C Complete if the Enter the amount direct activities Enter the amount of the 527 exempt function activated Total exempt function eline 17b Did the filing organization Enter the names, address organization made payments.	ly expended by the filing organization is exempt under ly expended by the filing organization's funds contribution wities	er section 501(c ation for section	section 4955	Yes No No (c)(3).  Yes No No  (c)(3).
		ontributions received that were pro- fund or a political action committed			
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization.  If none, enter -0
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					

Part II-A		section 501(h)).	is exempt under section 501(c)(3) and filed	3 Form 5/68 (ele	ection una	ər
Α	Check ▶	Check ▶ ☐ if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name,				
		address, EIN, expenses, and s	hare of excess lobbying expenditures).			
В	Check ▶	if the filing organization checke	ed box A and "limited control" provisions apply.			
		Limits on Lobby	ring Expenditures	(a) Filing	(b) Affiliate	ed
		(The term "expenditures" me	organization's totals	group tota	als	
1	la Total l	obbying expenditures to influence p	20,971.			
	<b>b</b> Total I	obbying expenditures to influence a	a legislative body (direct lobbying)	660.		
	c Total I	obbying expenditures (add lines 1a	and 1b)	21,631.		
	<b>d</b> Other	exempt purpose expenditures		8,263,668.		
	e Total e	exempt purpose expenditures (add	lines 1c and 1d)	8,285,299.		
	<b>f</b> Lobby	ing nontaxable amount. Enter the				
	colum	ns.		564,265.		
	If the a	mount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:			
	Not ove	er \$500,000	20% of the amount on line 1e.			
	Over \$5	500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.			
	Over \$1	,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.			
	Over \$1	,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.			
	Over \$1	7,000,000	\$1,000,000.			
	<b>g</b> Grassi	roots nontaxable amount (enter 25%	% of line 1f)	141,066.		
	<b>h</b> Subtra	act line 1g from line 1a. If zero or les	ss, enter -0	0.		
	i Subtra	act line 1f from line 1c. If zero or les	s, enter -0	0.		
	j If ther	e is an amount other than zero o	on either line 1h or line 1i, did the organization	file Form 4720		_
	report	ing section 4911 tax for this year?			Yes _×	<b>∨</b> No
			ar Averaging Period Under Section 501(h)			
	(Son	ne organizations that made a sec	tion 501(h) election do not have to complete all	of the five column	ns below.	

	Lobbying Expenditures During 4-Year Averaging Period								
	Calendar year (or fiscal year beginning in)	<b>(a)</b> 2016	<b>(b)</b> 2017	(c) 2018	( <b>d)</b> 2019	(e) Total			
2a	Lobbying nontaxable amount	367,194.	446,417.	413,989.	564,265.	1,791,865.			
b	Lobbying ceiling amount (150% of line 2a, column (e))					2,687,798.			
С	Total lobbying expenditures	62,832.	1,036.	108.	21,631.	85,607.			
d	Grassroots nontaxable amount	91,799.	111,604.	103,497.	141,066.	447,966.			
e	Grassroots ceiling amount (150% of line 2d, column (e))					671,949.			
f	Grassroots lobbying expenditures	61,969.	1,007.	54.	20,971.	84,001.			

See the separate instructions for lines 2a through 2f.)

Page **3** 

Part	II-B Complete if the organization is exempt under section 501(c)(3) and has NOT (election under section 501(h)).	filed I	Form	5768		
For e	each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed	(a	1)		(b)	
	iption of the lobbying activity.	Yes	No	Aı	moun	t
1	During the year, did the filing organization attempt to influence foreign, national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:					
а	Volunteers?					
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?					
С	Media advertisements?					
d	Mailings to members, legislators, or the public?					
е	Publications, or published or broadcast statements?					
f	Grants to other organizations for lobbying purposes?					
g	Direct contact with legislators, their staffs, government officials, or a legislative body?					
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?					
i	Other activities?					
j	Total. Add lines 1c through 1i					
<b>2</b> a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?					
b	If "Yes," enter the amount of any tax incurred under section 4912					
	If "Yes," enter the amount of any tax incurred by organization managers under section 4912 .					
	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?					
Part	Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6).	)(5), c	or se	ction		
					Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?			1	<u> </u>	
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2	<u> </u>	
3	Did the organization agree to carry over lobbying and political campaign activity expenditures from the			3		
Part	Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" Of answered "Yes."				ine 3	3, is
1	Dues, assessments and similar amounts from members		1			
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts political expenses for which the section 527(f) tax was paid).	of				
а	Current year		2a			
b	Carryover from last year		2b			
С	Total		2c			
3	$Aggregate\ amount\ reported\ in\ section\ 6033(e)(1)(A)\ notices\ of\ nondeductible\ section\ 162(e)\ dues\ .$		3			
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of excess does the organization agree to carryover to the reasonable estimate of nondeductible lobby	ying				
_	and political expenditure next year?		4			
5	Taxable amount of lobbying and political expenditures (see instructions)		5			
Part						
	e the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated gro instructions); and Part II-B, line 1. Also, complete this part for any additional information.	up list	t); Par	t II-A, I	nes 1	and

Schedule C (Form	n 990 or 990-EZ) 2019	Page 4
Part IV	Supplemental Information (continued)	

