Department of the Treasury Internal Revenue Service

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

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

OMB No. 1545-0047

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

Open to Public Inspection

<u>A</u>	For the	2011 calendar year, or tax year beginning	and	ending	_	
В	Check if applicable	C Name of organization			D Employer identifi	cation number
Г	Addre	GLOBAL WASHINGTON				
F	Name chang				27-052	1628
F	Initial return	Number and street (or P.O. box if mail is not delive	vered to street address)	Room/suite	E Telephone numbe	
F	Termin	· ·	refred to street address;	801	206-54	
F	—ated □Amend	led .		001	G Gross receipts \$	696,117.
F	⊥return ∏Applic	City or town, state or country, and ZIP + 4  SEATTLE, WA 98101			-	· · · · · · · · · · · · · · · · · · ·
_	⊥ltiön pendir		A CHETCAD		H(a) Is this a group re for affiliates?	Yes X No
		F Name and address of principal officer:BOOKDA	A GIELDAN		H(b) Are all affiliates inc	
_	Tav. 200	empt status: X 501(c)(3) 501(c) ( )	(insert no.) 4947(a)(1)	or 527	` ′	
		re: WWW.GLOBALWA.ORG	(IIISELLIIU.) 4947(a)(1)	01 321	· ·	list. (see instructions)
_			ociation Other	I Voor	H(c) Group exemption of formation: 2009	
	art I	Summary	OCIALIOII UI OLIIGI	L Year	or formation. 2009	M State of legal domicile; WA
F		<del>-</del>	· · · · · · · · · · · · · · · · · · ·	WA TO A	DDOAD DACED	
Governance		Briefly describe the organization's mission or most of MEMBERSHIP ASSOCIATION SUPPORTING THE CO			BROAD BASED	
er n	2	Check this box 🕨 📖 if the organization discon	tinued its operations or dispo	sed of more	than 25% of its net as	ssets.
Š	3	Number of voting members of the governing body (	Part VI, line 1a)		3	7
<u>ھ</u>	4	Number of independent voting members of the gov	erning body (Part VI, line 1b)		4	7
es	5	Total number of individuals employed in calendar ye	ear 2011 (Part V, line 2a)		5	4
Activities &	6	Total number of volunteers (estimate if necessary) .			6	40
Ç		Total unrelated business revenue from Part VIII, col				0.
_	b	Net unrelated business taxable income from Form 9	990-T, line 34		7b	0.
Revenue					Prior Year	Current Year
	8	Contributions and grants (Part VIII, line 1h)			213,178.	514,311.
	9	Program service revenue (Part VIII, line 2g)			76,718.	181,601.
ě	10	Investment income (Part VIII, column (A), lines 3, 4,	and 7d)		82.	205.
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c,	9c, 10c, and 11e)		0.	0.
	12	Total revenue - add lines 8 through 11 (must equal F	Part VIII, column (A), line 12)		289,978.	696,117.
	13	Grants and similar amounts paid (Part IX, column (A	), lines 1-3)		0.	0.
	14	Benefits paid to or for members (Part IX, column (A)	, line 4)		0.	0.
Se	15	Salaries, other compensation, employee benefits (P	art IX, column (A), lines 5-10)		112,109.	211,306.
Expenses	16a	Professional fundraising fees (Part IX, column (A), lir	ne 11e)		0.	0.
xbe	b	Total fundraising expenses (Part IX, column (D), line		,936.		
Ш	17	Other expenses (Part IX, column (A), lines 11a-11d,			191,658.	367,906.
	18	Total expenses. Add lines 13-17 (must equal Part IX	(, column (A), line 25)		303,767.	579,212.
	19	Revenue less expenses. Subtract line 18 from line 1	2		-13,789.	116,905.
Net Assets or Fund Balances				Ве	ginning of Current Year	End of Year
sets	20	Total assets (Part X, line 16)			111,736.	227,403.
t As	21	Total liabilities (Part X, line 26)			31,439.	30,201.
2	22	Net assets or fund balances. Subtract line 21 from	ine 20		80,297.	197,202.
P	art II	Signature Block				
		lties of perjury, I declare that I have examined this return, i				y knowledge and belief, it is
true	, correc	t, and complete. Declaration of preparer (other than officer	) is based on all information of w	hich preparer	has any knowledge.	
Sig	n	Signature of officer			Date	
Hei	re	BOOKDA GHEISAR, EXECUTIVE DIRECTOR Type or print name and title				
		,	Preparer's signature	Į [	Date Check	PTIN
Pai	d		ANE M. SEARING	1:	1/12/12   if	P0000565
	- parer	Firm's name CLARK NUBER, PS			Firm's EIN	91-1194016
	Only	Firm's address 10900 NE 4TH STREET, SUIT	E 1700		7 0 E.114	
	,	BELLEVUE, WA 98004			Phone no. 42	25-454-4919
Ma	v tha II	RS discuss this return with the preparer shown above	11 110110 110. 22	X Yes No		

