** PUBLIC DISCLOSURE COPY **

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.

Open to Public

Department of the Treasury Internal Revenue Service

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

ΑF	or the	2021 calendar year, or tax year beginning JUL L, 2U21 and end	ل ling	UN 30, 20	22		
B c	Check if pplicable:	C Name of organization		D Employer ide	ntifica	ation number	
	Address change	GRAMEEN FOUNDATION USA					
	Name change	Doing business as		73-150	279	7	
	Initial return Final	Number and street (or P.0. box if mail is not delivered to street address) 1400 K STREET NW Roo 12	m/suite 5.5	E Telephone nur 202-62		560	
	return/ termin- ated	City or town, state or province, country, and ZIP or foreign postal code	33	G Gross receipts \$		11,748,5	99.
	Amende			H(a) Is this a grou	ıp reti		
	Applica tion			for subordin			No
	pending	SAME AS C ABOVE		H(b) Are all subordina			_ No
T 1	Tax-exe	mpt status: \mathbf{X} 501(c)(3) 501(c) () $\mathbf{\triangleleft}$ (insert no.) 4947(a)(1) or	527	If "No," atta	ch a li	st. See instruction	S
		E: ► WWW.GRAMEENFOUNDATION.ORG		H(c) Group exem	ption	number -	
K F	orm of o	organization: X Corporation Trust Association Other	L Year o	of formation: 199	6 м	State of legal domic	ile: OK
Pa	_	Summary					
Φ	1 E	Briefly describe the organization's mission or most significant activities: TO ENA			ES:	PECIALLY	
Governance	<u>V</u>	NOMEN, TO CREATE A WORLD WITHOUT POVERTY AN					
erns	2 (Check this box if the organization discontinued its operations or disposed of				ets.	1 17
Š	3 1	Number of voting members of the governing body (Part VI, line 1a)			3		17
	1	Number of independent voting members of the governing body (Part VI, line 1b)			5		17 30
Activities &		otal number of individuals employed in calendar year 2021 (Part V, line 2a)			6		45
Ĕ		otal number of volunteers (estimate if necessary)			6 7a		0.
Ac		Total unrelated business revenue from Part VIII, column (C), line 12			/a 7b		0.
	D	Net unrelated business taxable income from Form 990-T, Part I, line 11	<u> </u>	Prior Year	1/6	Current Year	
	8 (Contributions and grants (Part VIII, line 1h)		9,729,27	6.	9,701,1	
Jue	l	Contributions and grants (Part VIII, line 1h) Program service revenue (Part VIII, line 2g)		809,82		951,1	
Revenue	l	nvestment income (Part VIII, column (A), lines 3, 4, and 7d)		40,47	_	48,2	
æ		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		72,11		-129,0	
	l	otal revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		10,651,68		10,571,4	
		Grants and similar amounts paid (Part IX, column (A), lines 1-3)		1,395,24	_	419,1	
		Benefits paid to or for members (Part IX, column (A), line 4)			0.		0.
S	45 6	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		4,104,00	9.	4,092,7	758.
Expenses	16 a F	Professional fundraising fees (Part IX, column (A), line 11e)			0.		0.
ē	b 7	otal fundraising expenses (Part IX, column (D), line 25) 396,464	•				
ω	17 (Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		4,166,56		6,032,9	
	18 7	otal expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		9,665,81		10,544,8	
		Revenue less expenses. Subtract line 18 from line 12		985,87	-	26,6	69.
Net Assets or			Beg	ginning of Current Y		End of Year	
Sset	20 1	otal assets (Part X, line 16)		9,173,31		9,461,5	
et A	21 7	otal liabilities (Part X, line 26)		5,164,38		5,486,0	
	22 N art II	Net assets or fund balances. Subtract line 21 from line 20		4,008,93	0.	3,975,4	40.
		ties of perjury, I declare that I have examined this return, including accompanying schedules and	l ctatama	nte and to the heet o	of my k	ynowladga and haliaf	it ic
	-	, and complete. Declaration of preparer (other than officer) is based on all information of which p			IIIIY K	and belief	, 11 15
ti uo,	1	and complete. Becomment of preparer (other than officer) is based on an information of which p	ριοραιοι	nas any knowledge.			
Sigi	n	Signature of officer		Date			
Her		ZUBAIDA BAI, PRESIDENT AND CEO					
		Type or print name and title					
		Print/Type preparer's name Preparer's signature	D	Oate Chec	k	PTIN	
Paid		RICHARD J. LOCASTRO, CPA Richard J. Loca	estro 0	05/12/2023 if self-e	employed	P0028831	. 4
Prep	oarer [Firm's name ▶ GELMAN, ROSENBERG & FREEDMAN		Firm's EIN	▶ 5	2-1392008	
Use	Only	Firm's address 4550 MONTGOMERY AVE SUITE 800N					
		BETHESDA, MD 20814-2930		Phone no.	301	<u>-951-9090</u>	
May	the IR	S discuss this return with the preparer shown above? See instructions				X Yes	No

