** PUBLIC DISCLOSURE COPY **

Extended to November 16, 2020

Return of Organization Exempt From Income Tax

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

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

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

A For the 2019 calendar year, or tax year beginning and ending

Name of organization:

GoodWeave International

Doing business as:

1111 14th Street, NW

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

Washington, DC 20005-5610

Employer identification number

52-2042014

Telephone number

(202) 234-9050

Gross receipts

8,035,773

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

H(b) Are all subordinates included? Yes X No

Website:

https://goodweave.org/

Form of organization: Corporation

Year of formation: 1996

State of legal domicile: DC

Part I | Summary

1 Briefly describe the organization's mission or most significant activities: GoodWeave works to stop child labor in global supply chains. Permanently.

2 Check this box if the organization discontinued its operations or disposed of more than 25% of its net assets.

3 Number of voting members of the governing body (Part VI, line 1a)

4 Number of independent voting members of the governing body (Part VI, line 1b)

5 Total number of individuals employed in calendar year 2019 (Part V, line 2a)

6 Total number of volunteers (estimate if necessary)

7a Total unrelated business revenue from Part VIII, column (C), line 12

7b Net unrelated business taxable income from Form 990-T, line 39

8 Contributions and grants (Part VIII, line 1h)

9 Program service revenue (Part VIII, line 2g)

10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)

11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)

12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)

13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)

14 Benefits paid to or for members (Part IX, column (A), line 4)

15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)

16a Professional fundraising fees (Part IX, column (D), line 11a)

17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-12b)

18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)

19 Revenue less expenses. Subtract line 18 from line 12

Part II | Signature Block

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

Signature of officer

Nina Smith, Chief Executive Officer

Date

8-17-20

Print/Type preparer's name

Lori A. Collingsworth

Preparer's signature

08/17/20

PTIN

P00639819

Preparer's name

Rogers & Company PLLC

Firm's EIN

58-2676261

Use Only

Firm's address

8300 Boone Boulevard, Suite 600

Phone no.

(703) 893-0300

Vienna, VA 22182

May the IRS discuss this return with the preparer shown above? (see instructions)

X Yes No

Form 990 (2019)
Form 990 (2019) GoodWeave International 52-2042014 Page 2

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization’s mission:

GoodWeave works to end child labor in global supply chains, and promotes through thought leadership fora the use of its methodologies as an effective and proven system in order to reach all 152 million child laborers around the world.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? □ Yes □ No

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

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

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

4 Describe the organization’s program service accomplishments for each of its three largest program services, as measured by expenses.

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

4a (Code: ) (Expenses $ 687,943. including grants of $ ) (Revenue $ )

GoodWeave is disrupting the cycle of child labor, slavery, illiteracy, and poverty through the following interrelated strategies:

Harness Market Forces:

From the garment factories of Bangladesh to the cocoa fields of the Ivory Coast, there are 152 million child laborers today. That’s one out of every 12 children in the world. The rug industry has one of the highest levels and harshest forms of child labor—an estimated 200,000 children are exploited to weave carpets destined for elite showrooms and some of the most recognized retailers in the West.

See Schedule O for Continuation

4b (Code: ) (Expenses $ 1,474,224. including grants of $ 833,827. ) (Revenue $ 762,777. )

Develop Child-labor-free Supply Chains:

Inspection, Monitoring and Certification:

GoodWeave certification offers the best assurance that rugs and textiles are made without the use of child labor. GoodWeave’s inspection system is the only one that reaches all levels of the supply chain in an informal manufacturing sector. In 2019, the work of GoodWeave’s national inspection teams in South Asia reached almost 80,000 workers through monitoring visits to facilities, which also resulted in 2.6 million rugs certified as child-labor-free. This work directly led to the rescue of 1,440 children from exploitation – the majority of whom were victims of trafficking.

See Schedule O for Continuation

4c (Code: ) (Expenses $ 865,543. including grants of $ 386,599. ) (Revenue $ )

Provide Educational Opportunities to Children:

In 2019, GoodWeave provided direct access to education to 21,663 children. GoodWeave teams in India, Nepal and Afghanistan have continued to innovate program design, introducing education programs ranging from home-schooling for girls in Afghan weaving communities to operating daycare and early childhood education programs in Nepal to establishing entire "child-friendly" communities throughout North India’s informal worker regions. While the implementation model, scope and scale from community to community varies, the strategy behind doing this remains the same. These programs either serve victims and/or address the root causes of child labor.

See Schedule O for Continuation

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

(Expenses $ 509,117. including grants of $ 50,000. ) (Revenue $ )

4e Total program service expenses $ 3,536,827.
### Part IV Checklist of Required Schedules

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>If &quot;Yes,&quot; complete Schedule A</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2. Is the organization required to complete Schedule B, Schedule of Contributors?</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>3. Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office?</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>If &quot;Yes,&quot; complete Schedule C, Part I</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4. Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year?</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>If &quot;Yes,&quot; complete Schedule C, Part II</td>
<td></td>
<td></td>
</tr>
<tr>
<td>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?</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>If &quot;Yes,&quot; complete Schedule C, Part III</td>
<td></td>
<td></td>
</tr>
<tr>
<td>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?</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>If &quot;Yes,&quot; complete Schedule D, Part I</td>
<td></td>
<td></td>
</tr>
<tr>
<td>7. Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures?</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>If &quot;Yes,&quot; complete Schedule D, Part II</td>
<td></td>
<td></td>
</tr>
<tr>
<td>8. Did the organization maintain collections of works of art, historical treasures, or other similar assets?</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>If &quot;Yes,&quot; complete Schedule D, Part III</td>
<td></td>
<td></td>
</tr>
<tr>
<td>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?</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>If &quot;Yes,&quot; complete Schedule D, Part IV</td>
<td></td>
<td></td>
</tr>
<tr>
<td>10. Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments?</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>If &quot;Yes,&quot; complete Schedule D, Part V</td>
<td></td>
<td></td>
</tr>
<tr>
<td>11. If the organization’s answer to any of the following questions is &quot;Yes,&quot; then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>a. Did the organization report an amount for land, buildings, and equipment in Part X, line 10?</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>If &quot;Yes,&quot; complete Schedule D, Part VI</td>
<td></td>
<td></td>
</tr>
<tr>
<td>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?</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>If &quot;Yes,&quot; complete Schedule D, Part VII</td>
<td></td>
<td></td>
</tr>
<tr>
<td>c. Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16?</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>If &quot;Yes,&quot; complete Schedule D, Part VIII</td>
<td></td>
<td></td>
</tr>
<tr>
<td>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?</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>If &quot;Yes,&quot; complete Schedule D, Part IX</td>
<td></td>
<td></td>
</tr>
<tr>
<td>e. Did the organization report an amount for other liabilities in Part X, line 25?</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>If &quot;Yes,&quot; complete Schedule D, Part X</td>
<td></td>
<td></td>
</tr>
<tr>
<td>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)?</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>If &quot;Yes,&quot; complete Schedule D, Part X</td>
<td></td>
<td></td>
</tr>
<tr>
<td>12a. Did the organization obtain separate, independent audited financial statements for the tax year?</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>If &quot;Yes,&quot; complete Schedule D, Parts XI and XII</td>
<td></td>
<td></td>
</tr>
<tr>
<td>b. Was the organization included in consolidated, independent audited financial statements for the tax year?</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>If &quot;Yes,&quot; and if the organization answered &quot;No&quot; to line 12a, then completing Schedule D, Parts XI and XII is optional</td>
<td></td>
<td></td>
</tr>
<tr>
<td>13. Is the organization a school described in section 170(b)(1)(A)(ii)?</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>If &quot;Yes,&quot; complete Schedule E</td>
<td></td>
<td></td>
</tr>
<tr>
<td>14a. Did the organization maintain an office, employees, or agents outside of the United States?</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>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?</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>If &quot;Yes,&quot; complete Schedule F, Parts I and IV</td>
<td></td>
<td></td>
</tr>
<tr>
<td>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?</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>If &quot;Yes,&quot; complete Schedule F, Parts II and IV</td>
<td></td>
<td></td>
</tr>
<tr>
<td>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?</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>If &quot;Yes,&quot; complete Schedule F, Parts III and IV</td>
<td></td>
<td></td>
</tr>
<tr>
<td>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?</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>If &quot;Yes,&quot; complete Schedule F, Part I</td>
<td></td>
<td></td>
</tr>
<tr>
<td>18. Did the organization report more than $15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a?</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>If &quot;Yes,&quot; complete Schedule G, Part II</td>
<td></td>
<td></td>
</tr>
<tr>
<td>19. Did the organization report more than $15,000 of gross income from gaming activities on Part VIII, line 9a?</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>If &quot;Yes,&quot; complete Schedule G, Part III</td>
<td></td>
<td></td>
</tr>
<tr>
<td>20a. Did the organization operate one or more hospital facilities?</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>b. If &quot;Yes&quot; to line 20a, did the organization attach a copy of its audited financial statements to this return?</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>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 17?</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>If &quot;Yes,&quot; complete Schedule I, Parts I and II</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Part IV Checklist of Required Schedules (continued)

22 Did the organization report more than $5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III

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

24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than $100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a

b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?

c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?

d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?