GLOBAL WASHINGTON Form 990 (2011) 27-0521628 Page 2 Part III | Statement of Program Service Accomplishments Х Check if Schedule O contains a response to any question in this Part III Briefly describe the organization's mission: GLOBAL WASHINGTON IS A BROAD-BASED MEMBERSHIP ASSOCIATION THAT PROMOTES AND SUPPORTS THE GLOBAL DEVELOPMENT SECTOR IN THE STATE OF WASHINGTON. COMPOSED OF NON-PROFIT ORGANIZATIONS FOUNDATIONS BUSINESSES, GOVERNMENT AND ACADEMIC INSTITUTIONS, OUR MEMBERS WORK Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? If "Yes." describe these new services on Schedule O. If "Yes," describe these changes on Schedule O. Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported. 154,601.) 198,186. including grants of \$ ) (Revenue \$ ) (Expenses \$ THESE PROGRAMS ARE DESIGNED TO HELP FULFILL OUR MISSION TO CONVENE, STRENGTHEN AND ADVOCATE ON BEHALF OF THE GLOBAL DEVELOPMENT COMMUNITY. THEY CONVENE OUR MEMBERS BY BRINGING THEM TOGETHER, IN PERSON, TO MEET EACH OTHER, LEARN FROM EACH OTHER, AND HAVE THE OPPORTUNITY TO FORM PARTNERSHIPS. THEY STRENGTHEN OUR MEMBERS BY PROVIDING QUALITY WORKSHOPS AND INFORMATION AT A FREE OR REDUCED PRICE. THIS GIVES THEM THE RESOURCES THAT THEY NEED TO STRENGTHEN THEIR PROGRAMS. PART OF OUR MISSION OF ADVOCATING ON BEHALF OF THE SECTOR IS TO BRING THEM TOGETHER AS A UNIFIED VOICE. BY PROVIDING THESE EVENTS, WE GAIN VALUABLE FEEDBACK FROM OUR MEMBERS AND WE HELP THEM WORK COLLECTIVELY ENHANCING THE SECTOR AS A WHOLE. 198,185. including grants of \$ 27.000. 4b (Code: ) (Expenses \$ ) (Revenue \$ GLOBAL WASHINGTON OFFERS PUBLIC OUTREACH AND AWARENESS TO ITS MEMBERS. IN DOING SO. GLOBAL WASHINGTON OFFERS MEMBERS THE OPPORTUNITY TO PROMOTE THEIR WORK TO A WIDE AUDIENCE, GENERATING MORE AWARENESS AND MORE FUNDING. THIS SERVES OUR MISSION TO PROMOTE THE GLOBAL DEVELOPMENT SECTOR IN THE STATE OF WASHINGTON BY GIVING OUR MEMBERS A UNIQUE OPPORTUNITY TO INFORM THE GENERAL PUBLIC ABOUT THE EXCITING WORK BEING DONE IN THE SECTOR. (Code: ) (Expenses \$ including grants of \$ ) (Revenue \$

Other program services (Describe in Schedule O.)

Total program service expenses

(Expenses \$ including grants of \$ ) (Revenue \$ 396 371.

Form 990 (2011) GLOBAL WASHINGTON
Part IV Checklist of Required Schedules 27-0521628 Page 3

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?  If "Yes," complete Schedule A	1	х	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	_		
•	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		Х
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide			
	credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		Х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		х
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	Х	-
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			v
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		Х
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			x
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		
a	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		Х
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		Х
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12a	х	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b		х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization			
	or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18		х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		х
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Х
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
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# Form 990 (2011) GLOBAL WASHINGTON Part IV Checklist of Required Schedules (continued)

	Checklist of Required Schedules (continued)		Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the			
	United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX,			37
	column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23		х
242	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the	23		
<b>2</b> -70	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 25	24a		х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a			
	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		Х
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		X
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified			
	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			v
00	of any of these persons? If "Yes," complete Schedule L, Part III	27		X
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 current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		х
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		
	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,	200		
·	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		Х
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	33		X
34	Was the organization related to any tax-exempt or taxable entity?			
	If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34		X
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of	251		Х
26	section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2  Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	35b		
36		26		х
37	If "Yes," complete Schedule R, Part V, line 2  Did the organization conduct more than 5% of its activities through an entity that is not a related organization	36		
31	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?	<u> </u>		
		38	х	
	Note. All Form 990 filers are required to complete Schedule O	38	х	

Form **990** (2011)

Form 990 (2011) GLOBAL WASHINGTON

Part V Statements Regarding Other IRS Filings and Tax Compliance GLOBAL WASHINGTON 27-0521628 Page 5

	Check if Schedule O contains a response to any question in this Part V									
			Yes	No						
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable									
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b									
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming									
	(gambling) winnings to prize winners?	1c	Х							
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 4									
b	<b>b</b> If at least one is reported on line 2a, did the organization file all required federal employment tax returns?									
Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)										
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	За		Х						
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in 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		Х						
b	If "Yes," enter the name of the foreign country: ►									
	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.									
5а	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Х						
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Х						
	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?	6a		Х						
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts									
	were not tax deductible?	6b								
7	Organizations that may receive deductible contributions under section 170(c).									
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	X							
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Х							
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required	l _		v						
	to file Form 8282?	7c		Х						
a	If "Yes," indicate the number of Forms 8282 filed during the year			Х						
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e 7f		Х						
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	-								
g h	If the organization received a contribution of qualified intellectual property, did the organization file Form 1098-C?	7g 7h								
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting	/!!								
	organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8								
9	Sponsoring organizations maintaining donor advised funds.									
	Did the organization make any taxable distributions under section 4966?	9a								
	Did the organization make a distribution to a donor, donor advisor, or related person?	9b								
10	Section 501(c)(7) organizations. Enter:									
а	Initiation fees and capital contributions included on Part VIII, line 12									
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities									
11	Section 501(c)(12) organizations. Enter:									
	Gross income from members or shareholders									
b	Gross income from other sources (Do not net amounts due or paid to other sources against									
	amounts due or received from them.)									
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a								
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year									
13	Section 501(c)(29) qualified nonprofit health insurance issuers.									
а	Is the organization licensed to issue qualified health plans in more than one state?	13a								
	Note. See the instructions for additional information the organization must report on Schedule O.									
b	Enter the amount of reserves the organization is required to maintain by the states in which the									
	organization is licensed to issue qualified health plans									
	Enter the amount of reserves on hand									
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Х						
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b								

Form 990 (2011) GLOBAL WASHINGTON 27-0521628 Page **6** 

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

Check if Schedule O contains a response to any question in this Part VI

х

<u>Sec</u>	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	7		
	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 in Schedule O.			
b	Enter the number of voting members included in line 1a, above, who are independent 1b	7		
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?	2		Х
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors, or trustees, or key employees to a management company or other person?	3		Х
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4	Х	
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		Х
6	Did the organization have members or stockholders?	6	Х	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or			
	more members of the governing body?	7a		х
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			
	persons other than the governing body?	7b		х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	х	
b	Each committee with authority to act on behalf of the governing body?	8b	Х	
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 in Schedule O	9		х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		Х
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,			
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a		11a	Х	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	х	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Х	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	in Schedule O how this was done	12c	х	
13	Did the organization have a written whistleblower policy?	13	Х	
14	Did the organization have a written document retention and destruction policy?	14		Х
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?			
а	The organization's CEO, Executive Director, or top management official	15a	х	
b	Other officers or key employees of the organization	15b	Х	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
	taxable entity during the year?	16a		Х
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's			
	exempt status with respect to such arrangements?	16b		
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed NONE			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only)	availah	le	
-	for public inspection. Indicate how you made these available. Check all that apply.			
	Own website Another's website X Upon request			
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, at	nd finar	ncial	
	statements available to the public during the tax year.			
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who person of the person who person of the person who person of the perso	ation:	•	
	MA MCCOLLISTER, INC 206-725-7063			