## 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 Name of the organization

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

Inspection

Employer identification number

GRA	SSROOTS INTERNATIONAL, INC.		04-2791	
Par	<u> </u>		ds or Acc	ounts.
	Complete if the organization answered "	Yes" on Form 990, Part IV, line 6.		
		(a) Donor advised funds	(b) i	Funds and other accounts
1	Total number at end of year			
2	Aggregate value of contributions to (during year) .			
3	Aggregate value of grants from (during year)			
4	Aggregate value at end of year			
5	Did the organization inform all donors and donor a	J		
	funds are the organization's property, subject to the	= =		
6	Did the organization inform all grantees, donors, ar			
	only for charitable purposes and not for the benefit			
_	conferring impermissible private benefit?			· · · Yes No
Par	Conservation Easements.			
	Complete if the organization answered "			
1	Purpose(s) of conservation easements held by the o			
	Preservation of land for public use (for example, recreation)	•		
	Protection of natural habitat	☐ Preservation o	of a certified	d historic structure
	☐ Preservation of open space			
2	Complete lines 2a through 2d if the organization hel	d a qualified conservation contributio	n in the for	
	easement on the last day of the tax year.			Held at the End of the Tax Year
a			-	
b	Total acreage restricted by conservation easements			
С	Number of conservation easements on a certified hi	* *		
d	Number of conservation easements included in (			
			. 2d	
3	Number of conservation easements modified, trans	ferred, released, extinguished, or terr	minated by	the organization during the
	tax year ►			
4	Number of states where property subject to conserv			
5	Does the organization have a written policy regardiations, and enforcement of the conservation eas			
6	Staff and volunteer hours devoted to monitoring, inspec			
6	Stan and volunteer nours devoted to monitoring, inspec	ting, nanding of violations, and emorcing	y conservan	on easements during the year
7	Amount of expenses incurred in monitoring, inspecting	a handling of violations and enforcing	conconvotio	n accoments during the year
•	► \$	g, nandling of violations, and emorcing	CONSCIVALIO	in easements during the year
0	Does each conservation easement reported on line 2	O(d) above estisfy the requirements of	acation 170	(/b)/4)/D)/i)
8	and section 170(h)(4)(B)(ii)?			
9	In Part XIII, describe how the organization reports of			
9	balance sheet, and include, if applicable, the text of		•	
	organization's accounting for conservation easemer		ariolal otato	monto that docombes the
Part			Other Sin	nilar Assets.
	Complete if the organization answered "			
12	If the organization elected, as permitted under FAS		io statemer	at and halance sheet works
ıa	of art, historical treasures, or other similar assets			
	service, provide in Part XIII the text of the footnote to			
b	If the organization elected, as permitted under FAS			
-	art, historical treasures, or other similar assets held			
	provide the following amounts relating to these item	•		
				▶ \$
	<ul><li>(i) Revenue included on Form 990, Part VIII, line 1</li><li>(ii) Assets included in Form 990, Part X</li></ul>			<b>\$</b>
2	If the organization received or held works of art,	historical treasures or other similar	assets for	financial gain provide the
_	following amounts required to be reported under FA		400010 101	manoiai gairi, provide tile
а				<b>▶</b> \$
b	Revenue included on Form 990, Part VIII, line 1 . Assets included in Form 990, Part X			<b>\$</b>

Schedule D (Form 990) 2019 Page 2

Par	Organizations Maintaining	Collections of	Art, His	torical 1	reasures	, or Ot	her Similar Ass	ets (conti	inued)
3	Using the organization's acquisition, collection items (check all that apply):		her recor	ds, chec	k any of th	e follov	ving that make si	gnificant us	se of its
а	☐ Public exhibition		d	Loan	or exchang	e progr	am		
b	☐ Scholarly research		е	Other					
С	☐ Preservation for future generations	;							
4	Provide a description of the organization XIII.	tion's collections a	and expla	ain how t	hey further	the org	ganization's exem	pt purpose	in Part
5	During the year, did the organization							•	
	assets to be sold to raise funds rather		ained as p	oart of the	e organizati	on's co	llection?	☐ Yes	☐ No
Par	Complete if the organization 990, Part X, line 21.		" on For	m 990, I	Part IV, line	∋ 9, or	reported an am	ount on F	orm
1a	Is the organization an agent, trustee included on Form 990, Part X?			-				t □ Yes	□ No
b	If "Yes," explain the arrangement in P								_
	, ,	·		J			An	nount	
С	Beginning balance					10	;		
d	Additions during the year					10	l l		
е	Distributions during the year					1e	•		
f	Ending balance					1f			
2a	Did the organization include an amoun						•		☐ No
	If "Yes," explain the arrangement in P	art XIII. Check her	e if the ex	cplanatio	n has been	provide	ed on Part XIII .		
Par		1 637	, <del></del>		5	40			
	Complete if the organization						( D = 1		
4	Designing of year balance	(a) Current year		or year	(c) Two year		(d) Three years back		
1a	Beginning of year balance	1,220,738.		738.		864.	691,864.	691	,864.
b	Contributions	2,590,000.	50	0,000.	428,	874.	50,000.		0.
С	Net investment earnings, gains, and losses								
d	Grants or scholarships			0.		0.	0.		0.
	Other expenditures for facilities and			0.		0.	0.		0.
е	programs								
f	Administrative expenses								
g g	End of year balance	3,810,738.	1.220	738.	1,170,	738.	741,864.	691	,864.
2	Provide the estimated percentage of t								,
a	Board designated or quasi-endowmen			- (	,,	,,			
b	Permanent endowment ▶	%	' '						
С	Term endowment ► %								
	The percentages on lines 2a, 2b, and	2c should equal 1	00%.						
3a	Are there endowment funds not in the			zation tha	at are held	and ad	ministered for the	)	
	organization by:	•	J					Ye	s No
	(i) Unrelated organizations							3a(i)	×
	(ii) Related organizations							3a(ii)	×
b	If "Yes" on line 3a(ii), are the related o	rganizations listed	as requi	red on So	chedule R?			3b	×
4	Describe in Part XIII the intended uses	s of the organization	on's endo	wment fo	unds.				-
Part									
	Complete if the organization	answered "Yes	" on For	m 990, F	Part IV, line	e 11a.	See Form 990, I	Part X, line	e 10.
	Description of property	(a) Cost or ot (investm		` '	or other basis ther)	٠,	Accumulated epreciation	(d) Book va	alue
1a	Land		0.						0.
b	Buildings								
С	Leasehold improvements				46,331.		26,767.	19	,564.
d	Equipment				28,019.		16,749.	11	,270.
е	Other								
Total.	Add lines 1a through 1e. (Column (d) n	nust equal Form 9	90, Part )	ζ, columr	(B), line 10	)c.) .	•	30	,834.

Schedule D (Form 990) 2019 Page **3** 

Part VII	Investments—Other Securities.  Complete if the organization answered "Yes" on For	m 990. Part IV. line	11b. See Form 9	990. Part X. line 12.
	(a) Description of security or category (including name of security)	(b) Book value	(c) Metho	od of valuation: f-year market value
(1) Financial	derivatives			
	neld equity interests			
(3) Other				
(A)				
(B)				
(C)				
(D)				
(E)				
(F) (G)				
(H)				
	mn (b) must equal Form 990, Part X, col. (B) line 12.) . ▶			
Part VIII	Investments – Program Related.			
	Complete if the organization answered "Yes" on For	m 990, Part IV, line	11c. See Form 9	990, Part X, line 13.
	(a) Description of investment	(b) Book value		od of valuation:
			Cost or end-o	f-year market value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)	mn (b) must equal Form 990, Part X, col. (B) line 13.) . ▶			
Part IX	Other Assets.			
r dre ix	Complete if the organization answered "Yes" on For	m 990. Part IV. line	11d. See Form 9	990. Part X. line 15.
	(a) Description		110.00010	(b) Book value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
	mn (b) must equal Form 990, Part X, col. (B) line 15.)		▶	
Part X	Other Liabilities.	m 000 Dart IV line	110 or 11f Coo	Form 000 Dort V
	Complete if the organization answered "Yes" on For line 25.	ili 990, Fait IV, iiile	TIE OF TH. See	roiii 990, Part A,
1.	(a) Description of liability			(b) Book value
(1) Federal ir				(b) DOOK Value
	icome taxes			
(2)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
	mn (b) must equal Form 990, Part X, col. (B) line 25.)		•	

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the

organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII .

X

Schedule D (Form 990) 2019 Page **4** 

Part	Reconciliation of Revenue per Audited Financial Statemer Complete if the organization answered "Yes" on Form 990,			Retur	n.
1	Total revenue, gains, and other support per audited financial statements			1	10,999,805.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			•	10,999,603.
a	Net unrealized gains (losses) on investments	2a	19,422.		
b	Donated services and use of facilities	2b	25,1221		
C	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII.)	2d			
е	Add lines <b>2a</b> through <b>2d</b>			2e	19,422.
3	Subtract line <b>2e</b> from line <b>1</b>			3	10,980,383.
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	26,907.		
b	Other (Describe in Part XIII.)	4b			
С	Add lines <b>4a</b> and <b>4b</b>			4c	26,907.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line			5	11,007,290.
Part				er Ret	urn.
	Complete if the organization answered "Yes" on Form 990,				
1	Total expenses and losses per audited financial statements			1	8,258,392.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	ا ۵-	I		
a	Donated services and use of facilities	2a		-	
b	Prior year adjustments	2b 2c		-	
c d	Other (Describe in Part XIII.)	2d		-	
e	Add lines 2a through 2d			2e	
3	Subtract line <b>2e</b> from line <b>1</b>			3	8,258,392.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	İ			0,230,332.
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	26,907.		
b	Other (Describe in Part XIII.)		, , , , , , ,		
С	Add lines <b>4a</b> and <b>4b</b>			4c	26,907.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, lin			5	8,285,299.
Part 1	XIII Supplemental Information.				
	e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a an XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part	to pro	ovide any additional in	format	ion.
Pt X	Line 2: MANAGEMENT HAS EVALUATED ITS TAX POSITIO	ONS A	APPLYING A "MOR 	E LI	KELY 
THAN	NOT" STANDARD, AND BELIEVES THERE ARE NO MATERIAL	UNC	CERTAINTIES IN	INCO	ME 
TAXE	5.				

Schedule D (Fo	orm 990) 2019	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.

OMB No. 1545-0047

2019

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

Name of the organization

Employer identification number 04-2791159

GRASSROOTS INTERNATIONAL	I, INC.			04-279	1159
<b>General Information</b> Form 990, Part IV, line		ies Outside	the United States. Con		
1 For grantmakers. Does the other assistance, the grante award the grants or assistant	es' eligibility				⊠ Yes □ No
2 For grantmakers. Describe outside the United States.		-			d other assistance
3 Activities per Region. (The fo	llowing Part	l, line 3 table c	an be duplicated if addition	nal space is needed.)	
(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in the region	(d) Activities conducted in the region (by type) (such as, fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in the region	(f) Total expenditures for and investments in the region
(1) Central America	0	0	GRANTS TO REGION		629,292.
(2) Sub-Saharan Africa	0	0	GRANTS TO REGION		538,300.
(3) Europe	0	0	PROGRAM SERVICES	PROGRAM TRAVEL	1,540.
(4) Europe	0	0	GRANTS TO REGION		155,000.
(5) Middle East	0	0	GRANTS TO REGION		273,000.
(6) East Asia and Pacific	0	0	GRANTS TO REGION		5,000.
(7) South Asia	0	0	GRANTS TO REGION		30,000.
(8) North America	0	0	GRANTS TO REGION		179,000.
(9) South America	0	0	GRANTS TO REGION		809,450.
(10) South America	0	0	PROGRAM SERVICES	SITE VISITS	17,123.
(11)					
(12)					
(13)					
(14)					
(15)					
(16)					
(17)					
<b>3a</b> Subtotal	0	0			2,637,705.
<b>b</b> Total from continuation sheets to Part I					
c Totals (add lines 3a and 3b)	0	0			2,637,705.

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	<b>(d)</b> 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)			Central America	COVID-19	10,000.	WIRE			
(2)			Central America	AGRARIAN REFORM	45,000.	WIRE			
(3)			Central America	HUMAN RIGHTS EDUCA	50,000.	WIRE			
(4)			Central America	CLIMATE JUSTICE	55,000.	WIRE			
(5)			Central America	INDIGENOUS RIGHTS	71,500.	WIRE			
(6)			Central America	WOMEN'S/LAND RIGHTS	73,500.	WIRE			
(7)			Central America	ECO AG SUPPORT	76,492.	WIRE			
(8)			Central America	TERRITORY RIGHTS	102,300.	WIRE			
(9)			Central America	EGO AG/GOAT FARMING	135,500.	WIRE			
10)			Europe	RURAL MOVEMENTS	30,000.	WIRE			
11)			Europe	SEEDS, SOIL, CLIMATE	35,000.	WIRE			
12)			Europe	SUPPORT FOR FARMERS	90,000.	WIRE			
13)			Middle East	GENDER DIVERSITY	10,000.	WIRE			
14)			Middle East	SURV OF VIOLENCE	10,000.	WIRE			
15)			Middle East	YOUTH EMPOWERMENT	15,000.	WIRE			
(16)			See Statement		1,765,750.				

Schedule F (Form 990) 2019

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

Schedule F (Form 990) 2019 Page **4** 

## Part IV Foreign Forms

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

Schedule F (Form 990) 2019 Page 5

## Part V Supplemental Information

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

Pt I Line 2: FINANCIAL ALLOCATIONS TO GRANTEES' PROJECTS ARE MONITORED THROUGH
PERIODIC FINANCIAL REPORTS AND SITE VISITS. EACH GRANTEE IS REQUIRED TO SUBMIT
A FINANCIAL REPORT ACCOUNTING FOR THE USE OF GRANT FUNDS, INCLUDING AN ITEMIZATION
OF EXPENSES, A LIST OF OTHER SOURCES OF FUNDING, AND OTHER RELEVANT ACCOUNTING
INFORMATION. GRASSROOTS INTERNATIONAL ALSO PERFORMS ANNUAL SITE VISITS TO GRANTEE
ORGANIZATIONS. DETAILED REPORTS COVERING THE IMPLEMENTATION OF PROJECTS, ANALYSIS
OF OUTCOMES, AND MEETING WITH REPRESENTATIVES OF GRANTEE ORGANIZATIONS AND BENEFICIARIES
ARE FILED BY STAFF OR CONTRACTORS.