2

8,006,613.

18390512 745960 16995

Form 990 (2021) GRAMEEN FOUNDATION USA Part IV Checklist of Required Schedules

1 Is the organization described in section S01(c)(S) or 4047(s)(1) (other than a private foundation)? 1 Yes, "complete Schedule C, Part I 2 Is the organization regioned to complete Schedule S, Schedule of Contributors? See instructions 2 Is 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 I 3 Is the organization and section S01(c)(3) organization. Did the organization engage in bibbying activities, or have a section S01(t)) election in effect during the tax year? If "Yes," complete Schedule C, Part II I 5 Is the organization accidence of the Complete Schedule C, Part II II I I I I I I I I I I I I I I I I				Yes	No
2 Is the organization required to complete Schedule <i>B</i> , Schedule of Contributors? See instructions 3 Indit the organization engage in direct or inferct political campagin activities on behalf of or in opposition to candidates for public office? (**Pes*, "complete Schedule C, Part !" 4 Section 501(c/8) organizations. Did the organization regage in lobbying activities, or have a section 501(n) election in effect during the tax year? (**Pes*, "complete Schedule C, Part !!" 5 Is the organization assection 501(c/8) 501(c/8), or 501(c/8) or 501(1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? **R** complete Schedule C**, Part **1* **Section 501(R)** organizations.** Did the organization engage in lobbying activities, or have a section 501(R)** election in effect during the tax year.** If **Yes**, complete Schedule C**, Part II.** **A Section 501(R)** organization a section 501(R)**, 501(R)**, 601(R)**, 601		If "Yes," complete Schedule A	1_		
public office? // Yes, *complete Schedule C, Part I 4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(ii) election in effect during the tax year? // 1*'es, *complete Schedule C, Part II. 5 Is the organization ascertion 501(c)(4). 501(c)(5). or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Rep. Proc. 98.1912 // 1*'es, *complete Schedule C, Part III. 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 thands or accounts? // 1*'es, *complete Schedule D, Part II. 7 Did the organization receive or hold a conservation easement, including assements to preserve open space, the environment, historic land areas, or historic structures? // 1*'es, *complete Schedule D, Part II. 8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? // 1*'es, *complete Schedule D, Part II. 9 Did the organization maintain collections of works of art, historical treasures, or other similar assets? // 1*'es, *complete Schedule D, Part II. 10 Did the organization and part X, complete Schedule O, Part II. 11 Did the organization directly or through a related organization, hold assets in donor restricted endowments or in quasi endowments? // 1*'es, *complete Schedule D, Part IV. 11 If the organization report an amount for land, buildings, and equipment in Part X, line 10? // 1*'es, *complete Schedule D, Part IV. 12 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? // 1*'es, *complete Schedule D, Part IV. 13 Did the organization report an amount for other assets the securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? // 1*'es, *complete Schedule D, Part X. 14 Did the organization	2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	X	
4 X X 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 III 5 Ibit the organization as section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Rev. Proc. 98.197 If "Yes," complete Schedule C, Part III 5 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 Did the organization maintain any donor advised funds or any similar funds or accounts? If "Yes," complete Schedule D, Part II Did the organization maintain collections of works of art, historical resaures, or other similar assets? If "Yes," complete Schedule D, Part II Did the organization maintain collections of works of art, historical resaures, or other similar assets? If "Yes," complete Schedule D, Part II Did the organization directly of through a related organization, hold assets in donor-restricted endowments or in quasi endowments? If "Yes," complete Schedule D, Part IV To Did the organization service only of the following questions is "Yes," then complete Schedule D, Part IV II If the organization service any of the following questions is "Yes," then complete Schedule D, Part IV II If the organization report an amount for investments - other ecurities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IV II 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 X II II 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 X II II Did t	3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
during the tax year? If "Yes," complete Schedule C, Pert II Is the organization a section 501(2/4), 5016(5), or 501(6)(6), or 501(6)(6) organization that receives membership dues, assessments, or similar amounts as defined in Rev. Proc. 89.19? If "Yes," complete Schedule C, Part III Did the organization maintain any donor advised funds or any similar funds or accounts? If "Yes," complete Schedule D, Part II Did the organization receive or hold a conservation assement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part III Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III Did the organization report an amount in Part X, line 21, for escrew 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? If "Yes," complete Schedule D, Part IV Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? If "Yes," complete Schedule D, Part V If the organization, directly or through a related organization, hold assets in donor-restricted endowments are in quasi endowments? If "Yes," complete Schedule D, Part V Did the organization report an amount for liand, bulidings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VIII Did the organization report an amount for investments - program related in Part X, line 10? If "Yes," complete Schedule D, Part XIII Did the organization report an amount for westments - program related in Part X, line 10, Italia is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part XIII Did the organization report an amount for westments - program related in Part X, line 13, Italia is 5% or more of its total assets reported in Part X, line 16? If "Yes," c		public office? If "Yes," complete Schedule C, Part I	3		X
Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Rev. Proc. 98-187 (**17%; **complete Schedule C, Part III** Bid 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? (**17%; **complete Schedule D, Part II**) Did the organization related or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? (**17%; **res, **complete Schedule D, Part III**) 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? (**17%; **somplete Schedule D, Part IV**) Did the organization report an amount for leated organization, hold assets in donor-restricted endowments or in quasi endowments? (**17%; **complete Schedule D, Part V**) If the organization report an amount for fine Bollowing questions is "Yes," then complete Schedule D, Part VI, If the organization report an amount for investments - other securities in Part X, line 10? (**Yes, **complete Schedule D, Part VIII**) Did the organization report an amount for investments - other securities in Part X, line 19, the yes, **complete Schedule D, Part VIII** Did the organization report an amount for investments - other securities in Part X, line 19, the yes, **complete Schedule D, Part XII** 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? (**Yes, **complete Schedule D, Part XII**) 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? (**Yes, **complete Schedule D, P	4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
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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 II 7 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 III 8 8 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? if "Yes," complete Schedule D, Part IV 9 10 Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? if "Yes," complete Schedule D, Part IV 9 10 Did the organization and any of the following questions is "Yes," then complete Schedule D, Part S, a spipicable. 10 Did the organization report an amount for land, buildings, and equipment in Part X, line 10? if "Yes," complete Schedule D, Part IV 11 If the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? if "Yes," complete Schedule D, Part VII 11 In 2 X 11 Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? if "Yes," complete Schedule D, Part IV 11 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 X 11 Did the organization is ability for uncertain tax portiples Schedule D, Part X II 11 Did the organization is separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Part X 11 Did the organization with a part X 1	5				
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Schedule D, Part III 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? If "Yes," complete Schedule D, Part IV 10 Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? If "Yes," complete Schedule D, Part V 11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Part VI, VII, VIII, IX, or X, as applicable. a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI 12 Did the organization report an amount for investments - other securities in Part X, line 10? If "Yes," complete Schedule D, Part VII 13 Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII 16 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 VIII 16 Did the organization report an amount for other liabilities 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 X VIII 11 Did the organization report an amount for other liabilities 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 X VIII 11 Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Part X VIII 12 Did the organization obtain separate or consolidated financial statements for the tax year? If "Yes," complete Schedule D, Part X VIII 13 Set the organization ore port an Expert VIII, line 3, more than \$5,000 of organi			7		<u> </u>
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 courseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part V 10 Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? If "Yes," complete Schedule D, Part V 11 if the organization is answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X, as applicable. 12 a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI 12 b Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 13 b Did the organization report an amount for other assets in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII 14 Did the organization report an amount for ther liabilities 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 X VIII 15 Did the organization is separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Part X VIII 16 Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Part X VIII	8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
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If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional 12b X 13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 13 Did the organization maintain an office, employees, or agents outside of the United States? 14a X 15 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 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 report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV 16 Did the organization report an Orat IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV 17 Did the organization report an orat of the organization report an orat of the organization report and \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions 18 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, lines 1 and 8a? If "Yes," complete Schedule G, Part II 19 Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H 20a Did the organization report more than \$5,000 of grants or other assistance to any domestic organization organization report more than \$5,000 of grants or other assistance to any domestic organization organization organization report more than \$5,000 of grants or other assistance to any domestic organization organization report more than \$5,000 of grants or other assistance		Schedule D, Parts XI and XII	12a		X
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	b	· · ·	20b		
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		domestic government on Part IX, column (A), line 1? If "Yes." complete Schedule I, Parts I and II	21	X	