Form 990 (2011) GLOBAL WASHINGTON 27-0521628 Page **7** 

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

Check if Schedule O contains a response to any question in this Part VII

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
  - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

Classifier   Foundation   Compensation   Compensa	<b>(A)</b> Name and Title	(B) Average hours per week	box	not c , unle cer ar	Pos heck ss pe	more rson	than is bot	h an	( <b>D)</b> Reportable compensation from	<b>(E)</b> Reportable compensation from related	<b>(F)</b> Estimated amount of other	
BOARD PRESIDENT & CHAIR   3,00   X   X   0. 0. 0. 0.		hours for related organizations in Schedule	trustee	In stitutional trustee	Officer	Key employee	Highest compensated employee	Former	organization		from the organization and related	
SUSAN JEFFORDS   BOARD VICE PRESIDENT   3.00 X X												
BOARD VICE PRESIDENT   3.00 x x x   0. 0. 0. 0.		3.00	Х		Х				0.	0.	0.	
SCOTT JACKSON   BOARD TREASURER   3.00 X												
BOARD TREASURER 3.00 X X 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0.		3.00	Х		Х				0.	0.	0.	
(4) TIM HANSTAD         BOARD SECRETARY       3.00 X       X       0.       0.       0         (5) TANYA BASKIN       0.       0.       0.       0.       0         BOARD MEMBER       3.00 X       0.       0.       0.       0         (6) CAROL A. WELCH       0.       0.       0.       0.       0.         BOARD MEMBER       2.00 X       0.       0.       0.       0.         (7) TIM DUBEL       0.       0.       0.       0.       0.       0.       0.         (8) WILL POOLE       0.			l		l							
BOARD SECRETARY   3.00 x x   0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0.		3.00	X		Х				0.	0.	0.	
STANYA BASKIN   BOARD MEMBER   3.00 X   0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0.		2 00	١,,		,,					0	0	
BOARD MEMBER   3.00 X   0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0.		3,00	X		<u> </u>				0.	0.	0,	
(6) CAROL A. WELCH       BOARD MEMBER     2.00 X     0. 0. 0. 0       (7) TIM DUBEL     0. 0. 0. 0. 0       FORMER BOARD MEMBER     2.00 X     0. 0. 0. 0       (8) WILL POOLE     0. 0. 0. 0. 0. 0       BOARD MEMBER     1.00 X     0. 0. 0. 0. 0       (9) LISA COHEN     0. 0. 0. 0. 0       FORMER BOARD MEMBER     0.00 X     0. 0. 0. 0. 0       (10) SARA CURRAN     0. 0. 0. 0. 0       FORMER BOARD SECRETARY     0.00 X     X     0. 0. 0. 0       (11) BOOKDA GHEISAR     0. 0. 0. 0		3 00	<sub>v</sub>							٥	0	
BOARD MEMBER   2.00   X   0. 0. 0. 0. 0.		3.00	^						0.	0.	0.	
(7) TIM DUBEL         FORMER BOARD MEMBER       2.00 X       0.0.0       0.0.0         (8) WILL POOLE       0.00 X       0.0.0       0.0.0         BOARD MEMBER       1.00 X       0.0.0       0.0.0       0.0.0         (9) LISA COHEN       0.00 X       0.0.0       0.0.0       0.0.0       0.0.0         FORMER BOARD MEMBER       0.00 X       0.00 X       0.0.0		2 00	l x						0	0	0.	
FORMER BOARD MEMBER 2.00 X 0. 0. 0. 0 (8) WILL POOLE		2.00										
(8) WILL POOLE BOARD MEMBER 1.00 X 0. 0. 0. 0 (9) LISA COHEN FORMER BOARD MEMBER 0.00 X 0. 0. 0 (10) SARA CURRAN FORMER BOARD SECRETARY 0.00 X 0. 0. 0		2.00	x						0.	0.	0.	
BOARD MEMBER         1.00 X         0.00									-			
(9) LISA COHEN         FORMER BOARD MEMBER       0.00 X		1.00	x						0.	0.	0.	
(10) SARA CURRAN FORMER BOARD SECRETARY 0.00 X X 0.00 (11) BOOKDA GHEISAR	(9) LISA COHEN											
FORMER BOARD SECRETARY 0.00 X X 0. 0. 0. (11) BOOKDA GHEISAR	FORMER BOARD MEMBER	0.00	х						0.	0.	0.	
(11) BOOKDA GHEISAR	(10) SARA CURRAN											
	FORMER BOARD SECRETARY	0.00	х		х				0.	0.	0 .	
EXECUTIVE DIRECTOR 50.00 X 100,417. 0. 6,324	(11) BOOKDA GHEISAR											
	EXECUTIVE DIRECTOR	50.00					Х		100,417.	0.	6,324.	

132007 01-23-12 Form **990** (2011)

Form 990		GLOBAL WASH	INGTON								27-052162	8	Р	age 8
Part VI	Section A.	Officers, Directors, T		nplo	yee			High	est	Compensated Employ	ees (continued)			
	-	A) and title	(B) Average hours per week	Average Position (do not check more box, unless person i					h an	compensation from	<b>(E)</b> Reportable compensation from related	а	(F) stimate mount other	of
			(describe hours for related organizations in Schedule O)	Individual trustee or director	Institutional trustee	Officer		Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	or	compensation from the organization and related organization	
1b Suk	-total									100,417.	(		6	,324.
		uation sheets to Part								0.		).		0.
		o and 1c)								100,417.	(	).	6	,324.
		dividuals (including but n the organization	not limited to th	ose	liste	ed at	oove	e) wł	no re	eceived more than \$100	,000 of reportable		Lve	1
<b>3</b> Did	tha araanizatio	n list on <b>former</b> office	ar director or tru	oto	م ادم		مامم		or k	sighest companyated o	malayaa an		Yes	No
		omplete Schedule J foi		Stee	e, Ke					nighest compensated e		3		х
				e cc	mpe					ner compensation from				
	-	zations greater than \$1										4		Х
									elate	ed organization or indivi	dual for services			
		ganization? <i>If</i> "Yes," co nt Contractors	mpiete Schedule	J f	or su	ıch į	oers	son .				5		Х
<b>1</b> Cor	nplete this tabl	e for your five highest o								nat received more than		nsation	from	
ше	organization. F	(A) Name and busines		NO		ig W	VILTI	OI W	iu iin	the organization's tax (B)  Description of s		Comp	<b>C)</b> ensatio	 n