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

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

# **Continuation Statement**

Region	Purpose of grant	Amount of cash grant	Manner of cash disbursement	Amount of noncash assistance	Description of noncash assistance	Method of valuation
Middle East	ENVIRO ED	15,000.	WIRE			
Middle East	WOMEN'S RIGHTS	18,000.	WIRE			
Middle East	COVID-19	20,000.	WIRE			
Middle East	INTL LAW/HUMAN RIGHT	22,000.	WIRE			
Middle East	MENTAL HEALTH	35,000.	WIRE			
Middle East	INTL LAW/HUMAN RIGHT	38,000.	WIRE			
Middle East	HUMAN RIGHTS	80,000.	WIRE			
North America	INDIGENOUS SUPPORT	10,000.	WIRE			
North America	ECO AGRICULTURE	40,000.	WIRE			
North America	INDIGENOUS DEFENSE	40,000.	WIRE			
North America	INDIGENOUS RIGHTS	40,000.	WIRE			
North America	INDIGENOUS SUPPORT	45,000.	WIRE			
South America	HUMAN RIGHTS/ POVERTY	10,000.	WIRE			
South America	COVID-19	10,000.	WIRE			
South America	COVID-19	10,000.	WIRE			
South America	WOMEN'S RIGHTS	12,500.	WIRE			
South America	WOMEN'S RIGHTS/ COVID	15,000.	WIRE			
South America	RURAL WOMEN RIGHTS	20,000.	WIRE			
South America	QUILOMBOLA WOMEN SUP	20,000.	WIRE			
South America	YOUTH TRAINING	25,500.	WIRE			
South America	COVID-19	35,500.	WIRE			
South America	AGRARIAN REFORM	40,000.	WIRE			
South America	BIODIVERSITY	40,000.	WIRE			
South America	HUMAN RIGHTS/COVID	45,000.	WIRE			
South America	RURAL MOVEMENTS	56,000.	WIRE			
South America	ECO AGRICULTURE	59,000.	WIRE			
South America	WATER/LAND RIGHTS	60,750.	WIRE			
South America	ECO AGRICULTURE	87,500.				
South America	HUMANITARIAN COMMUNI	118,000.	WIRE			
South America	WOMEN'S ORGANIZING	144,700.	WIRE			
South Asia	WOMEN'S RIGHTS	20,000.	WIRE			

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

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

### **Continuation Statement**

Region	Purpose of grant	Amount of cash grant	Manner of cash disbursement	Amount of noncash assistance	Description of noncash assistance	Method of valuation
Sub-Saharan Africa	WOMEN FARMING	10,000.	WIRE			
Sub-Saharan Africa	COMPOST TRAINING	10,000.	WIRE			
Sub-Saharan Africa	SEED PROPOGATION	10,000.	WIRE			
Sub-Saharan Africa	ECO AGRICULTURE	10,000.	WIRE			
Sub-Saharan Africa	ECO AGRICULTURE	10,000.	WIRE			
Sub-Saharan Africa	ECO AGRICULTURE	10,000.	WIRE			
Sub-Saharan Africa	ECO AGRICULTURE	10,000.	WIRE			
Sub-Saharan Africa	ECO AGRICULTURE	10,000.	WIRE			
Sub-Saharan Africa	ECO AGRICULTURE	10,000.	WIRE			
Sub-Saharan Africa	ECO AGRICULTURE	15,000.	WIRE			
Sub-Saharan Africa	CLIMATE JUSTICE	15,000.	WIRE			
Sub-Saharan Africa	ECO AGRICULTURE	17,500.	WIRE			
Sub-Saharan Africa	LAND GOVERNANCE	20,000.	WIRE			
Sub-Saharan Africa	ECO AGRICULTURE	20,000.	WIRE			
Sub-Saharan Africa	ECO AGRICULTURE	20,000.	WIRE			
Sub-Saharan Africa	CLIMATE JUSTICE	20,000.	WIRE			
Sub-Saharan Africa	WOMEN'S ORGANIZING	30,000.	WIRE			
Sub-Saharan Africa	WOMEN'S ORGANIZING	139,800.	WIRE			
Sub-Saharan Africa	FOOD SYSTEMS	146,000.	WIRE			
		1,765,750.		0.		

#### **SCHEDULE G** (Form 990 or 990-EZ)

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

Complete if the organization answered "Yes" on Form 990, Part IV, line 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

► Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number

04-2791159

GRASSROOTS INTERNATIONAL,	INC.				04-2791159	
<b>Part I</b> Fundraising Activities Form 990-EZ filers are				vered "Yes" on F	Form 990, Part IV, I	line 17.
1 Indicate whether the organizati	on raised funds th			_		
a 🗵 Mail solicitations		e ≥		on of non-govern		
<b>b</b> Internet and email solicitation	ons	f L		on of government	=	
c Phone solicitations		g ⊵	Special 1	fundraising events	3	
d 🗵 In-person solicitations				/		
2a Did the organization have a wr or key employees listed in Forr						
b If "Yes," list the 10 highest pai compensated at least \$5,000 b	d individuals or er	ntities (fun		•	_	
(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
DAVINCI DIRECT 1			.,			
	DIR MAIL CONSULT		×	194,746.	46,600.	148,146.
2						
3						
4						
5						
6						
7						
8						
9						
10						
Total			▶	194,746.	46,600.	148,146.
3 List all states in which the org registration or licensing.						
AZ CA CO CT DC FL GA HI IL KY ME	MD MA MI MN MO NE	H NJ NM NY	NC OH OR I	PA RI TN UT VA WA	A WI	

Pa	rt II	Fundraising Events. Con than \$15,000 of fundraisingross receipts greater tha	ng event contributions	ion answered "Yes" or and gross income on	n Form 990, Part IV, lin Form 990-EZ, lines 1 a	e 18, or reported more and 6b. List events with
		д. состосорто д. сато. пла	(a) Event #1	<b>(b)</b> Event #2	(c) Other events	(d) Total events (add col. (a) through
•			(event type)	(event type)	(total number)	col. <b>(c)</b> )
Revenue	1	Gross receipts				
Re	2	Less: Contributions Gross income (line 1 minus line 2)				
	4	Cash prizes				
	5	Noncash prizes				
Direct Expenses	6	Rent/facility costs				
ot Expo	7	Food and beverages				
Direc	8	Entertainment				
	9	Other direct expenses .				
Da	10 11 rt III	Direct expense summary. Ad Net income summary. Subtra <b>Gaming.</b> Complete if the	act line 10 from line 3, c	column (d)		ar reported more than
Га	14 111	\$15,000 on Form 990-E2	z, line 6a.	erea res on ronn s	990, Part IV, line 19, t	or reported more than
Revenue			(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
Re	1	Gross revenue				
ses	2	Cash prizes				
Direct Expenses	3	Noncash prizes				
Direct	4	Rent/facility costs				
	5	Other direct expenses .				
	6	Volunteer labor	☐ Yes % ☐ No	☐ Yes % ☐ No	☐ Yes % ☐ No	
	7	Direct expense summary. Ad	d lines 2 through 5 in c	olumn (d)		
	8	Net gaming income summary	y. Subtract line 7 from l	ine 1, column (d)		
	<b>a</b> Is	nter the state(s) in which the or the organization licensed to co "No," explain:	onduct gaming activities	s in each of these states	s?	Tes No
10		ere any of the organization's g	aming licenses revoked	•		