25a 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

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

26 Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II

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

28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions, for applicable filing thresholds, conditions, and exceptions):

a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV

b A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV

c A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If "Yes," complete Schedule L, Part IV

29 Did the organization receive more than $25,000 in non-cash contributions? If "Yes," complete Schedule M

30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M

31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I

32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II

33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I

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

35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?

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

36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2

37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI

38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?

Note: All Form 990 filers are required to complete Schedule O

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

1a Enter the number reported in Box 3 of Form 1096. Enter 0 if not applicable

1b Enter the number of Forms W-2G included in line 1a. Enter 0 if not applicable

c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?
Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

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] 21

2b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? [2b] X

Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)

3a Did the organization have unrelated business gross income of $1,000 or more during the year? [3a] X

3b If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O [3b]

4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? [4a] X

4b If "Yes," enter the name of the foreign country


5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? [5a] X

5b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? [5b] X

5c If "Yes" to line 5a or 5b, did the organization file Form 8886-T? ................................................................. [5c]

6a Does the organization have annual gross receipts that are normally greater than $100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions? [6a] X

6b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? [6b]

7 Organizations that may receive deductible contributions under section 170(c).

7a Did the organization receive a payment in excess of $75 made partly as a contribution and partly for goods and services provided to the payor? [7a] X

7b If "Yes," did the organization notify the donor of the value of the goods or services provided? [7b]

7c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? ................................................................. [7c] X

7d If "Yes," indicate the number of Forms 8282 filed during the year [7d]

7e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? [7e] X

7f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? [7f] X

7g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? [7g]

7h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? [7h]

8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year? ................................................................. [8]

9 Sponsoring organizations maintaining donor advised funds.

9a Did the sponsoring organization make any taxable distributions under section 4966? [9a]

9b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? [9b]

10 Section 501(c)(7) organizations. Enter:

10a Initiation fees and capital contributions included on Part VIII, line 12 ................................................................. [10a]

10b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities ................................................................. [10b]

11 Section 501(c)(12) organizations. Enter:

11a Gross income from members or shareholders ................................................................. [11a]

11b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) ................................................................. [11b]

12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? [12a]

12b 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.

13a Is the organization licensed to issue qualified health plans in more than one state? [13a]

Note: See the instructions for additional information the organization must report on Schedule O.

13b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans ................................................................. [13b]

13c Enter the amount of reserves on hand ................................................................. [13c]

14a Did the organization receive any payments for indoor tanning services during the tax year? [14a] X

14b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O [14b] X

15 Is the organization subject to the section 4960 tax on payment(s) of more than $1,000,000 in remuneration or excess parachute payment(s) during the year? [15] X

15a If "Yes," see instructions and file Form 4720, Schedule N.

16 Is the organization an educational institution subject to the section 4968 excise tax on net investment income? [16] X

16a If "Yes," complete Form 4720, Schedule O.
Section A. Governing Body and Management

1a Enter the number of voting members of the governing body at the end of the tax year. If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O. 

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>1a</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

1b Enter the number of voting members included on line 1a, above, who are independent. 

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>1b</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee? 

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>2</td>
<td></td>
<td>X</td>
</tr>
</tbody>
</table>

3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person? 

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>3</td>
<td></td>
<td>X</td>
</tr>
</tbody>
</table>

4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>4</td>
<td></td>
<td>X</td>
</tr>
</tbody>
</table>

5 Did the organization become aware during the year of a significant diversion of the organization's assets? 

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>5</td>
<td></td>
<td>X</td>
</tr>
</tbody>
</table>

6 Did the organization have members or stockholders? 

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>6</td>
<td></td>
<td>X</td>
</tr>
</tbody>
</table>

7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? 

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>7a</td>
<td></td>
<td>X</td>
</tr>
</tbody>
</table>

7b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? 

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>7b</td>
<td></td>
<td>X</td>
</tr>
</tbody>
</table>

8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: 

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>a</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>b</td>
<td></td>
<td>X</td>
</tr>
</tbody>
</table>

9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O. 

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>9</td>
<td></td>
<td>X</td>
</tr>
</tbody>
</table>

Section B. Policies

This Section B requests information about policies not required by the Internal Revenue Code.

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>10a</td>
<td></td>
<td>X</td>
</tr>
</tbody>
</table>

10b Did the organization have local chapters, branches, or affiliates? 

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>10b</td>
<td></td>
<td>X</td>
</tr>
</tbody>
</table>

11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>11a</td>
<td></td>
<td>X</td>
</tr>
</tbody>
</table>

12a Did the organization have a written conflict of interest policy? If "No," go to line 13 

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>12a</td>
<td></td>
<td>X</td>
</tr>
</tbody>
</table>

12b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>12b</td>
<td></td>
<td>X</td>
</tr>
</tbody>
</table>

12c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done 

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>12c</td>
<td></td>
<td>X</td>
</tr>
</tbody>
</table>

13 Did the organization have a written whistleblower policy? 

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>13</td>
<td></td>
<td>X</td>
</tr>
</tbody>
</table>

14 Did the organization have a written document retention and destruction policy? 

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>14</td>
<td></td>
<td>X</td>
</tr>
</tbody>
</table>

15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? 

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>a</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>b</td>
<td></td>
<td>X</td>
</tr>
</tbody>
</table>

15a The organization's CEO, Executive Director, or top management official 

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>15a</td>
<td></td>
<td>X</td>
</tr>
</tbody>
</table>

15b Other officers or key employees of the organization 

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>15b</td>
<td></td>
<td>X</td>
</tr>
</tbody>
</table>

16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? 

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>16a</td>
<td></td>
<td>X</td>
</tr>
</tbody>
</table>

16b 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? 

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>16b</td>
<td></td>
<td>X</td>
</tr>
</tbody>
</table>

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed: CT, DC, FL, IL, MD, MA, NJ, NY, NC, OH, PA, RI

18 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. 

<p>| | | | | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>18</td>
<td>Own website</td>
<td>Another's website</td>
<td>Upon request</td>
<td>Other (explain on Schedule O)</td>
</tr>
</tbody>
</table>

19 Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year. 

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

Cyndi Janetzko, CFO - (202) 234-9050

1111 14th Street, NW, No. 820, Washington, DC 20005-5610

See Schedule O for full list of states
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.

<table>
<thead>
<tr>
<th>(A) Name and title</th>
<th>(B) Average hours per week</th>
<th>(C) Position</th>
<th>(D) Reportable compensation from the organization (W-2/1099-MISC)</th>
<th>(E) Reportable compensation from related organizations (W-2/1099-MISC)</th>
<th>(F) Estimated amount of other compensation from the organization and related organizations</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1) Claude Fontheim Chair</td>
<td>1.00</td>
<td>X X</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>(2) Kul Gautam     Vice Chair</td>
<td>1.00</td>
<td>X X</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>(3) Marc Triaureau Treasurer</td>
<td>1.00</td>
<td>X X</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>(4) Pat Zerega     Secretary</td>
<td>1.00</td>
<td>X X</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>(5) Pharis Harvey  Emeritus Director</td>
<td>1.00</td>
<td>X</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>(6) Patricia Hambrick Director</td>
<td>1.00</td>
<td>X</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>(7) Barbara Hawthorn Director</td>
<td>1.00</td>
<td>X</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>(8) Leslie Johnston Director</td>
<td>1.00</td>
<td>X</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>(9) Amol Mehra     Director</td>
<td>1.00</td>
<td>X</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>(10) Edward Millard Director</td>
<td>1.00</td>
<td>X</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>(11) Venkat Reddy     Director</td>
<td>1.00</td>
<td>X</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>(12) Dan Viederman Director</td>
<td>1.00</td>
<td>X</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>(13) Michelle Cross Fenty Director</td>
<td>1.00</td>
<td>X</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>(14) Nancy Wilson Director through October 2019</td>
<td>1.00</td>
<td>X</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>(15) John Taylor Director through June 2019</td>
<td>1.00</td>
<td>X</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>(16) Nina Smith Chief Executive Officer</td>
<td>40.00</td>
<td>X</td>
<td>136,907.</td>
<td>0.</td>
<td>13,333.</td>
</tr>
<tr>
<td>(17) Cyndi Janetzko Chief Financial Officer</td>
<td>32.00</td>
<td>X</td>
<td>96,462.</td>
<td>0.</td>
<td>2,908.</td>
</tr>
</tbody>
</table>
### Part VII  Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