(A)
Name and business address
NONE

Description of services

Compensation

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

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Ра	rt VII	Statement of Reven	iue					
					<b>(A)</b> Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
ts st	1 a	Federated campaigns	1a					
필		Membership dues	·······	77,463.				
۵ؚۜۊٳ	c			, -				
its I A								
اڙڙي		Related organizations						
Siz	_	Government grants (contributions gifts grant	. —					
를 불	f	, , , ,	1 1	426 040				
윤희		similar amounts not included abov		436,848.				
Contributions, Gifts, Grants and Other Similar Amounts	g			18,758.	F4.4 344			
<u>а С</u>	h	Total. Add lines 1a-1f		<b></b>	514,311.			
				Business Code				
<u>.</u>	2 a			813319	87,051.	87,051.		
e e	b	PROGRAM EVENTS		541830	67,550.	67,550.		
Program Service Revenue	С	PUBLIC AWARENESS CMPGN		813319	27,000.	27,000.		
e a	d	l						
<u> </u>	е							
Д.	f	All other program service reve	nue					
	g	Total. Add lines 2a-2f		<b></b>	181,601.			
	3	Investment income (including	dividends, inte	erest, and				
		other similar amounts)		▶	205.			205.
	4	Income from investment of tax	k-exempt bond	l proceeds 🕨				
	5	Royalties		<b></b>				
			(i) Real	(ii) Personal				
	6 a	Gross rents						
	b	Less: rental expenses						
	С	<b>5</b>						
	d	Net rental income or (loss)		<b></b>				
		Gross amount from sales of	(i) Securities					
		assets other than inventory						
	b	Less: cost or other basis						
		and sales expenses						
	c	Gain or (loss)						
		Net gain or (loss)						
		Gross income from fundraising						
Other Revenue	-	including \$						
e e		contributions reported on line						
Ę.		Part IV, line 18	-	a				
te	b	Less: direct expenses		b				
0		: Net income or (loss) from fund						
		Gross income from gaming ac	· ·	,				
		Part IV, line 19		a				
	b	Less: direct expenses		b				
		: Net income or (loss) from gam						
		Gross sales of inventory, less	ŭ					
		and allowances		a				
	b	Less: cost of goods sold		b				
		: Net income or (loss) from sales						
İ		Miscellaneous Revenue		Business Code				
İ	11 a							
	b							
	С	;						
	d	All other revenue						
		Total. Add lines 11a-11d		<b>.</b>				
	12	Total revenue. See instructions.			696,117.	181,601.	0.	205.

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#### Part IX | Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

	plete columns (B), (C), and (D).		5		
	Check if Schedule O contains a respons	se to any question in thi	s Part IX(B)	(C)	
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to governments and				
	organizations in the United States. See Part IV, line 21				
2	Grants and other assistance to individuals in				
	the United States. See Part IV, line 22				
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				
	United States. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	106,741.	45,595.	35,460.	25,686
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	51.101		11.005	
7	Other salaries and wages	64,431.	32,126.	14,206.	18,099
8	Pension plan accruals and contributions (include				
	section 401(k) and section 403(b) employer contributions)				
9	Other employee benefits	23,961.	8,569.	10,504.	4,888.
10	Payroll taxes	16,173.	7,148.	4,895.	4,130.
11	Fees for services (non-employees):				
а	Management				
b	Legal				
С	Accounting	25,433.	5,341.	12,971.	7,121.
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other	152,664.	139,870.	4,586.	8,208.
12	Advertising and promotion	68,033.	62,646.	3,369.	2,018.
13	Office expenses	13,311.	8,465.	3,569.	1,277.
14	Information technology	8,883.	5,750.	1,865.	1,268
15	Royalties				
16	Occupancy	8,618.	4,870.	2,112.	1,636.
17	Travel	5,000.	3,223.	1,409.	368.
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	66,713.	66,649.	64.	
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	1,128.	500.	346.	282,
23	Insurance	1,684.	1,217.	249.	218.
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.)				
а	BANK FEES	4,843.	2,103.	2,103.	637.
b	B&O TAXES	3,456.	0.	3,456.	0.
С					
d					
е	All other expenses	8,140.	2,299.	5,741.	100.
25	Total functional expenses. Add lines 1 through 24e	579,212.	396,371.	106,905.	75,936.
26	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)				

Form 990 (2011)
Part X Balance Sheet GLOBAL WASHINGTON 27-0521628 Page **11** 

Pa	ILA	Balance Sheet			(A) Beginning of year		<b>(B)</b> End of year
	1	Cash - non-interest-bearing			100,991.	1	109,551.
	2	Savings and temporary cash investments				2	2,497.
	3					3	105,000.
	l .	Pledges and grants receivable, net			10,710.	4	1,000.
	4	Accounts receivable, net  Receivables from current and former officers, di			10,710.	4	1,000.
	5						
		employees, and highest compensated employee				_	
		of Schedule L				5	
	6	Receivables from other disqualified persons (as					
		4958(f)(1)), persons described in section 4958(c		-			
		employers and sponsoring organizations of sections		·			
S		employees' beneficiary organizations (see instru				6	
Assets	7	Notes and loans receivable, net				7	
As	8	Inventories for sale or use			8		
	9	Prepaid expenses and deferred charges			35.	9	3,932.
	10a	Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D		6,551.			
	b	Less: accumulated depreciation	10b	1,128.	0.	10c	5,423.
	11	Investments - publicly traded securities			11		
	12	Investments - other securities. See Part IV, line			12		
	13	Investments - program-related. See Part IV, line			13		
	14	Intangible assets			14		
	15	Other assets. See Part IV, line 11		15			
	16	Total assets. Add lines 1 through 15 (must equ			111,736.	16	227,403.
	17	Accounts payable and accrued expenses		31,439.	17	30,201.	
	18	Grants payable			18		
	19	Deferred revenue				19	
	20	Tax-exempt bond liabilities				20	
တ္သ	21	Escrow or custodial account liability. Complete				21	
Liabilities	22	Payables to current and former officers, director					
ig		highest compensated employees, and disqualifi					
Ë		of Schedule L	=	·		22	
	23	Secured mortgages and notes payable to unrela				23	
	24	Unsecured notes and loans payable to unrelate				24	
	25	Other liabilities (including federal income tax, pa				2-7	
	20	parties, and other liabilities not included on lines					
		O-bd-d- D	•	·		25	
	26	Total liabilities. Add lines 17 through 25			31,439.	26	30,201.
	20	Organizations that follow SFAS 117, check he			01,101.	20	00,202.
m			- I -	and complete			
ĕ	07	lines 27 through 29, and lines 33 and 34.			69,962.	07	82,977.
lan	27	Unrestricted net assets			10,335.	27	114,225.
Ва	28	Temporarily restricted net assets			10,333.	28	114,223.
pur	29					29	
Ę		Organizations that do not follow SFAS 117, c	neck her	e 🕨 📖 and			
10 S		complete lines 30 through 34.					
set	30	Capital stock or trust principal, or current funds				30	
As	31	Paid-in or capital surplus, or land, building, or ed				31	
Net Assets or Fund Balances	32	Retained earnings, endowment, accumulated in				32	
Z	33	Total net assets or fund balances			80,297.	33	197,202.
	34	Total liabilities and net assets/fund balances			111,736.	34	227,403.