11	Does the organization conduct gaming activities with nonmembers?		∐ Yes	∐ No
12	Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other			_
	formed to administer charitable gaming?		☐ Yes	∐ No
13	Indicate the percentage of gaming activity conducted in:			
а	The organization's facility	13a		%
b	An outside facility	13b		%
14	Enter the name and address of the person who prepares the organization's gaming/special events book	s and		
	records:			
	Name ►			
	A dalaman N			
	Address ►			
150		!		
ısa	Does the organization have a contract with a third party from whom the organization receives garevenue?		☐ Yes	
h	If "Yes," enter the amount of gaming revenue received by the organization ► \$ and the		□ 162	
b	amount of gaming revenue retained by the third party > \$	i <b>c</b>		
С	If "Yes," enter name and address of the third party:			
·	11 103, Office flame and address of the time party.			
	Name ►			
	Address ►			
16	Gaming manager information:			
	Name ►			
	Gaming manager compensation ► \$			
	Description of services provided ►			
	☐ Director/officer ☐ Employee ☐ Independent contractor			
	□ Director/officer □ Employee □ Independent contractor			
17	Mandatory distributions:			
	Is the organization required under state law to make charitable distributions from the gaming procee	do to		
а	retain the state gaming license?		☐ Yes	□No
b	Enter the amount of distributions required under state law to be distributed to other exempt organization		103	
	spent in the organization's own exempt activities during the tax year ► \$	,,,,		
Part		mns (	iii) and	v): and
	Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any ac			
	See instructions.			
Line	e 2b col(v): IN ADDITION TO FEES FOR PROFESSIONAL FUNDRAISING SERVICES,	DAV	INCI	
DIRE	ECT BILLED GRASSROOTS INTERNATIONAL THE NET AMOUNT OF \$76,312 FOR PRINT	ED		
MATE	ERIALS, MAILHOUSE SERVICES, AND POSTAGE, FOR THE YEAR ENDED OCTOBER 31,	2020	O.	
GR <i>I</i>	ASSROOTS INTERNATIONAL IDENTIFIES EXPENSES RELATED TO DIRECT MAIL FUNDR	AISII	NG	
ON	THE BASIS OF ITEMIZED INVOICES AND DOCUMENTATION PROVIDED BY DAVINCI DI	RECT	•	

Page 3

Schedule G (Form 990 or 990-EZ) 2019

### SCHEDULE I (Form 990)

Department of the Treasury

Internal Revenue Service

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

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

▶ Attach to Form 990.

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

OMB No. 1545-0047 Open to Public

Inspection

No

X Yes

Name of the organization **Employer identification number** GRASSROOTS INTERNATIONAL, INC. 04-2791159 **General Information on Grants and Assistance** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and 

Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990,

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) AGITARTE							
678 MASS AVENUE CAMBRIDGE MA 02139	04-3420465	501C3	14,000.	0.	0	0	ARTS
(2) COLECTIVO ILE							
LUIS MUNOZ MARIAN 20 RQ CAGUAS	66-0719922	N/A	13,500.	0.	0	0	ANTI-RACIST ORGANIZING
(3) COMEDORES SOCIALES DE PUERTO RICO							
PO BOX 3181 RQ CAGUAS	66-0912044	501C3	46,000.	0.	0	0	HUNGER
(4) COORDINADORA PAZ PARA LAS MUJERES							
451 CALLE DE DIEGO RQ RIO PIEDRAS	66-0550935	501C3	39,000.	0.	0	0	WOMEN'S RIGHTS
(5) HASER, INC.							
PO BOX 649 RQ SAINT JUST	66-0861655	501C3	36,000.	0.	0	0	ENVIRONMENT
(6) INSTITUTO PARA LA INVESTIGACION Y ACCION EN AGROCOLOGIA							
AVE LA CUMBRE PMB 101 RQ SAN JUAN	66-0910974	N/A	66,000.	0.	0	0	ECO AG
(7) PLATAFORMA AGRO-CULTURAL PARA EL EMPODERAMIENTO							
107 CASTRO VINADO RQ SAN JUAN	41-2045121	N/A	64,300.	0.	0	0	INDIG RIGHTS
(8) PROSAC-D							
107 CALLE DE LA CRUZ APTO 106 RQ SAN JUAN	66-0889514	N/A	45,500.	0.	0	0	INDIG RIGHTS
(9) 350 KISHWAUKEE							
1121 LOREN DR DEKALB IL 60115	47-5356643	501C3	14,000.	0.	0	0	ENVIRONMENT
(10) ACTION CENTER							
1434 ELBRIDGE ST PHILADELPHIA PA 19149	30-0246999	501C3	20,000.	0.	0	0	ENVIRONMENT
(11) LA COSECHA COMMUNITY SUPPORTED AGRICULTURE							
318 ISLETA BLVD, STE 202 ALBUQUERQUE NM 87105	82-4552728	501C3	50,000.	0.	0	0	GENL SUPPORT
(12) See Statement							
			2,701,872.	0.			
2 Enter total number of section							. ▶70
3 Enter total number of other of	organizations liste	d in the line 1 table					. ▶ 5

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

Schedule I (Form 990) (2019)

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

Schedule I (Form 990) (2019)

pplemental Information. Pro	ovide the information re	equired in Part I, li	ine 2; Part III, colum	n (b); and any other addition	onal information.
pplemental Information. Pro	ovide the information re	equired in Part I, li	ine 2; Part III, colum	n (b); and any other addition	onal information.
pplemental Information. Pro	ovide the information re	equired in Part I, li	ine 2; Part III, colum	n (b); and any other addition	onal information.
pplemental Information. Pro	ovide the information re	equired in Part I, li	ine 2; Part III, colum	n (b); and any other addition	onal information.
pplemental Information. Pro	ovide the information re	equired in Part I, li	ine 2; Part III, colum	n (b); and any other addition	onal information.
pplemental Information. Pro	ovide the information re	equired in Part I, li	ine 2; Part III, colum	n (b); and any other addition	onal information.
pplemental Information. Pro	ovide the information re	equired in Part I, li	ine 2; Part III, colum	n (b); and any other addition	onal information.
pplemental Information. Pro	ovide the information re	equired in Part I, li	ine 2; Part III, colum	n (b); and any other addition	onal information.
pplemental Information. Pro	ovide the information re	equired in Part I, li	ine 2; Part III, colum	h (b); and any other addition	onal information.
		equired in Fart i, ii	ine z, r art iii, coluini	ir (b), and any other addition	onar imormation.
-					