<table>
<thead>
<tr>
<th>(A) Name and title</th>
<th>(B) Average hours per week (list any hours for related organizations below line)</th>
<th>(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)</th>
<th>(D) Reportable compensation from the organization (W-2/1099-MISC)</th>
<th>(E) Reportable compensation from related organizations (W-2/1099-MISC)</th>
<th>(F) Estimated amount of other compensation from the organization and related organizations</th>
</tr>
</thead>
</table>

1. **Former Individual trustee or director**
2. **Institutional trustee**
3. **Officer**
4. **Highest compensated employee**
5. **Key employee**

(Do not check more than one box, unless person is both an officer and a director/trustee)

---

**Section B. Independent Contractors**

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

<table>
<thead>
<tr>
<th>(A) Name and business address</th>
<th>(B) Description of services</th>
<th>(C) Compensation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Safeguard World International LTD, Suite 3-5 Edwin Foden Business Center Moss Lane, UK Consultant</td>
<td>Dedicated to GW</td>
<td>112,367.</td>
</tr>
</tbody>
</table>

---

2. Total number of independent contractors (including but not limited to those listed above) who received more than $100,000 of compensation from the organization: 1
<table>
<thead>
<tr>
<th>Contributions, Gifts, Grants</th>
<th>Business Code</th>
<th>(A) Total revenue</th>
<th>(B) Related or exempt function revenue</th>
<th>(C) Unrelated business revenue</th>
<th>(D) Revenue excluded from tax under sections 512 - 514</th>
</tr>
</thead>
<tbody>
<tr>
<td>Noncash contributions included in lines 1a-1f</td>
<td>932009</td>
<td>5,131,636.</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Contributions, Gifts, Grants, and Other Similar Amounts</th>
<th>Business Code</th>
<th>(A) Total revenue</th>
<th>(B) Related or exempt function revenue</th>
<th>(C) Unrelated business revenue</th>
<th>(D) Revenue excluded from tax under sections 512 - 514</th>
</tr>
</thead>
<tbody>
<tr>
<td>Federated campaigns</td>
<td>900099</td>
<td>700,457.</td>
<td></td>
<td></td>
<td>700,457.</td>
</tr>
<tr>
<td>Membership dues</td>
<td>900099</td>
<td>71,776.</td>
<td></td>
<td></td>
<td>71,776.</td>
</tr>
<tr>
<td>Fundraising events</td>
<td>900099</td>
<td>62,320.</td>
<td></td>
<td></td>
<td>62,320.</td>
</tr>
<tr>
<td>Related organizations</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Government grants (contributions)</td>
<td>900099</td>
<td>306,552.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>All other contributions, gifts, grants, and similar amounts not included above</td>
<td>900099</td>
<td>4,825,084.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Net income or (loss) from fundraising events</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Gross rents</td>
<td>900099</td>
<td>14,647.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Less: rental expenses</td>
<td>900099</td>
<td>50.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Gross amount from sales of assets other than inventory</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Less: cost or other basis and sales expenses</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Gain or (loss)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Royalties</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>FX Gain (Loss)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Reimbursements/ other</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>All other revenue</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total. Add lines 1a-1f</td>
<td></td>
<td>5,131,636.</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
## 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).

### Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.

<table>
<thead>
<tr>
<th>A</th>
<th>B</th>
<th>C</th>
<th>D</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total expenses</td>
<td>Program service expenses</td>
<td>Management and general expenses</td>
<td>Fundraising expenses</td>
</tr>
</tbody>
</table>

1. Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21
2. Grants and other assistance to domestic individuals. See Part IV, line 22
3. Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16
4. Benefits paid to or for members
5. Compensation of current officers, directors, trustees, and key employees
6. Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)
7. Other salaries and wages
8. Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)
9. Other employee benefits
10. Payroll taxes
11. Fees for services (nonemployees):
   a. Management
   b. Legal
   c. Accounting
   d. Lobbying
   e. Professional fundraising services. See Part IV, line 17
   f. Investment management fees
   g. Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch O.)
12. Advertising and promotion
13. Office expenses
14. Information technology
15. Royalties
16. Occupancy
17. Travel
18. Payments of travel or entertainment expenses for any federal, state, or local public officials
19. Conferences, conventions, and meetings
20. Interest
21. Payments to affiliates
22. Depreciation, depletion, and amortization
23. Insurance
24. Other expenses. Itemize expenses not covered above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)
   a. Social program support
   b. Membership/compliance
   c. Bad debt
   d. Taxes
   e. All other expenses
25. Total functional expenses. Add lines 1 through 24e
26. Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.

### Form 990 (2019) Page 10
### Part X: Balance Sheet

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

<table>
<thead>
<tr>
<th>Assets</th>
<th>(A) Beginning of year</th>
<th>(B) End of year</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Cash - non-interest-bearing</td>
<td>130,053</td>
<td>383,197</td>
</tr>
<tr>
<td>2 Savings and temporary cash investments</td>
<td>510,033</td>
<td>625,299</td>
</tr>
<tr>
<td>3 Pledges and grants receivable, net</td>
<td>1,321,782</td>
<td>3,069,276</td>
</tr>
<tr>
<td>4 Accounts receivable, net</td>
<td>496,182</td>
<td>448,969</td>
</tr>
<tr>
<td>5 Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons</td>
<td></td>
<td></td>
</tr>
<tr>
<td>6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>7 Notes and loans receivable, net</td>
<td></td>
<td></td>
</tr>
<tr>
<td>8 Inventories for sale or use</td>
<td></td>
<td></td>
</tr>
<tr>
<td>9 Prepaid expenses and deferred charges</td>
<td>37,161</td>
<td>36,723</td>
</tr>
<tr>
<td>10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D</td>
<td>197,537</td>
<td></td>
</tr>
<tr>
<td>10b Less: accumulated depreciation</td>
<td>150,920</td>
<td>64,337</td>
</tr>
<tr>
<td>11 Investments - publicly traded securities</td>
<td></td>
<td>105,262</td>
</tr>
<tr>
<td>12 Investments - other securities. See Part IV, line 11</td>
<td></td>
<td>110,834</td>
</tr>
<tr>
<td>13 Investments - program-related. See Part IV, line 11</td>
<td></td>
<td></td>
</tr>
<tr>
<td>14 Intangible assets</td>
<td></td>
<td>1,414,257</td>
</tr>
<tr>
<td>15 Other assets. See Part IV, line 11</td>
<td></td>
<td>1,447,124</td>
</tr>
<tr>
<td>16 Total assets. Add lines 1 through 15 (must equal line 33)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>17 Accounts payable and accrued expenses</td>
<td>60,094</td>
<td>65,169</td>
</tr>
<tr>
<td>18 Grants payable</td>
<td>448,267</td>
<td>807,308</td>
</tr>
<tr>
<td>19 Deferred revenue</td>
<td>39,867</td>
<td>9,267</td>
</tr>
<tr>
<td>20 Tax-exempt bond liabilities</td>
<td></td>
<td></td>
</tr>
<tr>
<td>21 Escrow or custodial account liability. Complete Part IV of Schedule D</td>
<td></td>
<td></td>
</tr>
<tr>
<td>22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons</td>
<td></td>
<td></td>
</tr>
<tr>
<td>23 Secured mortgages and notes payable to unrelated third parties</td>
<td></td>
<td></td>
</tr>
<tr>
<td>24 Unsecured notes and loans payable to unrelated third parties</td>
<td></td>
<td></td>
</tr>
<tr>
<td>25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D</td>
<td></td>
<td></td>
</tr>
<tr>
<td>26 Total liabilities. Add lines 17 through 25</td>
<td>431,966</td>
<td>355,240</td>
</tr>
<tr>
<td>27 Net assets without donor restrictions</td>
<td>1,742,837</td>
<td>1,644,234</td>
</tr>
<tr>
<td>28 Net assets with donor restrictions</td>
<td>1,379,549</td>
<td>3,310,334</td>
</tr>
<tr>
<td>Net Assets or Fund Balances</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Organizations that follow FASB ASC 958, check here</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>and complete lines 27, 28, 32, and 33.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>29 Capital stock or trust principal, or current funds</td>
<td></td>
<td>32</td>
</tr>
<tr>
<td>30 Paid-in or capital surplus, or land, building, or equipment fund</td>
<td></td>
<td></td>
</tr>
<tr>
<td>31 Retained earnings, endowment, accumulated income, or other funds</td>
<td></td>
<td></td>
</tr>
<tr>
<td>32 Total net assets or fund balances</td>
<td>3,122,386</td>
<td>4,954,568</td>
</tr>
<tr>
<td>33 Total liabilities and net assets/fund balances</td>
<td>4,102,580</td>
<td>6,193,552</td>
</tr>
</tbody>
</table>
### Part XI Reconciliation of Net Assets