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Form 990 (2021) GRAMEEN FOUNDATION USA
Part IV Checklist of Required Schedules (continued)

	·		Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on		100	110
	Part IX, 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			1
	Schedule J	23	Х	1
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			1
	Schedule K. If "No," go to line 25a	24a		Х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			1
	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		
2 5a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			1
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			1
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			1
	Schedule L, Part I	25b		X
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	26		<u> </u>
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			1
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV,			
	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			37
	"Yes," complete Schedule L, Part IV	28a		X
	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		
С	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If			v
	"Yes," complete Schedule L, Part IV	28c	Х	X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Λ	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation	20		x
24	contributions? If "Yes," complete Schedule M	30		X
31 32	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If</i> "Yes," <i>complete Schedule N, Part I</i> Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If</i> "Yes," <i>complete</i>	31		
32	\cdot	32		x
33	Schedule N, Part II Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	32		
33	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33	х	1
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
J	Part V, line 1	34	х	1
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	X	
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	554		
-	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b	Х	1
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36	х	1
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	37		Х
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?			
	Note: All Form 990 filers are required to complete Schedule O	38	Х	
Pa				
	Check if Schedule O contains a response or note to any line 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 on line 1a. Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c	Х	<u> </u>
12200	4 12 00 21	Eorm	990	(2021)

Form 990 (2021) GRAMEEN FOUNDATION USA

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

			Yes	No								
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,											
	filed for the calendar year ending with or within the year covered by this return 2a 30											
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х									
	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" to line 3b, provide an explanation on Schedule O	3b										
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a											
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	X									
b	If "Yes," enter the name of the foreign country ▶ GHANA, KENYA, PHILIPPINES, UGANDA											
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).											
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Х								
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X								
С	c If "Yes" to line 5a or 5b, did the organization file Form 8886-T?											
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								
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								
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b										
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required											
	to file Form 8282?	7c		X								
d	If "Yes," indicate the number of Forms 8282 filed during the year											
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X								
Ť	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X								
9	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		-								
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h										
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year? N/A											
0		8										
э a	 Sponsoring organizations maintaining donor advised funds. a Did the sponsoring organization make any taxable distributions under section 4966? N/A											
b	Did the sponsoring organization make any taxable distributions under section 4966? N/A Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? N/A	9a 9b										
10	Section 501(c)(7) organizations. Enter:	0.5										
а	Initiation fees and capital contributions included on Part VIII, line 12 N/A 10a											
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b	1										
11	Section 501(c)(12) organizations. Enter:	1										
а	Gross income from members or shareholders N/A 11a											
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? N/A	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	4										
	Enter the amount of reserves on hand			v								
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X								
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b		\vdash								
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or	45		X								
	excess parachute payment(s) during the year?	15										
16	If "Yes," see the instructions and file Form 4720, Schedule N.	16		Х								
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Ves." complete Form 4720. Schedule O.	16		\vdash								
17	If "Yes," complete Form 4720, Schedule O. Section 501(c)(21) organizations. Did the trust, any disqualified person, or mine operator engage in any											
.,	activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953? N/A	17										
	If "Yes," complete Form 6069.											