# Schedule I: Grants and Other Assistance to Organizations, Governments, and Individuals in the United States Part II: Grants and Other Assistance to Domestic Organizations and Domestic Governments Continuation Statement

Name and address of organization or government	EIN	IRC Section (if applicable)	Amount of cash grant	Amount of non-cash assistance	Method of valuation (book, FMV, appraisal, other)	Description of noncash assistance	Purpose of grant or assistance
AINA MOMONA	821366588	501C3	44,000.	0.	0	0	GENL SUPPORT
PO BOX 1687, KAUNAKAKAI, HI 96748							
ALASKA COMMUNITY ACTION ON TOXICS	920177082	501C3	9,000.	0.	0	0	COVID SUPPORT
1225 E INTL AIRPORT RD, ANCHORAGE, AK 99518							
ALLIANCE FOR GLOBAL JUSTICE (AFGJ)	522094677	501C3	29,000.	0.	0	0	INDIG RIGHTS
225 E 26TH ST #1, TUCSON, AZ 85713							
ALLIED MEDIA PROJECTS	010559608	501C3	44,000.	0.	0	0	ENVIRONMENT
4126 THIRD AVE, DETROIT, MI 48201							
ALTERNATIVES FOR COMMUNITY & ENVIRONMENT	043228509	501C3	42,000.	0.	0	0	GENL SUPPORT
2201 WASHINGTON ST, STE 302, ROXBURY, MA 02119	013220303	30103	12,000.	٠.			CENTE BOTTON
BORDER NETWORK FOR HUMAN RIGHTS	742493012	501C3	34,000.	0.	0	0	ECO AG
2115 N PIEDRAS ST, EL PASO, TX 79930							
COMITE DE APOYO A LOS TRABAJADORES AGRICOLAS	222588350	501C3	44,000.	0.	0	0	GENL SUPPORT
4 DELSEA DR, GLASSBORO, NJ 08028							
CATSKILL MOUNTAINKEEPER	510583769	501C3	14,000.	0.	0	0	ENVIRONMENT
47B MAIN STREET, LIVINGSTON MANOR, NY 12758							
CENTER FOR COALFIELD JUSTICE	251781592	501C3	9,000.	0.	0	0	GENL SUPPORT
14 E BEAU ST, WASHINGTON, PA 15301							
CENTER FOR COMMUNITY ACTION AND ENVIRONMENT	330562082	501C3	20,000.	0.	0	0	GENL SUPPORT
7701 MISSION BLVD, RIVERSIDE, CA 92519			·				
CENTER FOR EARTH, ENERGY, AND DEMOCRACY	452580349	501C3	40,000.	0.	0	0	GENL SUPPORT
4513 34TH AVE S STE B, MINNEAPOLIS, MN 55406							
CENTER FOR THE STUDY OF THE AMERICAS	952672760	501C3	15,000.	0.	0	0	FARMERS
2156 JEFFERSON AVENUE, BERKELEY, CA 94703							
CENTRO POR LA JUSTICIA/SOUTHWEST WORKERS UNION 1414 E COMMERCE, SAN ANTONIO, TX 78205	742720710	501C3	44,000.	0.	0	0	GENL SUPPORT
	0.40.40000.4	50100	F.4. 0.00				
COMING CLEAN	043429794	501C3	54,000.	0.	0	0	ENVIRONMENT
28 VERNON ST, SUITE 434, BRATTLEBORO, VT 05301							
COMMUNITY HOUSING & EMPOWERMENT CONNECTION 801 PENNSYLVANIA AVE SOUTHEAST, WASHINGTON, DC 20003	521349382	501C3	14,000.	0.	0	0	ENVIRONMENT
COMMUNITY INITIATIVES	943255070	501C3	40,000.	0.	0	0	ENVIRONMENT
1000 BROADWAY STE 480, OAKLAND, CA 94607	1						
COMMUNITY NETWORKING RESOURCES 9327 BEAR LAKE WAY NW, ALBUQUERQUE, NM 87120	850437704	501C3	83,000.	0.	0	0	ENVIRONMENT

# Schedule I: Grants and Other Assistance to Organizations, Governments, and Individuals in the United States Part II: Grants and Other Assistance to Domestic Organizations and Domestic Governments Continuation Statement

DREAM OF WILD HEALTH	411632662	501C3	54,000.	0.	0	0	GENL SUPPORT
1308 E FRANKLIN AVE STE 203, MINNEAPOLIS, MN 55404							
EAST MICHIGAN ENVIRONMENTAL ACTION COUNCIL	237241219	501C3	40,000.	0.	0	0	GENL SUPPORT
4605 CASS AVE, DETROIT, MI 48201							
EDUCATION & TRAINING INSTITUTE	223665469	501C3	20,000.	0.	0	0	GENL SUPPORT
55 PATERSON STREET, NEW BRUNSWICK, NJ 08901							
EEECHO	473809502	501C3	20,000.	0.	0	0	GENL SUPPORT
PO BOX 7803, GULFPORT, MS 39506							
ENVIRONMENTAL COMMUNITY ACTION	581854834	501C3	25,000.	0.	0	0	GENL SUPPORT
250 GEORGIA AVE SE, ATLANTA, GA 30312							
FAMILY FARM DEFENDERS	391814573	501C3	10,000.	0.	0	0	GENL SUPPORT
PO BOX 1772, MADISON, WI 53701	1						
FARMWORKER ASSN OF FLORIDA	592683978	501C3	29,000.	0.	0	0	GENL SUPPORT
1264 APOPKA BLVD, APOPKA, FL 32703			,				
FUERZA UNIDA	742615917	501C3	54,000.	0.	0	0	GENL SUPPORT
710 NEW LAREDO HWY, SAN ANTONIO, TX 78211	1						
GOT GREEN	911656676	501C3	25,500.	0.	0	0	GENL SUPPORT
2514 S GRAHAM ST, SEATTLE, WA 98108							
GRASSROOTS GLOBAL JUSTICE	264633127	501C3	174,412.	0.	0	0	GENL SUPPORT
PO BOX 610663, MIAMI, FL 33261							
GWICH'IN STEERING COMMITTEE	920131608	501C3	14,000.	0.	0	0	GENL SUPPORT
PO BOX 70164, FAIRBANKS, AK 99707							
HIGHLANDER RESEARCH & EDUC CTR	620646373	501C3	29,000.	0.	0	0	YOUTH
1959 HIGHLANDER WAY, NEW MARKET, TN 37820							
INDIGENOUS EDUCATIONAL NETWORK OF TURTLE ISLAND	383653476	501C3	248,960.	0.	0	0	GENL SUPPORT
PO BOX 485, BEMIDJI, MN 56619							
INSTITUTE FOR WASHINGTON'S FUTURE	910931421	501C3	54,000.	0.	0	0	ENVIRONMENT
2720 VALENCIA ST, BELLINGHAM, WA 98226							
JUST TRANSITION ALLIANCE	522283569	501C3	44,000.	0.	0	0	GENL SUPPORT
2615 CAMINO DEL RIO SOUTH STE 40, SAN DIEGO, CA 92108							
KAHEA: THE HAWAIIAN ENVIRONMENTAL ALLIANCE	990348025	501C3	35,000.	0.	0	0	EDUCATION
PO BOX 37368, HONOLULU, HI 96837							
KENTUCKIANS FOR THE COMMONWEALTH	611015576	501C3	44,000.	0.	0	0	ENVIRONMENT
PO BOX 1293, BARBOURVILLE, KY 40906							
LA PLAZITA INSTITUTE	262486467	501C3	49,000.	0.	0	0	GENL SUPPORT
831 ISLETA BLVD SW, ALBUQUERQUE, NM 87105							
LITTLE VILLAGE ENVIRONMENTAL JUSTICE ORGANIZATION	364259477	501C3	25,000.	0.	0	0	GENL SUPPORT
2445 S SPAULDING AVE, CHICAGO, IL 60623							