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

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>5,943,906.</td>
</tr>
<tr>
<td>2</td>
<td>4,116,068.</td>
</tr>
<tr>
<td>3</td>
<td>1,827,838.</td>
</tr>
<tr>
<td>4</td>
<td>3,122,386.</td>
</tr>
<tr>
<td>5</td>
<td>4,344.</td>
</tr>
<tr>
<td>6</td>
<td></td>
</tr>
<tr>
<td>7</td>
<td></td>
</tr>
<tr>
<td>8</td>
<td></td>
</tr>
<tr>
<td>9</td>
<td>0.</td>
</tr>
<tr>
<td>10</td>
<td>4,954,568.</td>
</tr>
</tbody>
</table>

### Part XII Financial Statements and Reporting

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

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td></td>
</tr>
<tr>
<td>2a</td>
<td>X</td>
</tr>
<tr>
<td>2b</td>
<td>X</td>
</tr>
<tr>
<td>2c</td>
<td>X</td>
</tr>
<tr>
<td>3a</td>
<td>X</td>
</tr>
<tr>
<td>3b</td>
<td></td>
</tr>
</tbody>
</table>

Form 990 (2019) GoodWeave International 52-2042014 Page 12
Part I  Reason for Public Charity Status  (All organizations must complete this part.)  See instructions.

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

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

<table>
<thead>
<tr>
<th>(i) Name of supported organization</th>
<th>(ii) EIN</th>
<th>(iii) Type of organization (described on lines 1-10 above (see instructions))</th>
<th>(iv) Is the organization listed in your governing document?</th>
<th>(v) Amount of monetary support (see instructions)</th>
<th>(vi) Amount of other support (see instructions)</th>
</tr>
</thead>
</table>

Total

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. 932021  09-25-19  Schedule A (Form 990 or 990-EZ) 2019
## Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

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

### Section A. Public Support

Calendar year (or fiscal year beginning in) | (a) 2015 | (b) 2016 | (c) 2017 | (d) 2018 | (e) 2019 | (f) Total
--- | --- | --- | --- | --- | --- | ---
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") | 3,232,842 | 3,588,678 | 2,608,894 | 3,382,968 | 5,131,636 | 17,945,018
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf | | | | | | 
3 The value of services or facilities furnished by a governmental unit to the organization without charge | | | | | | 
4 Total. Add lines 1 through 3 | 3,232,842 | 3,588,678 | 2,608,894 | 3,382,968 | 5,131,636 | 17,945,018
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) | | | | | | 
6 Public support. Subtract line 5 from line 4 | | | | | | 

### Section B. Total Support

Calendar year (or fiscal year beginning in) | (a) 2015 | (b) 2016 | (c) 2017 | (d) 2018 | (e) 2019 | (f) Total
--- | --- | --- | --- | --- | --- | ---
7 Amounts from line 4 | 3,232,842 | 3,588,678 | 2,608,894 | 3,382,968 | 5,131,636 | 17,945,018
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources | 613,398 | 668,299 | 625,276 | 719,069 | 715,104 | 3,341,146
9 Net income from unrelated business activities, whether or not the business is regularly carried on | | | | | | 
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) | | | | | | 
11 Total support. Add lines 7 through 10 | 21,286,164 | | | | | 
12 Gross receipts from related activities, etc. (see instructions) | | | | | | 
13 First five years. If the Form 990 is for the organization’s first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here | | | | | | 

### Section C. Computation of Public Support Percentage

14 Public support percentage for 2019 (line 6, column (f) divided by line 11, column (f)) | 42.10% | | | | | 
15 Public support percentage from 2018 Schedule A, Part II, line 14 | 51.94% | | | | | 
16a 33 1/3% support test - 2019. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization | | | | | | 
16b 33 1/3% support test - 2018. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization | | | | | | 
17a 10% - facts-and-circumstances test - 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 organization | | | | | | 
17b 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 supported organization | | | | | | 
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions | | | | | |
### Section A. Public Support

**Calendar year (or fiscal year beginning in)**

<table>
<thead>
<tr>
<th></th>
<th>(a) 2015</th>
<th>(b) 2016</th>
<th>(c) 2017</th>
<th>(d) 2018</th>
<th>(e) 2019</th>
<th>(f) Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Gifts, grants, contributions, and membership fees received. (Do not include any &quot;unusual grants.&quot;)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>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</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>Gross receipts from activities that are not an unrelated trade or business under section 513</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>Tax revenues levied for the organization’s benefit and either paid to or expended on its behalf</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>The value of services or facilities furnished by a governmental unit to the organization without charge</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6</td>
<td><strong>Total. Add lines 1 through 5</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7a</td>
<td>Amounts included on lines 1, 2, and 3 received from disqualified persons</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7b</td>
<td>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</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7c</td>
<td>Add lines 7a and 7b</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>8</td>
<td><strong>Public support. (Subtract line 7c from line 6)</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Section B. Total Support

**Calendar year (or fiscal year beginning in)**

<table>
<thead>
<tr>
<th></th>
<th>(a) 2015</th>
<th>(b) 2016</th>
<th>(c) 2017</th>
<th>(d) 2018</th>
<th>(e) 2019</th>
<th>(f) Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>9</td>
<td>Amounts from line 6</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10a</td>
<td>Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10b</td>
<td>Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>11</td>
<td>Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>12</td>
<td>Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>13</td>
<td><strong>Total support. (Add lines 9, 10a, 11, and 12)</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>14</td>
<td><strong>First five years.</strong> If the Form 990 is for the organization’s first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and <strong>stop here</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Section C. Computation of Public Support Percentage

<table>
<thead>
<tr>
<th></th>
<th></th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>15</td>
<td>Public support percentage for 2019 (line 8, column (f), divided by line 13, column (f))</td>
<td>15</td>
</tr>
<tr>
<td>16</td>
<td>Public support percentage from 2018 Schedule A, Part III, line 15</td>
<td>16</td>
</tr>
</tbody>
</table>

### Section D. Computation of Investment Income Percentage

<table>
<thead>
<tr>
<th></th>
<th></th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>17</td>
<td>Investment income percentage for 2019 (line 10c, column (f), divided by line 13, column (f))</td>
<td>17</td>
</tr>
<tr>
<td>18</td>
<td>Investment income percentage from 2018 Schedule A, Part III, line 17</td>
<td>18</td>
</tr>
</tbody>
</table>

<p>| | | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>19a</td>
<td><strong>33 1/3% support tests - 2019.</strong> If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and <strong>stop here.</strong> The organization qualifies as a publicly supported organization</td>
<td></td>
</tr>
<tr>
<td>19b</td>
<td><strong>33 1/3% support tests - 2018.</strong> If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and <strong>stop here.</strong> The organization qualifies as a publicly supported organization</td>
<td></td>
</tr>
<tr>
<td>20</td>
<td><strong>Private foundation.</strong> If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions</td>
<td></td>
</tr>
</tbody>
</table>
Section A. All Supporting Organizations

1. Are all of the organization’s supported organizations listed by name in the organization’s governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.

   - [ ] Yes  [ ] No

2. Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).

   - [ ] Yes  [ ] No

3a. Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.

   - [ ] Yes  [ ] No

   b. Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.

   - [ ] Yes  [ ] No

   c. Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.

   - [ ] Yes  [ ] No

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.

   - [ ] Yes  [ ] No

   b. Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.

   - [ ] Yes  [ ] No

   c. Did the organization have any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.

   - [ ] Yes  [ ] No

5a. Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization’s organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).

   - [ ] Yes  [ ] No

   b. Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization’s organizing document?

   - [ ] Yes  [ ] No

   c. Substitutions only. Was the substitution the result of an event beyond the organization’s control?

   - [ ] Yes  [ ] No

6. Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization’s supported organizations? If "Yes," provide detail in Part VI.

   - [ ] Yes  [ ] No

7. Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).

   - [ ] Yes  [ ] No

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).

   - [ ] Yes  [ ] No

9a. Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.

   - [ ] Yes  [ ] No

   b. Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.

   - [ ] Yes  [ ] No

   c. Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.

   - [ ] Yes  [ ] No

10a. Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below.

   - [ ] Yes  [ ] No

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

   - [ ] Yes  [ ] No
## Part IV Supporting Organizations

### Section B. Type I Supporting Organizations

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>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?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>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?</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Section C. Type II Supporting Organizations

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>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)?</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Section D. All Type III Supporting Organizations

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>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?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>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?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3. By reason of the relationship described in (2), did the organization’s supported organizations have a significant voice in the organization’s investment policies and in directing the use of the organization’s income or assets at all times during the tax year?</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Section E. Type III Functionally Integrated Supporting Organizations

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2. Activities Test. <strong>Answer (a) and (b) below.</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3. Parent of Supported Organizations. <strong>Answer (a) and (b) below.</strong></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

---

**Part VI**

**Supporting Organizations**

**Answer (a) and (b) below.**

- a. 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?
- b. A family member of a person described in (a) above?
- c. 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.