GRAMEEN FOUNDATION USA 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 on Schedule O. See instructions.

	Check if Schedule O contains a response or note to any line in this Part VI			X						
Sec	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									
	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.									
b	Enter the number of voting members included on line 1a, above, who are independent 1b 17									
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		X						
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision									
	of officers, directors, trustees, or key employees to a management company or other person?	3		Х						
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X						
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		Х						
6										
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or									
	more members of the governing body?	7a		X						
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		X						
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:									
а	The governing body?	8a	X							
b	Each committee with authority to act on behalf of the governing body?	8b	X							
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	9		X						
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						
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,									
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b								
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Х							
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990.									
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	X							
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Х							
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe									
	on Schedule O how this was done	12c	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 on Schedule O. See instructions.									
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a									
	taxable entity during the year?	16a	X							
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	X							
Sec	tion C. Disclosure									
17	List the states with which a copy of this Form 990 is required to be filed ►SEE SCHEDULE O									
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)	availal	ole						
	for public inspection. Indicate how you made these available. Check all that apply.									
	X Own website Another's website X Upon request Other (explain on Schedule O)									
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and	financ	cial							
	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									
	ZUBAIDA BAI - 202-628-3560									
	1400 K STREET NW, 1255, WASHINGTON, DC 20005									

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

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

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

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

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

Check this box if neither the organization nor any related organization compensated any current officer, director, of the compensated and current officer, director, of the compensate and current of the compensate and current of the current of the compensate and current of the						•	/E\			
				ر) Posi					(E)	(F) Estimated
Name and title	Average hours per		not c	heck i	more	than o		Reportable compensation	Reportable compensation	amount of
	week					s both r/trus		from	from related	other
	(list any	tor						the	organizations	compensation
	hours for	direc				p		organization	(W-2/1099-MISC/	from the
	related	tee or	ıstee			ensate		(W-2/1099-MISC/	1099-NEC)	organization
	organizations	ndividual trustee or director	In stit utio nal tru stee		Key employee	Highest compensated employee		1099-NEC)		and related
	below	vidua	itutio	cer	emp	hest c	Former			organizations
	line)	lnd	Inst	Officer	Key	E Hig	For			
(1) STEVE HOLLINGWORTH	40.00									
PRESIDENT & CEO (THRU 3/22)	2.00			Х				233,214.	0.	27,409
(2) BRENT CHISM	40.00	1								
INTERIM CEO (BEG. 3/22)	2.00			Х				180,089.	0.	6,659
(3) HERMINIA RUBIO GUTIERREZ	40.00	1								
ACTING CFO				Х				149,588.	0.	0
(4) CESAR DURON	40.00									
DIRECTOR, GLOBAL HUMAN RESOURCES				Х				116,462.	0.	25,142
(5) HEIDI PETERSON	40.00									
SENIOR DIRECTOR, FUNDRAISING						X		130,321.	0.	10,245
(6) ELAINE CHANG	40.00	1								
TAROWORKS COO						Х		128,855.	0.	10,394
(7) CONAN WICKHAM	40.00	1								
DIRECTOR, FINANCE	2.00			Х				114,475.	0.	16,423
(8) ARLYN GIGI GATTI	40.00									
DIR., TECHNOLOGY FOR DEVELOPMENT						X		113,283.	0.	15,708
(9) EMILY ROMERO	40.00	1								
SR DIR., INSTITUTIONAL RELATIONS						Х		122,268.	0.	5,825
(10) TERESA HURD	40.00	1								
DIRECTOR, MARKET DEVELOPMENT						Х		117,531.	0.	3,510
(11) JANE CRONIN	20.00									
GENERAL COUNSEL				Х				20,042.	0.	246
(12) PETER FRANCIS COWHEY	4.00									
CHAIR		Х		Х				0.	0.	0
(13) ELISABETH HOLMES RHYNE	4.00									
VICE CHAIR		Х		Х				0.	0.	0
(14) ELLEN LONGDEN BREYER	4.00									
TREASURER		Х		Х				0.	0.	0
(15) ARTHUR GOSHIN	4.00									
SECRETARY	2.00	Х		Х				0.	0.	0
(16) SHANTANU AGRAWAL	4.00									
BOARD		Х						0.	0.	0
(17) BEVERLY MORRIS ARMSTRONG	4.00									
BOARD	2.00	Х						0.	0.	0 .
132007 12-09-21										Form 990 (202