# Schedule I: Grants and Other Assistance to Organizations, Governments, and Individuals in the United States Part II: Grants and Other Assistance to Domestic Organizations and Domestic Governments Continuation Statement

LOUISIANA BUCKET BRIGADE 3416 CANAL STREET NO B, NEW ORLEANS, LA 70119	721488935	501C3	20,000.	0.	0	0	ENVIRONMENT
LOUISIANA RISE	821555123	501C3	48,000.	0.	0	0	GENL SUPPORT
PO BOX 112, RAYNE, LA 70578							
MIAMI WORKERS CENTER	650942224	501C3	29,000.	0.	0	0	GENL SUPPORT
10800 BISCAYNE BLVD STE 1050, MIAMI, FL 33161							
NATIONAL FAMILY FARM COALITION 110 MARYLAND AVE NE, WASHINGTON, DC 20002	382652620	501C3	15,000.	0.	0	0	GENL SUPPORT
NATIVE MOVEMENT	680535413	501C3	45,000.	0.	0	0	GENL SUPPORT
PO BOX 83467, FAIRBANKS, AK 99708	1						
NATURE'S GARDEN FOR VICTORY & PEACE	812945569	501C3	49,000.	0.	0	0	ENVIRONMENT
1370 COUNTRY ROAD 36, TUSKEGEE, AL 36083			,				
NEW VENTURE FUND	205806345	501C3	10,000.	0.	0	0	ECO AG
1201 CONNECTICUT AVE NW, WASHINGTON, DC 20036							
NEW YORK CITY ENVIRONMENTAL JUSTICE ALLIANCE	133779250	501C3	20,000.	0.	0	0	GENL SUPPORT
166A 22ND ST, BROOKLYN, NY 11232							
NORTH AMERICAN INDIAN ASSOCIATION OF DETROIT	237192025	N/A	15,000.	0.	0	0	ENVIRONMENT
22720 PLYMOUTH RD, REDFORD, MI 48239 ORGANIZACION EN CALIFORNIA DE LIDERES CAMPESINAS							
319 LAMBERT ST STE D, OXNARD, CA 93036	954611282	501C3	24,000.	0.	0	0	GENL SUPPORT
OURSPACE WORLD INC	611663030	501C3	25,000.	0.	0	0	ENVIRONMENT
914 SILVER SPRING AVE STE 104, SILVER SPRING, MD 20910	]						
PEOPLE FOR COMMUNITY RECOVERY	363415767	501C3	35,000.	0.	0	0	GENL SUPPORT
13330 S CORLISS, RIVERDALE, IL 60827							
PUEBLO ORGANIZADO EN DEFENSA DE LA TIERRA Y SUS RECURSOS	742682311	501C3	54,000.	0.	0	0	GENL SUPPORT
PO BOX 6237, AUSTIN, TX 78762							
REDEEMER COMMUNITY PARTNERSHIP	912144336	501C3	25,000.	0.	0	0	GENL SUPPORT
PO BOX 180449, LOS ANGELES, CA 90018							
SOCIAL & ENVIRONMENTAL ENTREPRENEURS 23564 CALABASAS ROAD, SUITE 201, CALABASAS, CA 91302	954116679	501C3	280,000.	0.	0	0	ENVIRONMENT
SOCIETY OF NATIVE NATIONS	810984252	501C3	28,000.	0.	0	0	GENL SUPPORT
10730 POTRANCO RD STE 122 #282, SAN ANTONIO, TX 78251	1		,				
SOUL FIRE FARM INSTITUTE	472549969	501C3	50,000.	0.	0	0	GENL SUPPORT
1972 NY HIGHWAY 2, PETERSBURG, NY 12138	1						
SOULADARITY	472733535	501C3	40,000.	0.	0	0	GENL SUPPORT
21 HIGHLAND ST, HIGHLAND PARK, MI 48203	1						
SOUTHWEST ORGANIZING PROJECT	850368743	501C	25,000.	0.	0	0	GENL SUPPORT
211 10TH ST SW, ALBUQUERQUE, NM 87102	1						
		1					

# Schedule I: Grants and Other Assistance to Organizations, Governments, and Individuals in the United States Part II: Grants and Other Assistance to Domestic Organizations and Domestic Governments Continuation Statement

		9					
SOUTHWEST RESEARCH & INFORMATION CENTER	237159949	501C3	34,000.	0.	0	0	ENVIRONMENT
PO BOX 4524, ALBUQUERQUE, NM 87196							
THE CENTER POLE	208780215	501C3	45,000.	0.	0	0	GENL SUPPORT
PO BOX 71, GARRYOWEN, MT 59031							
TIDES CENTER	943213100	501C3	74,000.	0.	0	0	INT'L LAW/HUMAN RIGHTS
PO BOX 29907, SAN FRANCISCO, CA 94129							
UPROSE	112490531	501C3	28,000.	0.	0	0	GENL SUPPORT
462 36TH STREET, BROOKLYN, NY 11232							
URBAN TILTH	204124161	501C3	45,000.	0.	0	0	ENVIRONMENT
323 BROOKSIDE DRIVE, RICHMOND, CA 94801							
WE WANT GREEN TOO	455324148	501C3	25,000.	0.	0	0	GENL SUPPORT
3007 PENNSYLVANIA ST, DETROIT, MI 48214	]						
WESPAC FOUNDATION	133109400	501C3	10,000.	0.	0	0	INT'L LAW/HUMAN RIGHTS
77 TARRYTOWN RD SUITE 2W, WHITE PLAINS, NY 10607							
WHYHUNGER	132805575	501C3	30,000.	0.	0	0	ENVIRONMENT
505 EIGHTH AVENUE, SUITE 2100, NEW YORK, NY 10018							
						-	•

2,701,872.