**Provide details in Part VI.**

- a. The organization satisfied the Activities Test. Complete line 2 below.
- b. The organization is the parent of each of its supported organizations. Complete line 3 below.
- c. The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions).

---

**Schedule A (Form 990 or 990-EZ) 2019**

**GoodWeave International**

**52-2042014**

**Page 5**

---

**932025 09-25-19**

**17**
### Section A - Adjusted Net Income

<table>
<thead>
<tr>
<th></th>
<th>(A) Prior Year</th>
<th>(B) Current Year (optional)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Net short-term capital gain</td>
<td>1</td>
</tr>
<tr>
<td>2</td>
<td>Recoveries of prior-year distributions</td>
<td>2</td>
</tr>
<tr>
<td>3</td>
<td>Other gross income (see instructions)</td>
<td>3</td>
</tr>
<tr>
<td>4</td>
<td>Add lines 1 through 3.</td>
<td>4</td>
</tr>
<tr>
<td>5</td>
<td>Depreciation and depletion</td>
<td>5</td>
</tr>
<tr>
<td>6</td>
<td>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)</td>
<td>6</td>
</tr>
<tr>
<td>7</td>
<td>Other expenses (see instructions)</td>
<td>7</td>
</tr>
<tr>
<td>8</td>
<td><strong>Adjusted Net Income</strong> (subtract lines 5, 6, and 7 from line 4)</td>
<td>8</td>
</tr>
</tbody>
</table>

### Section B - Minimum Asset Amount

<table>
<thead>
<tr>
<th></th>
<th>(A) Prior Year</th>
<th>(B) Current Year (optional)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):</td>
<td></td>
</tr>
<tr>
<td>a</td>
<td>Average monthly value of securities</td>
<td>1a</td>
</tr>
<tr>
<td>b</td>
<td>Average monthly cash balances</td>
<td>1b</td>
</tr>
<tr>
<td>c</td>
<td>Fair market value of other non-exempt-use assets</td>
<td>1c</td>
</tr>
<tr>
<td>d</td>
<td><strong>Total</strong> (add lines 1a, 1b, and 1c)</td>
<td>1d</td>
</tr>
<tr>
<td>e</td>
<td>Discount claimed for blockage or other factors (explain in detail in Part VI):</td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>Acquisition indebtedness applicable to non-exempt-use assets</td>
<td>2</td>
</tr>
<tr>
<td>3</td>
<td>Subtract line 2 from line 1d.</td>
<td>3</td>
</tr>
<tr>
<td>4</td>
<td>Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).</td>
<td>4</td>
</tr>
<tr>
<td>5</td>
<td>Net value of non-exempt-use assets (subtract line 4 from line 3)</td>
<td>5</td>
</tr>
<tr>
<td>6</td>
<td>Multiply line 5 by .035.</td>
<td>6</td>
</tr>
<tr>
<td>7</td>
<td>Recoveries of prior-year distributions</td>
<td>7</td>
</tr>
<tr>
<td>8</td>
<td><strong>Minimum Asset Amount</strong> (add line 7 to line 6)</td>
<td>8</td>
</tr>
</tbody>
</table>

### Section C - Distributable Amount

<table>
<thead>
<tr>
<th></th>
<th>Current Year</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Adjusted net income for prior year (from Section A, line 8, Column A)</td>
</tr>
<tr>
<td>2</td>
<td>Enter 85% of line 1.</td>
</tr>
<tr>
<td>3</td>
<td>Minimum asset amount for prior year (from Section B, line 8, Column A)</td>
</tr>
<tr>
<td>4</td>
<td>Enter greater of line 2 or line 3.</td>
</tr>
<tr>
<td>5</td>
<td>Income tax imposed in prior year</td>
</tr>
<tr>
<td>6</td>
<td><strong>Distributable Amount</strong>. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).</td>
</tr>
</tbody>
</table>

7 | Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions). |
### Part V - Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

#### Section D - Distributions

<table>
<thead>
<tr>
<th></th>
<th>Current Year</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Amounts paid to supported organizations to accomplish exempt purposes</td>
</tr>
<tr>
<td>2</td>
<td>Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity</td>
</tr>
<tr>
<td>3</td>
<td>Administrative expenses paid to accomplish exempt purposes of supported organizations</td>
</tr>
<tr>
<td>4</td>
<td>Amounts paid to acquire exempt-use assets</td>
</tr>
<tr>
<td>5</td>
<td>Qualified set-aside amounts (prior IRS approval required)</td>
</tr>
<tr>
<td>6</td>
<td>Other distributions (describe in Part VI). See instructions.</td>
</tr>
<tr>
<td>7</td>
<td><strong>Total annual distributions.</strong> Add lines 1 through 6.</td>
</tr>
<tr>
<td>8</td>
<td>Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.</td>
</tr>
<tr>
<td>9</td>
<td>Distributable amount for 2019 from Section C, line 6</td>
</tr>
<tr>
<td>10</td>
<td>Line 8 amount divided by line 9 amount</td>
</tr>
</tbody>
</table>

#### Section E - Distribution Allocations

<table>
<thead>
<tr>
<th></th>
<th>(i) Excess Distributions</th>
<th>(ii) Underdistributions Pre-2019</th>
<th>(iii) Distributable Amount for 2019</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Distributable amount for 2019 from Section C, line 6</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>Underdistributions, if any, for years prior to 2019 (reasonable cause required- explain in Part VI). See instructions.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>Excess distributions carryover, if any, to 2019</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>a From 2014</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>b From 2015</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>c From 2016</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>d From 2017</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>e From 2018</td>
<td></td>
<td></td>
</tr>
<tr>
<td>f</td>
<td><strong>Total</strong> of lines 3a through e</td>
<td></td>
<td></td>
</tr>
<tr>
<td>g</td>
<td>Applied to underdistributions of prior years</td>
<td></td>
<td></td>
</tr>
<tr>
<td>h</td>
<td>Applied to 2019 distributable amount</td>
<td></td>
<td></td>
</tr>
<tr>
<td>i</td>
<td>Carryover from 2014 not applied (see instructions)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>j</td>
<td>Remainder. Subtract lines 3g, 3h, and 3i from 3f.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>Distributions for 2019 from Section D, line 7: $</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>a Applied to underdistributions of prior years</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>b Applied to 2019 distributable amount</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>c Remainder. Subtract lines 4a and 4b from 4.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>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.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>6</td>
<td>Remaining underdistributions for 2019. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>7</td>
<td><strong>Excess distributions carryover to 2020.</strong> Add lines 3j and 4c.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>8</td>
<td>Breakdown of line 7:</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>a Excess from 2015</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>b Excess from 2016</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>c Excess from 2017</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>d Excess from 2018</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>e Excess from 2019</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Part VI Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information.

(See instructions.)
** PUBLIC DISCLOSURE COPY **

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

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

2019

Name of the organization

<table>
<thead>
<tr>
<th>GoodWeave International</th>
</tr>
</thead>
</table>

Employer identification number

| 52-2042014 |

Organization type (check one):

<table>
<thead>
<tr>
<th>Filers of:</th>
<th>Form 990 or 990-EZ</th>
<th>Section:</th>
</tr>
</thead>
<tbody>
<tr>
<td>501(c)(3) (enter number) organization</td>
<td>X</td>
<td>501(c)(3) nonexempt charitable trust treated as a private foundation</td>
</tr>
<tr>
<td>527 political organization</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Filers of:</th>
<th>Form 990-PF</th>
<th>Section:</th>
</tr>
</thead>
<tbody>
<tr>
<td>501(c)(3) exempt private foundation</td>
<td>X</td>
<td>4947(a)(1) nonexempt charitable trust treated as a private foundation</td>
</tr>
<tr>
<td>501(c)(3) taxable private foundation</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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

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

General Rule

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

Special Rules

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

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

☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than $1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don’t complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling $5,000 or more during the year …………………………………….$

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

LHA For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.