Form **990** (2011)

GLOBAL WASHINGTON Form 990 (2011) 27-0521628 Page **12** Part XI Reconciliation of Net Assets Check if Schedule O contains a response to any question in this Part XI 1 Total revenue (must equal Part VIII, column (A), line 12) 579,212. 2 Total expenses (must equal Part IX, column (A), line 25) 2 116,905. 3 Revenue less expenses. Subtract line 2 from line 1 3 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) 80.297. 4 4 Other changes in net assets or fund balances (explain in Schedule O) 0 5 197,202. Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B)) Part XII Financial Statements and Reporting Check if Schedule O contains a response to any question in this Part XII Yes No Accounting method used to prepare the Form 990: 
Cash X Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O. 2a Were the organization's financial statements compiled or reviewed by an independent accountant? 2a Х Were the organization's financial statements audited by an independent accountant? Х 2b If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit. review, or compilation of its financial statements and selection of an independent accountant? Х 2c If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O. d If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a separate basis, consolidated basis, or both: X Separate basis Consolidated basis Both consolidated and separate basis 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit

Act and OMB Circular A-133?

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit

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

Form 990 (2011)

За

#### **SCHEDULE A**

Department of the Treasury Internal Revenue Service

(Form 990 or 990-EZ)

# **Public Charity Status and Public Support**

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

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization Employer identification number GLOBAL WASHINGTON 27-0521628 Reason for Public Charity Status (All organizations must complete this part.) See instructions. Part I The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.) 2 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name. 4 city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) 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.) 10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h. c Type III - Functionally integrated **b** Type II Type III - Other By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below. Yes Nο the governing body of the supported organization? 11g(i) (ii) A family member of a person described in (i) above? 11g(ii) (iii) A 35% controlled entity of a person described in (i) or (ii) above? Provide the following information about the supported organization(s). h (iii) Type of (vi) Is the (iv) Is the organization (v) Did you notify the (vii) Amount of (i) Name of supported (ii) EIN organization in col. organization in col. (i) listed in your organization in col. organization support (described on lines 1-9 governing document? (i) of your support? U.S.? above or IRC section

Yes

No

Yes

Yes

No

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

(see instructions))

Schedule A (Form 990 or 990-EZ) 2011

Total

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

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

Calendar year (or fiscal year beginning in) (a) 2007 (b) 2008 (c) 2009 (d) 2010 (e)	2011	
Calendar year (or fiscal year beginning in) ► (a) 2007 (b) 2008 (c) 2009 (d) 2010 (e)	2011	(f) Total
1 Gifts, grants, contributions, and		
membership fees received. (Do not		
include any "unusual grants.") 213,178.	514,311.	727,489.
2 Tax revenues levied for the organ-		
ization'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 5	514,311.	727,489.
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)		469,120.
6 Public support. Subtract line 5 from line 4.		258,369.
Section B. Total Support	•	
Calendar year (or fiscal year beginning in) (a) 2007 (b) 2008 (c) 2009 (d) 2010 (e)	2011	(f) Total
7 Amounts from line 4 213,178.	514,311.	727,489.
8 Gross income from interest,		
dividends, payments received on		
securities loans, rents, royalties		
and income from similar sources	205.	287.
9 Net income from unrelated business		
activities, whether or not the		
business is regularly carried on		
10 Other income. Do not include gain		
or loss from the sale of capital		
assets (Explain in Part IV.)		
11 Total support. Add lines 7 through 10		727,776.
12 Gross receipts from related activities, etc. (see instructions)		398,319.
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 <b>stop here</b>		<b>X</b>
Section C. Computation of Public Support Percentage		•
14 Public support percentage for 2011 (line 6, column (f) divided by line 11, column (f))		%
15 Public support percentage from 2010 Schedule A, Part II, line 14		%
16a 33 1/3% support test - 2011. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, che	eck this bo	x and
stop here. The organization qualifies as a publicly supported organization		
b 33 1/3% support test - 2010. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more		
and <b>stop here.</b> The organization qualifies as a publicly supported organization		
17a 10% -facts-and-circumstances test - 2011. If the organization did not check a box on line 13, 16a, or 16b, and line		
and if the organization meets the "facts-and-circumstances" test, check this box and <b>stop here.</b> Explain in Part IV how		
meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization		
b 10% -facts-and-circumstances test - 2010. If the organization did not check a box on line 13, 16a, 16b, or 17a, and		
more, and if the organization meets the "facts-and-circumstances" test, check this box and <b>stop here.</b> Explain in Part		
organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization		
<b>18 Private foundation.</b> If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see i		