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

**Noncash Contributions** 

OMB No. 1545-0047

2019

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

▶ Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.

► Attach to Form 990.

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

GRASSROOTS INTERNATIONAL, INC.

Employer identification number 04-2791159

Part	Types of Property							
		(a) Check if applicable	<b>(b)</b> Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	Method o			
1	Art—Works of art							
2	Art—Historical treasures							
3	Art—Fractional interests							
4	Books and publications							
5	Clothing and household							
•	goods							
6	Cars and other vehicles							
7	Boats and planes							
8	Intellectual property							
9	Securities—Publicly traded	×	4138	E6E 096	FMV ON DAT	re 0	י סקט	
10	Securities—Closely held stock .		4130	303,000.	FMV ON DA	LE OF	KEC	EIFI
11	Securities—Partnership, LLC,							
••	or trust interests							
12	Securities—Miscellaneous							
13	Qualified conservation contribution—Historic							
	structures							
14	Qualified conservation							
17	contribution—Other							
15	Real estate—Residential							
16	Real estate—Commercial							
17	Real estate—Other							
18	Collectibles	×	2.0	FO 176	EMIZ ON DAG		ם ו	
19	Food inventory		32	50,176.	FMV ON DAT	LE OF	REC	FILL
20	Drugs and medical supplies							
21	Taxidermy							
22	Historical artifacts							
23	Scientific specimens							
24	Archeological artifacts							
2 <del>4</del> 25								
26	Other ► ( )							
27	Other ► ( )							
28	Other ► ( ) Other ► ( )							
29	Number of Forms 8283 received	by the or	ranization during the tax y	voor for contributions for				
29	which the organization completed				29			
	which the organization completed	1 01111 0200	s, raitiv, bonee Acknowle	agement	23		Yes	No
	<b>5</b>						163	140
30a	During the year, did the organizat							
	28, that it must hold for at least to be used for exempt purposes to					30a		×
h	If "Yes," describe the arrangemen		e notaling period:			Sua		<u> </u>
b	, g		stance nelles that we are	as the review of our	onoton -! - :: -!			
31	Does the organization have a contributions?				unstandard	24	×	
20-						31		
32a	Does the organization hire or use		_	· •		200		
<b>L</b>	contributions?					32a	×	
b	•	amariat !	column (a) for a time of	wouth for which actions (-)	اد مام ماد ما			
33	If the organization didn't report an describe in Part II.	amount in	column (c) for a type of pro	pperty for which column (a)	is checked,			

Schedule M (Form 990) 2019 Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and 33, and whether Part II the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information. Pt I Line 32b: GRASSROOTS USES A LICENSED INVESTMENT BROKER TO SELL ALL STOCK RECEIVED.

#### **SCHEDULE 0** (Form 990 or 990-EZ)

# 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.

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

► Attach to Form 990 or 990-EZ. ► Go to www.irs.gov/Form990 for the latest information. Open to Public Inspection

Employer identification number

GRASSROOTS INTERNATIONAL, INC.	04-2791159	
Pt VI, Line 11b: THE TREASURER ENSURES TIMELY FILING OF PERIODIC	INFORMATIONAL	
RETURNS, INCLUDING THE IRS FORM 990. THE FINANCE COMMITTEE SHALL APPROVE THE		
FEDERAL FORM 990, MASSACHUSETTS FORM PC AND THE AUDITED FINANCIAL STATEMENTS		
BEFORE ANY FILING IS COMPLETED. A COPY OF THE COMPLETED FORM 990	IS PROVIDED	
TO ALL BOARD MEBERS BEFORE IT IS FILED.		
Pt VI, Line 12c: THE EXECUTIVE DIRECTOR OR THE EXECUTIVE COMMITT	EE SHALL EVALUATE	
ON A CASE-BY-CASE BASIS ANY FAILURE TO REPORT IN A TIMELY MANNER	A REAL OR POTENTIAL	
CONFLICT OF INTEREST, AND SHALL ACT IN CONSIDERATION OF THE SERI	OUSNESS AND CONTEXT	
OF THE FAILURE TO REPORT. THE TREASURER SHALL ENSURE THAT OFFICE	RS, DIRECTORS,	
EMPLOYEES, CONTRACTORS AND VOLUNTEERS ATTEST ANNUALLY THAT THEY	HAVE READ, UNDERSTOOD	
AND COMPLIED WITH THIS POLICY.		
Pt VI, Line 15a: THE COMMITTEE IS FURTHER AUTHORIZED TO PURCHASE	REFERENCE MATERIALS,	
OR TO RETAIN CONSULTANTS OR COMPENSATION EXPERTS AT THE EXPENSE	OF THE ORGANIZATION,	
WITHIN PARAMETERS SET BY THE BOARD. THE PERSONNEL COMMITTEE SHA	LL OBTAIN COMPARABILITY	
DATA, CONSISTING OF RELIABLE INFORMAION ABOUT COMPENSATION FOR F	UNCTIONALLY EQUIVALENT	
POSITIONS AT ORGANIZAIONS COMPARABLE TO GRASSROOTS INTERNATIONAL	. THE PERSONNEL	
COMMITTEE PROVIDES THE WRITTEN COMPENSATION PACKAGE, A RECORD OF	THOSE PARTICIPATING	
IN THE DELIBERATION, A RECORD OF ANY CONFLICTS OF INTEREST, A RE	CORD OF MATERIALS	
OR OUTSIDE CONSULTANTS USED, REFERENCE TO COMPARABILITY DATA, AN	D RATIONALE FOR	
THEIR RECOMMENDATION TO THE BOARD.		
Pt VI, Line 19: THE ORGANIZATION MAKES AVAILABLE ITS ORGANIZATIO	NAL DOCUMENTS	
ON ITS OWN WEBSITE, WEBSITES OF OTHERS AND UPON WRITTEN REQUEST	TO THE ORGANIZATION.	
Pt VI, Line 8a: THE SECRETARY OF THE BOARD DOCUMENTS THE PERIODI	C MEETINGS OF	
THE BOARD OF DIRECTORS, EXECUTIVE COMMITTEE, AND SUBCOMMITTEES O	F THE BOARD.	
MINUTES OF PRIOR MEETINGS ARE DISTRIBUTED AND APPROVED BY MEMBE	RS AT EACH MEETING.	

Employer identification number $04-2791159$
04-2/91159
MENDATIONS
NE 15A)
NS

Schedule O (Form 990 or 990-EZ) (2019)	Page <b>2</b>
Name of the organization	Employer identification number
GRASSROOTS INTERNATIONAL, INC.	04-2791159
GRADDROOTD THTERWITTOWILL, THE.	01 2791139
Chahat IIIN	
State: TN	
State: UT	
State: VA	
Chahar MA	
State: WA	
State: WI	