Schedule B (Form 990, 990-EZ, or 990-PF) (2019)

923451 11-06-19
### Part I  Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

<table>
<thead>
<tr>
<th>No.</th>
<th>(a) Name, address, and ZIP + 4</th>
<th>(b) Total contributions</th>
<th>(d) Type of contribution</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td></td>
<td>$3,155,538.</td>
<td>Person [X] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)</td>
</tr>
<tr>
<td>2</td>
<td></td>
<td>$725,186.</td>
<td>Person [X] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)</td>
</tr>
<tr>
<td>3</td>
<td></td>
<td>$370,000.</td>
<td>Person [X] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)</td>
</tr>
<tr>
<td>4</td>
<td></td>
<td>$205,220.</td>
<td>Person [X] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)</td>
</tr>
<tr>
<td>5</td>
<td></td>
<td>$132,888.</td>
<td>Person [X] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)</td>
</tr>
<tr>
<td>6</td>
<td></td>
<td>$265,061.</td>
<td>Person [X] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)</td>
</tr>
<tr>
<td>(a) No. from Part I</td>
<td>(b) Description of noncash property given</td>
<td>(c) FMV (or estimate) (See instructions.)</td>
<td>(d) Date received</td>
</tr>
<tr>
<td>---------------------</td>
<td>------------------------------------------</td>
<td>------------------------------------------</td>
<td>------------------</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(a) No. from Part I</td>
<td>(b) Description of noncash property given</td>
<td>(c) FMV (or estimate) (See instructions.)</td>
<td>(d) Date received</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(a) No. from Part I</td>
<td>(b) Description of noncash property given</td>
<td>(c) FMV (or estimate) (See instructions.)</td>
<td>(d) Date received</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(a) No. from Part I</td>
<td>(b) Description of noncash property given</td>
<td>(c) FMV (or estimate) (See instructions.)</td>
<td>(d) Date received</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(a) No. from Part I</td>
<td>(b) Description of noncash property given</td>
<td>(c) FMV (or estimate) (See instructions.)</td>
<td>(d) Date received</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(a) No. from Part I</td>
<td>(b) Description of noncash property given</td>
<td>(c) FMV (or estimate) (See instructions.)</td>
<td>(d) Date received</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(a) No. from Part I</td>
<td>(b) Description of noncash property given</td>
<td>(c) FMV (or estimate) (See instructions.)</td>
<td>(d) Date received</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(a) No. from Part I</td>
<td>(b) Description of noncash property given</td>
<td>(c) FMV (or estimate) (See instructions.)</td>
<td>(d) Date received</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(a) No. from Part I</td>
<td>(b) Description of noncash property given</td>
<td>(c) FMV (or estimate) (See instructions.)</td>
<td>(d) Date received</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(a) No. from Part I</td>
<td>(b) Description of noncash property given</td>
<td>(c) FMV (or estimate) (See instructions.)</td>
<td>(d) Date received</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(a) No. from Part I</td>
<td>(b) Description of noncash property given</td>
<td>(c) FMV (or estimate) (See instructions.)</td>
<td>(d) Date received</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(a) No. from Part I</td>
<td>(b) Description of noncash property given</td>
<td>(c) FMV (or estimate) (See instructions.)</td>
<td>(d) Date received</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(a) No. from Part I</td>
<td>(b) Description of noncash property given</td>
<td>(c) FMV (or estimate) (See instructions.)</td>
<td>(d) Date received</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
GoodWeave International

Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than $1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of $1,000 or less for the year. (Enter this info. once.)

<table>
<thead>
<tr>
<th>(a) No. from Part I</th>
<th>(b) Purpose of gift</th>
<th>(c) Use of gift</th>
<th>(d) Description of how gift is held</th>
<th>(e) Transfer of gift</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Transferee’s name, address, and ZIP + 4</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Relationship of transferee to transferee</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Use duplicate copies of Part III if additional space is needed.

Schedule B (Form 990, 990-EZ, or 990-PF) (2019)
### Part I
**Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.**

<table>
<thead>
<tr>
<th></th>
<th>(a) Donor advised funds</th>
<th>(b) Funds and other accounts</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Total number at end of year</td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>Aggregate value of contributions to (during year)</td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>Aggregate value of grants from (during year)</td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>Aggregate value at end of year</td>
<td></td>
</tr>
</tbody>
</table>

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

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

### Part II
**Conservation Easements.**

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

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

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

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

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

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

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

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

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

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

### Part III
**Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.**

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

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

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

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

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

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

   b. Assets included in Form 990, Part X
   - $  

---

**LHA**

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

3 Using the organization’s acquisition, accession, and other records, check any of the following that make significant use of its collection items (check all that apply):
   a Public exhibition  
   b Scholarly research  
   c Preservation for future generations  
   d Loan or exchange program  
   e Other

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

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

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

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

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

<table>
<thead>
<tr>
<th></th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>1c</td>
<td></td>
</tr>
<tr>
<td>1d</td>
<td></td>
</tr>
<tr>
<td>1e</td>
<td></td>
</tr>
<tr>
<td>1f</td>
<td></td>
</tr>
</tbody>
</table>

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

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

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

1a Beginning of year balance

1b Contributions

1c Net investment earnings, gains, and losses

1d Grants or scholarships

1e Other expenditures for facilities and programs

1f Administrative expenses

1g End of year balance

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
   a Board designated or quasi-endowment %
   b Permanent endowment %
   c Term endowment %

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

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:
   (i) Unrelated organizations
   (ii) Related organizations
   Yes  No

b If “Yes” on line 3a(ii), are the related organizations listed as required on Schedule R?
   Yes  No

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

Part VI Land, Buildings, and Equipment.

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

<table>
<thead>
<tr>
<th>Description of property</th>
<th>(a) Cost or other basis (investment)</th>
<th>(b) Cost or other basis (other)</th>
<th>(c) Accumulated depreciation</th>
<th>(d) Book value</th>
</tr>
</thead>
<tbody>
<tr>
<td>1a Land</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1b Buildings</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1c Leasehold improvements</td>
<td></td>
<td>83,283.</td>
<td>54,365.</td>
<td>28,918.</td>
</tr>
<tr>
<td>1d Equipment</td>
<td></td>
<td>114,254.</td>
<td>96,555.</td>
<td>17,699.</td>
</tr>
<tr>
<td>1e Other</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)

46,617.
### Part VII | Investments - Other Securities

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

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

### Part VIII | Investments - Program Related

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

<table>
<thead>
<tr>
<th>(a) Description of investment</th>
<th>(b) Book value</th>
<th>(c) Method of valuation: Cost or end-of-year market value</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(2)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(3)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(4)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(5)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(6)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(7)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(8)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(9)</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)</strong></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Part IX | Other Assets

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

<table>
<thead>
<tr>
<th>(a) Description</th>
<th>(b) Book value</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1)</td>
<td></td>
</tr>
<tr>
<td>(2)</td>
<td></td>
</tr>
<tr>
<td>(3)</td>
<td></td>
</tr>
<tr>
<td>(4)</td>
<td></td>
</tr>
<tr>
<td>(5)</td>
<td></td>
</tr>
<tr>
<td>(6)</td>
<td></td>
</tr>
<tr>
<td>(7)</td>
<td></td>
</tr>
<tr>
<td>(8)</td>
<td></td>
</tr>
<tr>
<td>(9)</td>
<td></td>
</tr>
<tr>
<td><strong>Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)</strong></td>
<td></td>
</tr>
</tbody>
</table>

### Part X | Other Liabilities

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

1. (a) Description of liability | (b) Book value |
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>(1) Federal income taxes</td>
<td></td>
</tr>
<tr>
<td>(2) License fees payable</td>
<td>311,293.</td>
</tr>
<tr>
<td>(3) Deferred rent</td>
<td>43,947.</td>
</tr>
<tr>
<td>(4)</td>
<td></td>
</tr>
<tr>
<td>(5)</td>
<td></td>
</tr>
<tr>
<td>(6)</td>
<td></td>
</tr>
<tr>
<td>(7)</td>
<td></td>
</tr>
<tr>
<td>(8)</td>
<td></td>
</tr>
<tr>
<td>(9)</td>
<td></td>
</tr>
<tr>
<td><strong>Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)</strong></td>
<td></td>
</tr>
</tbody>
</table>

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

GoodWeave International 52-2042014

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

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

1 Total revenue, gains, and other support per audited financial statements
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:
   a Net unrealized gains (losses) on investments 2a 4,344.
   b Donated services and use of facilities 2b 1,211,974.
   c Recoveries of prior year grants 2c
   d Other (Describe in Part XIII.) 2d
   e Add lines 2a through 2d 2e 1,216,318.
3 Subtract line 2e from line 1 3 5,943,706.
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1:
   a Investment expenses not included on Form 990, Part VIII, line 7b 4a 200.
   b Other (Describe in Part XIII.) 4b
   c Add lines 4a and 4b 4c 200.
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12) 5 5,943,906.

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

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

1 Total expenses and losses per audited financial statements
2 Amounts included on line 1 but not on Form 990, Part IX, line 25:
   a Donated services and use of facilities 2a 1,211,974.
   b Prior year adjustments 2b
   c Other losses 2c
   d Other (Describe in Part XIII.) 2d
   e Add lines 2a through 2d 2e 1,211,974.
3 Subtract line 2e from line 1 3 4,115,868.
4 Amounts included on Form 990, Part IX, line 25, but not on line 1:
   a Investment expenses not included on Form 990, Part VIII, line 7b 4a 200.
   b Other (Describe in Part XIII.) 4b
   c Add lines 4a and 4b 4c 200.
5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18) 5 4,116,068.