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

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support							
_	endar year (or fiscal year beginning in)	(a) 2007	<b>(b)</b> 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
	Gifts, grants, contributions, and		<u> </u>	,	,	` '	,
	membership fees received. (Do not	I					
	include any "unusual grants.")	1					
2	Gross receipts from admissions,						
	merchandise sold or services per-	1					
	formed, or facilities furnished in	I					
	any activity that is related to the organization's tax-exempt purpose	I					
3	Gross receipts from activities that						
	are not an unrelated trade or bus-	I					
	iness under section 513	I					
4							
7	ization's benefit and either paid to	I					
	or expended on its behalf	İ					
_							
Э	The value of services or facilities	I					
	furnished by a governmental unit to	İ					
•	the organization without charge						
	Total. Add lines 1 through 5						
/ 8	Amounts included on lines 1, 2, and	1					
L	3 received from disqualified persons						
ı.	Amounts included on lines 2 and 3 received from other than disqualified persons that	I					
	exceed the greater of \$5,000 or 1% of the	I					
	amount on line 13 for the year	<del></del>					
	Add lines 7a and 7b						
	Public support (Subtract line 7c from line 6.)						
_	ction B. Total Support		1	ı	1		
	endar year (or fiscal year beginning in)	<b>(a)</b> 2007	<b>(b)</b> 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
	Amounts from line 6	<del>                                     </del>					
108	Gross income from interest, dividends, payments received on	I					
	securities loans, rents, royalties	İ					
	and income from similar sources	<u> </u>					
k	Unrelated business taxable income	I					
	(less section 511 taxes) from businesses	I					
	acquired after June 30, 1975						
	Add lines 10a and 10b						
11	Net income from unrelated business	İ					
	activities not included in line 10b, whether or not the business is	I					
	regularly carried on						
12	Other income. Do not include gain	I					
	or loss from the sale of capital assets (Explain in Part IV.)	<u> </u>					
13	<b>Total support</b> (Add lines 9, 10c, 11, and 12.)						
14	First five years. If the Form 990 is for	the organization'	s first, second, thir	d, fourth, or fifth t	ax year as a section	on 501(c)(3) organiz	zation,
	check this box and stop here						<b>&gt;</b>
Se	ction C. Computation of Publ	ic Support Pe	rcentage				
15	Public support percentage for 2011 (I	ine 8, column (f) d	livided by line 13,	column (f))		15	%
	Public support percentage from 2010					16	%
Se	ction D. Computation of Inves	tment Incom	e Percentage				
17	Investment income percentage for 2011 (line 10c, column (f) divided by line 13, column (f))				%		
18	Investment income percentage from 2	<b>2010</b> Schedule A,	Part III, line 17			18	%
19a	a 33 1/3% support tests - 2011. If the	organization did r	not check the box	on line 14, and lin	e 15 is more than	33 1/3%, and line	17 is not
	more than 33 1/3%, check this box a	nd <b>stop here.</b> The	e organization qua	ifies as a publicly	supported organiz	ation	▶□
k	b 33 1/3% support tests - 2010. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and						
	line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization 🕨						
20	Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions						

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

Department of the Treasury Internal Revenue Service

Name of the organization

## **Schedule of Contributors**

► Attach to Form 990, Form 990-EZ, or Form 990-PF.

OMB No. 1545-0047

2011

Employer identification number

GL	OBAL WASHINGTON	27-0521628		
Organization type (check	one):			
Filers of:	Section:			
Form 990 or 990-EZ	X 501(c)( <sup>3</sup> ) (enter number) organization			
	4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation			
	527 political organization			
Form 990-PF	501(c)(3) exempt private foundation			
	4947(a)(1) nonexempt charitable trust treated as a private foundation			
	501(c)(3) taxable private foundation			
	is covered by the <b>General Rule</b> or a <b>Special Rule.</b> )(7), (8), or (10) organization can check boxes for both the General Rule and a Special Ru	lle. See instructions.		
General Rule				
contributor. Comp	on filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in molete Parts I and II.	oney or property) from any one		
Special Rules				
509(a)(1) and 170	For a section 501(c)(3) organization 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) and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.			
total contributions	For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III.			
contributions for u If this box is chec purpose. Do not c	For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use <i>exclusively</i> for religious, charitable, etc., purposes, but these contributions did not total to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an <i>exclusively</i> religious, charitable, etc., purpose. Do not complete any of the parts unless the <b>General Rule</b> applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year.			
but it must answer "No" or	that is not covered by the General Rule and/or the Special Rules does not file Schedule En Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on Part at 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) (2011)

Name of organization Employer identification number

GLOBAL W	ASHINGTON	27-	-0521628
Part I	Contributors (see instructions). Use duplicate copies of Part I if a	dditional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		\$\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2		\$\$	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3		\$\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4		\$\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person Payroll Noncash (Complete Part II if there is a noncash contribution.)

Schedule B (Form 990, 990-EZ, or 990-PF) (2011) Name of organization **Employer identification number** 

GLOBAL WASHINGTON 27-0521628

Part II	Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.				
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received		
	SOFTWARE AND MAPPING				
4					
		\$14,038.	11/30/11		
(a)	<b>a</b> >	(c)			
No. from	(b) Description of noncash property given	FMV (or estimate)	(d) Date received		
Part I	, , ,	(see instructions)			
		\$			
(a)					
No.	(b)	(c) FMV (or estimate)	(d)		
from	Description of noncash property given	(see instructions)	Date received		
Part I					
		\$			
(a)		(c)			
No. from	(b) Description of noncash property given	FMV (or estimate)	(d) Date received		
Part I	Description of noncasti property given	(see instructions)	Date received		
		\$			
(a) No.	(b)	(c)	(d)		
from	Description of noncash property given	FMV (or estimate) (see instructions)	Date received		
Part I		,			
	·	\$			
(a)		(c)			
No. from	(b) Description of noncash property given	FMV (or estimate)	(d) Date received		
Part I	Description of noncasti property given	(see instructions)	Date received		
		\$			

Schedule B (Form 990, 990-EZ, or 990-PF) (2011) Page 4 Name of organization Employer identification number GLOBAL WASHINGTON 27-0521628 religious, charitable, etc., individual contributions to section 501(c)(7), (8), or (10) organizations that total more than \$1,000 for the Part III Exclusively religious, charitable, etc., individual contributions to section building, o), or (10) organizations may year. 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 information once.) Use duplicate copies of Part III if additional space is needed. (a) No. from Part I (c) Use of gift (d) Description of how gift is held (b) Purpose of gift (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. `from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

# **SCHEDULE D**

(Form 990)

Department of the Treasury Internal Revenue Service

# **Supplemental Financial Statements**

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

Attach to Form 990. ➤ See separate instructions.

2011
Open to Public Inspection

Name of the organization

GLOBAL WASHINGTON

Employer identification number 27-0521628

Pai	rt I	Organizations Maintaining Donor Advised		or Ac	counts. Complete if the
		organization answered "Yes" to Form 990, Part IV, line (		(1-)	. Francisco de districto de la constanta
		<del> </del>	(a) Donor advised funds	(a)	Funds and other accounts
1		number at end of year			
2		gate contributions to (during year)			
3		gate grants from (during year)			
4	-	gate value at end of year			
5		e organization inform all donors and donor advisors in w	_		
		e organization's property, subject to the organization's e			
6		e organization inform all grantees, donors, and donor ad			
		aritable purposes and not for the benefit of the donor or			
Pai	imper	missible private benefit?			
		Conservation Easements. Complete if the orga		art IV, III	ne /.
1		se(s) of conservation easements held by the organization	` , ,,		
		Preservation of land for public use (e.g., recreation or ed	· —		
		Protection of natural habitat	Preservation of a certi	fied hist	coric structure
_		Preservation of open space			
2		lete lines 2a through 2d if the organization held a qualifie	ed conservation contribution in the form	of a con	servation easement on the last
	day o	the tax year.			Hold state Ford of the Tou Voss
				-	Held at the End of the Tax Year
а		number of conservation easements			2a
b		acreage restricted by conservation easements			2b
С		er of conservation easements on a certified historic struc			2c
d		er of conservation easements included in (c) acquired af	•		
_		in the National Register			2d
3	_	er of conservation easements modified, transferred, rele	ased, extinguished, or terminated by the	organiz	ation during the tax
	year				
4		er of states where property subject to conservation ease			
5		the organization have a written policy regarding the perio			Yes No
_		ons, and enforcement of the conservation easements it h			
6		and volunteer hours devoted to monitoring, inspecting, a			
7		nt of expenses incurred in monitoring, inspecting, and er each conservation easement reported on line 2(d) above			
8		1: 470(1)(4)(D)(**)0	•		Yes No
^					
9		t XIV, describe how the organization reports conservation	·		·
		e, if applicable, the text of the footnote to the organization	on's financial statements that describes	tne orga	inization's accounting for
Pai		rvation easements.  Organizations Maintaining Collections of	Art Historical Treasures or O	ther S	imilar Assets
ı uı		Complete if the organization answered "Yes" to Form 9		tilei e	milia Assets.
10	If tho	organization elected, as permitted under SFAS 116 (ASC		ont and	halanca shoot works of art
ıa		cal treasures, or other similar assets held for public exhib	•		
		kt of the footnote to its financial statements that describe		ice oi p	ublic service, provide, in Fait XIV,
h				and ha	lance shoot works of art, historical
D		organization elected, as permitted under SFAS 116 (ASC	• •		
		res, or other similar assets held for public exhibition, edu	ication, or research in furtherance of put	JIIC SELV	ice, provide the following amounts
		g to these items:			<b>•</b> •
		evenues included in Form 990, Part VIII, line 1			Φ
0			pures or other similar assets for financia		\$
2		organization received or held works of art, historical treas		ı yaırı, p	rovide
_		lowing amounts required to be reported under SFAS 116			•
		ues included in Form 990, Part VIII, line 1			> \$ > \$
р	ASSET	s included in Form 990. Part X			<b>■</b> D

GLOBAL WASHINGTON Schedule D (Form 990) 2011 27-0521628 Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued) Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply): Loan or exchange programs Public exhibition b Scholarly research Preservation for future generations Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV. 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? Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21. 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? **b** If "Yes." explain the arrangement in Part XIV and complete the following table: Amount c Beginning balance 1c d Additions during the year 1d Distributions during the year 1e Ending balance 1f 2a Did the organization include an amount on Form 990, Part X, line 21? b If "Yes," explain the arrangement in Part XIV. Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10. (c) Two years back (d) Three years back (e) Four years back (a) Current year (b) Prior year 1a Beginning of year balance ..... Contributions Net investment earnings, gains, and losses Grants or scholarships Other expenditures for facilities and programs Administrative expenses g End of year balance Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: Board designated or quasi-endowment Permanent endowment Temporarily restricted endowment ▶ The percentages in 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: Yes No (i) unrelated organizations 3a(i) (ii) related organizations 3a(ii) b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? Describe in Part XIV the intended uses of the organization's endowment funds. Land, Buildings, and Equipment. See Form 990, Part X, line 10. Description of property (a) Cost or other (b) Cost or other (c) Accumulated (d) Book value basis (investment) basis (other) depreciation 1a Land **b** Buildings c Leasehold improvements

5 423

,423

1,128.

6,551.

d Equipment

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

GLOBAL WASHINGTON 27-0521628 Schedule D (Form 990) 2011 Page 3 Part VII Investments - Other Securities. See Form 990, Part X, line 12. (a) Description of security or category (c) Method of valuation: (b) Book value (including name of security) Cost or end-of-year market value (1) Financial derivatives (2) Closely-held equity interests Other (B) (C) (D) (E) (F) (G) (H) **(I)** Total. (Col (b) must equal Form 990, Part X, col (B) line 12.) Part VIII Investments - Program Related. See Form 990, Part X, line 13. (c) Method of valuation: (a) Description of investment type (b) Book value Cost or end-of-year market value (1) (2)(3)(4)(5) (6) (7)(8) (9)

(10)Total. (Col (b) must equal Form 990, Part X, col (B) line 13.) Part IX Other Assets. See Form 990, Part X, line 15. (a) Description (b) Book value (1) (2)(3)(4) (5) (6)(7)(8)(9) (10)

Total. (Column (b) must equal Form 990, Part X, col (B) line 15.) Other Liabilities. See Form 990, Part X, line 25.

1.	(a) Description of liability	(b) BOOK value
(1)	Federal income taxes	
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		
(11)		
Total.	(Column (b) must equal Form 990, Part X, col (B) line 25.)	

FIN 48 (ASC 740). For the reports the organization's financial statements that reports the organization's financial statements that reports the organization's financial statements.