Part XIII Supplemental Information.

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

Part X, Line 2:

Management has evaluated GoodWeave's tax positions and concluded that GoodWeave's financial statements do not include any uncertain tax positions.
**Part I  General Information on Activities Outside the United States.** Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16.

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

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

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

<table>
<thead>
<tr>
<th>(a) Region</th>
<th>(b) Number of offices in the region</th>
<th>(c) Number of employees, agents, and independent contractors in the region</th>
<th>(d) Activities conducted in the region (by type) (such as, fundraising, program services, investments, grants to recipients located in the region)</th>
<th>(e) If activity listed in (d) is a program service, describe specific type of service(s) in the region</th>
<th>(f) Total expenditures for and investments in the region</th>
</tr>
</thead>
<tbody>
<tr>
<td>Europe (Including Iceland &amp; Greenland)</td>
<td>0</td>
<td>3</td>
<td>Program Services</td>
<td>Program development, standards compliance, licensing activities in Europe, and consumer protection</td>
<td>320,911.</td>
</tr>
<tr>
<td>South Asia</td>
<td>1</td>
<td>12</td>
<td>Program Services and grants to partners in the region</td>
<td>Child-labor-free certification, supply chain monitoring; grants to partners in the region for children's education</td>
<td>1,815,011.</td>
</tr>
</tbody>
</table>

3 a Subtotal .................................. 1 | 15 ........................................ 2,135,922.  
3 b Total from continuation sheets to Part I ........... 0 | 0 ........................................ 0.  
3 c Totals (add lines 3a and 3b) ........................... 1 | 15 ........................................ 2,135,922.  

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

See Part V for Column (e) descriptions.
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.

<table>
<thead>
<tr>
<th></th>
<th>(a) Name of organization</th>
<th>(b) IRS code section and EIN (if applicable)</th>
<th>(c) Region</th>
<th>(d) Purpose of grant</th>
<th>(e) Amount of cash grant</th>
<th>(f) Manner of cash disbursement</th>
<th>(g) Amount of noncash assistance</th>
<th>(h) Description of noncash assistance</th>
<th>(i) Method of valuation (book, FMV, appraisal, other)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>GoodWeave International</td>
<td>52-2042014</td>
<td>South Asia</td>
<td>Subgrant to support GoodWeave's program service activities</td>
<td>148,297</td>
<td>Wire</td>
<td>0. N/A</td>
<td>N/A</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>South Asia</td>
<td>Subgrant to support GoodWeave's program service activities</td>
<td>1,122,129</td>
<td>Wire</td>
<td>0. N/A</td>
<td>N/A</td>
<td></td>
</tr>
</tbody>
</table>

2  Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter ......................................................... 0

3  Enter total number of other organizations or entities ..................................................................................................................... 2
GoodWeave International  
52-2042014

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.

<table>
<thead>
<tr>
<th>(a) Type of grant or assistance</th>
<th>(b) Region</th>
<th>(c) Number of recipients</th>
<th>(d) Amount of cash grant</th>
<th>(e) Manner of cash disbursement</th>
<th>(f) Amount of noncash assistance</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Method of valuation (book, FMV, appraisal, other)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Schedule F (Form 990) 2019
1. Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926) ☐ Yes ☑ No

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

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

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

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

6. Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713; don't file with Form 990) ☐ Yes ☑ No
Part I, Line 2:

For grants and subgrants issued to international partners, GoodWeave enters into agreements which stipulate the use of funds. Monitoring of the funds is ensured through individual contact with grantees and financial/programmatic reporting provided by grantees.

Part I, line 3:

Foreign expenditures are directly tracked and accounted for on the accrual method of accounting used for books.

Part I, Line 3, Column (e):

Region: Europe (Including Iceland & Greenland)

(e) Specific Types of Services in Region: Program development, standards compliance, licensing activities in Europe, and consumer awareness building
### Part I: Fundraising Activities

Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.

1. Indicate whether the organization raised funds through any of the following activities. Check all that apply.
   - Mail solicitations
   - Internet and email solicitations
   - Phone solicitations
   - In-person solicitations
   - Solicitation of non-government grants
   - Solicitation of government grants
   - Special fundraising events

2. Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? 
   - Yes [X]  
   - No [ ]

   If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least $5,000 by the organization.

<table>
<thead>
<tr>
<th>Name and address of individual or entity (fundraiser)</th>
<th>Activity</th>
<th>(iii) Did fundraiser have custody or control of contributions?</th>
<th>(iv) Gross receipts from activity</th>
<th>(v) Amount paid to (or retained by) fundraiser listed in col. (i)</th>
<th>(vi) Amount paid to (or retained by) organization</th>
</tr>
</thead>
<tbody>
<tr>
<td>Beth Huber - 711 Elder Street NW, Washington, DC 20012</td>
<td>Grant and report writing/Donor prospect research</td>
<td>Yes [X]</td>
<td>0.10,193</td>
<td>-10,193</td>
<td></td>
</tr>
<tr>
<td>Rebecca Shaloff - 3609 24th St, NE, Washington, DC 20018</td>
<td>Grant and report writing/Donor prospect research</td>
<td>X</td>
<td>0.13,757</td>
<td>-13,757</td>
<td></td>
</tr>
<tr>
<td>Sandra J. Doliner - 127 Circle Ave, Charlotte, NC</td>
<td>Grant and report writing/Donor prospect research</td>
<td>X</td>
<td>0.15,624</td>
<td>-15,624</td>
<td></td>
</tr>
</tbody>
</table>

Total | | | 39,574 | -39,574 |

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

CA, CT, DC, FL, IL, MD, MA, NJ, NY, NC, OH, PA, RI, UT, VA, WA

---

**Note:** For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.
### Part II - Fundraising Events

Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than $15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than $5,000.

<table>
<thead>
<tr>
<th>Revenue</th>
<th>(a) Event #1</th>
<th>(b) Event #2</th>
<th>(c) Other events</th>
<th>(d) Total events (add col. (a) through col. (c))</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Gross receipts</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2 Less: Contributions</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3 Gross income (line 1 minus line 2)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Direct Expenses**

<table>
<thead>
<tr>
<th></th>
<th>(a) Pilot</th>
<th>(b) Pull tabs/progressive bingo</th>
<th>(c) Other gaming</th>
<th>(d) Total gaming (add col. (a) through col. (c))</th>
</tr>
</thead>
<tbody>
<tr>
<td>4 Cash prizes</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5 Noncash prizes</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6 Rent/facility costs</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7 Food and beverages</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>8 Entertainment</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>9 Other direct expenses</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Total revenue**

**Total direct expenses**

**Net income summary** Subtract line 10 from line 3, column (d)

### Part III - Gaming

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

<table>
<thead>
<tr>
<th>Revenue</th>
<th>(a) Bingo</th>
<th>(b) Pull tab/instant bingo/progressive bingo</th>
<th>(c) Other gaming</th>
<th>(d) Total gaming (add col. (a) through col. (c))</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Gross revenue</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2 Cash prizes</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3 Noncash prizes</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4 Rent/facility costs</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5 Other direct expenses</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Total revenue**

**Total direct expenses**

**Net gaming income summary** Subtract line 7 from line 1, column (d)

### Part III - Gaming License

9 Enter the state(s) in which the organization conducts gaming activities:

- a Is the organization licensed to conduct gaming activities in each of these states? Yes ☐ No ☐
- b If "No," explain:

10a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year? Yes ☐ No ☐

b If "Yes," explain:
Schedule G (Form 990 or 990-EZ) 2019

GoodWeave International

Does the organization conduct gaming activities with nonmembers?

Yes ☐ No ☐

Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed to administer charitable gaming?

Yes ☐ No ☐

Indicate the percentage of gaming activity conducted in:

- The organization's facility ☐
- An outside facility ☐

Enter the name and address of the person who prepares the organization’s gaming/special events books and records:

Name ▶
Address ▶

Does the organization have a contract with a third party from whom the organization receives gaming revenue?

Yes ☐ No ☐

If "Yes," enter the amount of gaming revenue received by the organization ▶ $ and the amount of gaming revenue retained by the third party ▶ $.

If "Yes," enter name and address of the third party:

Name ▶
Address ▶

Gaming manager information:

Name ▶
Gaming manager compensation ▶ $ ☐
Description of services provided ▶

☐ Director/officer ☐ Employee ☐ Independent contractor

Mandatory distributions:

- Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?
- Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization’s own exempt activities during the tax year ▶ $.