Schedule D (Form 990) 2011 GLOBAL WASHINGTON 27-0521628 Page 4 Reconciliation of Change in Net Assets from Form 990 to Audited Financial Statements Part XI 696 117. Total revenue (Form 990, Part VIII, column (A), line 12) 579,212. 2 2 Total expenses (Form 990, Part IX, column (A), line 25) 116,905. 3 Excess or (deficit) for the year. Subtract line 2 from line 1 3 4 Net unrealized gains (losses) on investments 4 Donated services and use of facilities 5 6 Investment expenses 6 Prior period adjustments 7 7 Other (Describe in Part XIV.) 8 R 9 Total adjustments (net). Add lines 4 through 8 9 116,905. Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9 10 Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return Total revenue, gains, and other support per audited financial statements 773,886. 1 Amounts included on line 1 but not on Form 990, Part VIII, line 12: 2 Net unrealized gains on investments 2a 77,769 Donated services and use of facilities 2b Recoveries of prior year grants 2c Other (Describe in Part XIV.) 77,769. Add lines 2a through 2d 2e 696,117. Subtract line 2e from line 1 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 Other (Describe in Part XIV.) c Add lines 4a and 4b 696 117. Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return 656,981. Total expenses and losses per audited financial statements 1 Amounts included on line 1 but not on Form 990, Part IX, line 25: 2 a Donated services and use of facilities 77.769. 2a Prior year adjustments 2b Other losses 2c Other (Describe in Part XIV.) 2d 77.769. Add lines 2a through 2d 2e 579,212. Subtract line 2e from line 1 3 Amounts included on Form 990, Part IX, line 25, but not on line 1: a Investment expenses not included on Form 990, Part VIII, line 7b 4a **b** Other (Describe in Part XIV.) n c Add lines 4a and 4b 579,212. Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) Part XIV Supplemental Information Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also complete this part to provide any additional information.

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

# Supplemental Information to Form 990 or 990-EZ

Department of the Treasury Internal Revenue Service Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

Attach to Form 990 or 990-EZ.

OMB No. 1545-0047

2011
Open to Public Inspection

Name of the organization **Employer identification number** GLOBAL WASHINGTON 27-0521628 FORM 990 PART I, LINE 6: GLOBAL WASHINGTON HAS 9 VOLUNTEER BOARD MEMBERS. RESPONSIBLE FOR GOVERNANCE. THE BOARD MEETS 4 TIMES A YEAR WITH AN ESTIMATE OF 500 HOURS TOTAL. IN ADDITION, GLOBAL WASHINGTON HAD APPROXIMATELY 31 ADDITIONAL VOLUNTEERS DURING THE REST OF THE YEAR. VOLUNTEERS COMPLETED A VARIETY OF PROJECTS FROM WRITING NEWSLETTER ARTICLES, PERFORMING RESEARCH, EVENT HELP AND PLANNING, AND ADMINISTRATIVE TASKS. ESTIMATED YEARLY TOTAL FOR VOLUNTEER HOURS IS 4,391 HOURS. FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION: COLLECTIVELY TO BUILD A MORE EQUITABLE AND PROSPEROUS WORLD. GLOBAL WASHINGTON CONVENES MEMBERS TO GENERATE NEW OPPORTUNITIES FOR GROWTH STRENGTHENS MEMBER ORGANIZATIONS TO INCREASE THEIR IMPACT, AND ADVOCATES ACROSS KEY GLOBAL DEVELOPMENT ISSUES AT THE LOCAL, NATIONAL AND GLOBAL LEVEL. FORM 990, PART VI, SECTION A, LINE 4: THE BYLAWS WERE AMENDED DURING THE YEAR TO REFLECT ADDITIONAL DUTIES WITH REGARD TO THE DIRECTORS, EXECUTIVE COMMITTEE AND THE ADVIDORY BOARD. IT ALSO EXPANDED THE EXPENDITURE POLICY TO INCLUDE APPROVAL BY THE EXECUTIVE COMMITTEE FOR TRANSACTIONS INVOLVING \$5,000 OR MORE AND UPDATED THE TERM DIRECTORS CAN SERVE ON THE BOARD TO A MAXIMUM OF TWO YEARS. FORM 990, PART VI, SECTION A, LINE 6: MEMBERS OF GLOBAL WASHINGTON INCLUDE FOUNDATIONS AND OTHER NON-PROFIT ORGANIZATIONS WHOSE PRINCIPAL FUNCTION IS TO STRENGTHEN GLOBAL DEVELOPMENT.

Name of the organization  GLOBAL WASHINGTON	Employer identification number 27-0521628
FORM 990, PART VI, SECTION B, LINE 11: MANAGEMENTS REVIEWS THE DRAFT ALONG	
WITH A SUBSET OF THE BOARD OF DIRECTORS, AND A DRAFT IS DISTRIBUTED TO THE	
BOARD PRIOR TO FILING WITH THE IRS.	
FORM 990, PART VI, SECTION B, LINE 12C: THE CONFLICT OF INTEREST POLICY	
COVERS EACH MEMBER OF THE BOARD OF DIRECTORS, OFFICERS, EACH EMPLOYEE, SUCH	
PERSONS' FAMILY MEMBERS, AFFILIATED ENTITIES, ANY OTHER PERSON THE BOARD	
DETERMINES TO HAVE SUBSTANTIAL INFLUENCE OVER THE ORGANIZATION, AND ANY	
PERSON WHO MET ONE OF THE ABOVE DEFINITIONS AT ANY TIME DURING FIVE YEARS	
BEFORE ANY PROPOSED TRANSACTION THAT MAY INVOLVE A CONFLICT OF INTEREST.	
THE POLICY REQUIRES EACH NEW EMPLOYEE AND BOARD MEMBER TO READ THE POLICY	
AND COMPLETE A COMPLIANCE AND DISCLOSURE STATEMENT. IN ADDITION, EVERY	
EMPLOYEE AND BOARD MEMBER COMPLETES THE STATEMENT ANNUALLY. THE BOARD	
DETERMINES WHETHER A CONFLICT OF INTEREST EXISTS AND REVIEWS ACTUAL	
CONFLICTS. THE BOARD OF DIRECTORS AUTHORIZES AND OVERSEES AN ANNUAL REVIEW	
OF THE ADMINISTRATION OF THE POLICY. IF A CONFLICT OF INTEREST ARISES, THE	
BOARD MEMBER WILL REFRAIN FROM THE DISCUSSION AND VOTE ON THE MATTER.	
FORM 990, PART VI, SECTION B, LINE 15: ANNUALLY, THE COMPENSATION	
COMMITTEE AND CEO USE OUTSIDE COMPENSATION STUDIES TO DEVELOP COMPENSATION	
PACKAGES FOR THE SENIOR MANAGEMENT TEAM. EVERY THIRD YEAR, AN INDEPENDENT	
COMPENSATION CONSULTANT IS ALSO USED.	
FORM 990, PART VI, SECTION C, LINE 19: THE GOVERNING DOCUMENTS, CONFLICT	
OF INTEREST POLICY AND FINANCIAL STATEMENTS ARE MADE AVAILABLE UPON	
REQUEST.	