Part IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.

Schedule G, Part I, Line 2b, List of Ten Highest Paid Fundraisers:

(i) Name of Fundraiser: Sandra J. Doliner

(i) Address of Fundraiser: 127 Circle Ave, Charlotte, NC  28207
## Part I Questions Regarding Compensation

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

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

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

<table>
<thead>
<tr>
<th>(A) Name and Title</th>
<th>(B) Breakdown of W-2 and/or 1099-MISC compensation</th>
<th>(C) Retirement and other deferred compensation</th>
<th>(D) Nontaxable benefits</th>
<th>(E) Total of columns (B)(i)-(D)</th>
<th>(F) Compensation in column (B) reported as deferred on prior Form 990</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1) Nina Smith, Chief Executive Officer</td>
<td>(i) 136,907. 0. 0.</td>
<td>4,308. 9,025.</td>
<td>150,240. 0.</td>
<td>0.</td>
<td>0.</td>
</tr>
</tbody>
</table>
Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.
<table>
<thead>
<tr>
<th>Name of the organization</th>
<th>GoodWeave International</th>
</tr>
</thead>
<tbody>
<tr>
<td>Employer identification number</td>
<td>52-2042014</td>
</tr>
</tbody>
</table>

**Form 990, Part III, Line 4a: Harness Market Forces:**

GoodWeave employs a demand driven model. By establishing partnerships with brands and retailers, and increasing consumer preference for certified products, the organization is able to inspect more supply chains and protect more children. Efforts within the "Harness Market Power" category include building corporate partnerships and consumer awareness activities aimed at increasing market penetration in Europe and North America and adoption of child-labor-free products.

In 2019, GoodWeave continued to expand its Change the Pattern awareness campaign in partnership with its business, NGO and media partners. The campaign reached over 62 million people, through editorial outreach, public service advertising, social media, point-of-sale educational materials, special events, website marketing and other targeted outreach.

GoodWeave inspects the production supply chains of participating manufacturers and importers. To be certified and thus eligible to display the GoodWeave label, manufactures sign a legally binding agreement to: (1) Produce products free from child labor and forced and bonded labor; (2) Register all production sites with GoodWeave and allow random, surprise inspections; and (3) Pay license fees that support child rescue, rehabilitation and education in India, Nepal and Afghanistan.

In 2019, Carpet Industry work resulted in 12 new import and retail
companies joining around the world, bringing the total number licensed
to 177 and resulting in 23% share of the total handmade rug market
globally. For its new programs in apparel, fashion jewelry, and home
textiles, GoodWeave added an additional 3 brand partners.

Form 990, Part III, Line 4b: Develop Child-labor-free Supply Chains:
Every single child found is offered rehabilitation, counseling
services, schooling, and other critical services. In addition - and
this is the most powerful point of impact - approximately 50,000
children were prevented from ever being exploited because of the 14,377
regular, surprise visits made this year to workshops, factories, and
private homes in artisan and producer villages.

In 2019 GoodWeave was one of only 23 full members of the ISEAL
Alliance, the global association for sustainability standards. ISEAL
membership requires GoodWeave to obtain third-party accreditation and
evaluation of its certification system to ensure the organization is
independent of external pressure, is transparent in its certification
process, demonstrates proper quality control and confidentiality
systems, and treats all producers equally.

Standard Setting:
GoodWeave's certification Standard addresses the contributing factors
to child labor. In 2019 GoodWeave launched a newly strengthened
International Generic Standard that applies across product categories
from carpets to home textiles, apparel to fashion jewelry, as well as
at various tiers of production from Tier One factories to home-based
production. Under review were the three "certification principles"
including no child labor, no forced or bonded labor, and conditions of work are documented and verifiable. The Standard also includes progress principles, including freedom of association and collective bargaining are recognized; no discrimination is practiced; working conditions are respected, including workplace safety and health, wages, working hours, and disciplinary practices; and negative environmental impacts of production are identified and minimized.

Form 990, Part III, Line 4c: Provide Educational Opportunities to Children

GoodWeave removes children from slave-like conditions, reunites them with their families when possible, and offers them a home when not. Rehabilitation can take years and includes psychological counseling in addition to health care and education. Rescued children are supported until grade 10 or age 18, whichever comes first. In 2019, 247 children were removed from exploitative labor across all program categories including carpets, apparel, fashion jewelry, tea, and bricks. These children were provided with educational support and rehabilitation.

Form 990, Part III, Line 4d: Promote Best Practice and Improve Conditions for all Workers:

Addressing child labor effectively requires more than simply prohibiting the practice as a matter of law, policy, or standard. Beyond the programs GoodWeave implements directly, the organization also seeks to improve conditions for all workers, to build the capacity of other organizations and serve as a thought-leader and advocate to raise the bar for companies, governments and other supply chain actors, to tackle child labor and its root causes. In 2019 GoodWeave participated in numerous of high-level events and advocacy platforms to
promote the importance of ending child labor and modern slavery through deep due diligence practices that include full supply chain mapping, application of strong human rights Standards, ensuring remedy to rights holders and addressing root causes. These included the Copenhagen Fashion Summit, the International Labor Organization Conference, the OECD Forum on Supply Chain Due Diligence and the German Government convened Textilbundis. In 2019 GoodWeave's Capacity Building Unit began the development of a series of training modules that will continue to support our work to partner with other supply chain actors to strengthen their capacity to stop child labor. In collaboration with Humanity United and Global Fairness Initiative we continued transferring our methodologies to the brick kilns sector in Nepal, where the rate of forced and child labor is staggering. Forty work sites participated in this Better Brick Nepal program, bringing 6,790 workers under protection with a special focus on helping to release these workers from debt bondage.

Form 990, Part VI, Section B, line 11b:
The Audit/Finance Committee of the organization reviews the form 990 prior to filing. Once reviewed by this committee, the return is signed by the President and filed. Prior to filing the return, a copy of the return as it will be filed is provided to each Board member electronically.

Form 990, Part VI, Section B, Line 12c:
The Conflict of Interest Policy is contained in the organization’s bylaws and requires annual certification by Board members, including the disclosure of any actual or potential conflicts of interest. The Board of Directors and management monitor this process and, in general, no business
transactions (purchase of goods or services, loans, etc.) with Board members or their employers are permitted other than the normal transactions between a nonprofit and its Board members such as contributions and payment of program service revenue to the organization for participation in various programs.

Form 990, Part VI, Section B, Line 15:
The compensation of the President is established by the Board of Directors, who are independent of the President. The compensation level for the President is established by the Board of Directors based on knowledge of current salary levels for executives of similar organizations, performance of the President, and budgetary constraints. As a result, the salary levels trend towards amounts lower than current market levels in the Washington, DC metropolitan area might indicate. Notification of any change in the President's salary is made to the organization's third party accountant by an officer of the Board of Directors.

Board officers are not compensated in their role as officers or Board members. In 2019, no employee met the definition of a key employee as provided in the instructions to the form 990.

Form 990, Part VI, Line 17, List of States receiving copy of Form 990:
CT, DC, FL, IL, MD, MA, NJ, NY, NC, OH, PA, RI, VA, WA

Form 990, Part VI, Section C, Line 18:
GoodWeave makes available to the public all documents required under current Internal Revenue Service Treasury Regulations.
Form 990, Part VI, Section C, Line 19:

Governing documents such as Articles of Incorporation and Bylaws, internal policy documents, and audited and unaudited financial statements would be made available on a case by case basis to individuals or organizations which have an interest in those documents at the discretion of the organization's Board of Directors and management.

Form 990, Part XII, Line 2c:

No change from the prior year.
File a separate application for each return. Go to www.irs.gov/Form8868 for the latest information.

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

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

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

Name of exempt organization or other filer, see instructions.

GoodWeave International

Taxpayer identification number (TIN) 52-2042014

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

1111 14th Street, NW, No. 820

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

Washington, DC 20005-5610

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

0

1

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

Cyndi Janetzko, CFO - 1111 14th Street, NW, No. 820 -

Telephone No. 202) 234-9050 Fax No. (202) 234-9056

If the organization does not have an office or place of business in the United States, check this box □

If this is for a Group Return, enter the organization’s four digit Group Exemption Number (GEN) □. If this is for the whole group, check this box □. If it is for part of the group, check this box □ and attach a list with the names and TINs of all members the extension is for.

I request an automatic 6-month extension of time until November 16, 2020, to file the exempt organization return for the organization named above. The extension is for the organization’s return for:

X Calendar year 2019 or

□ Tax year beginning □, and ending □.

If the tax year entered in line 1 is for less than 12 months, check reason:

□ Initial return □ Final return □ Change in accounting period

If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.

If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.

Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.

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

LHA For Privacy Act and Paperwork Reduction Act Notice, see instructions.