Part VII Section A. Officers, Directors, Trus	tees, Key Em	oloy	ees,	and	l Hig	ghes	t C	ompensated Employee	s (continued)				
(A)	(B)			(0				(D)	(E)			(F)	
Name and title	Average	(do		Posi		າ than ເ	nne.	Reportable	Reportable	•	Es	timate	∍d
	hours per	box	, unle	ss per	rson i	is both	n an	compensation	compensation	on	am	ount	of
	week	-	cer ar	id a di	irecto	or/trus T	tee)	from	from relate	d		other	
	(list any	director						the	organizatior			pensa	
	hours for	or dir	a.			ated		organization	(W-2/1099-MI	- 1		om th	
	related	stee	truste		a o	bens		(W-2/1099-MISC/	1099-NEC	'	•	anizat	
	organizations below	nal tru	ional		ploye	ee com		1099-NEC)				d relat	
	line)	Individual trustee or	Institutional trustee	Officer	Key employee	Highest compensated employee	Former				orga	ınizati	0115
(18) MARIE-RENEE BAKKER	4.00	드	드	0	포	工商	프			-+			
BOARD	4.00	х						0.		0.			0.
(19) JENNIFER DARLINGTON	4.00							•		- ' 			
BOARD	1100	х						0.		0.			0.
(20) KATHY DYER	4.00												
BOARD		Х						0.		0.			0.
(21) CARLOS JOSE FONSECA	4.00												
BOARD		Х						0.		0.			0.
(22) VIKRAM GANDHI	4.00												
BOARD		Х						0.		0.			0.
(23) WILLIAM GILES HAMM	4.00												
BOARD		Х						0.		0.			0.
(24) LESLIE HYMAN	4.00												
BOARD		Х						0.		0.			0.
(25) NEELA SALDANHA	4.00												
BOARD		Х				<u> </u>		0.		0.			0.
(26) JAMES GROVER THOMAS	4.00												
BOARD		Х						0.		0.			0.
1b Subtotal								1,426,128.		0.	121	1,5	
c Total from continuation sheets to Part V								0.		0.	400		0.
d Total (add lines 1b and 1c)							<u> </u>	1,426,128.		0.	121	1,5	<u>61.</u>
2 Total number of individuals (including but r	not limited to th	ose	liste	d ab	ove) wh	o re	eceived more than \$100,	000 of reportabl	е			
compensation from the organization											-		12
										г		Yes	No
3 Did the organization list any former officer	, director, trust	ee, k	сеу е	empl	oye	e, or	hig	hest compensated emp	loyee on				
line 1a? If "Yes," complete Schedule J for s	such individual										3		X
4 For any individual listed on line 1a, is the s	•							•	•				
and related organizations greater than \$15	0,000? If "Yes,	" со	mple	ete S	Sche	edule	J fo	or such individual		[4	X	
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services													
rendered to the organization? If "Yes." complete Schedule J for such person								5		X			
Section B. Independent Contractors													
1 Complete this table for your five highest co	•	•							•	pensati	ion fro	m	
the organization. Report compensation for	the calendar ye	ear e	endir	ng w	ith c	or wi	thin T		ear.				
(A) (B) (O) Name and business address Description of services Compe							(C omper		n				
HERMINIA RUBIO GUTIERREZ	SERGIO	J	ΑT	IV	A								
N33-03E TGNACTO, OUTTO, I	CUADOR						k	CFO SERVICES		l	149	9 5	88.

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
SEE PART VII, SECTION A CONTINUATION SHEETS

Part VII Section A Officers Directors To										2797
3ection A. Officers, Directors, If	ustees, Key Er	nplo	yee	s, aı	nd H	lighe	est (Compensated Employ	ees (continued)	
(A) Name and title	(B) Average hours			(C Pos	C) ition			(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of
	per week (list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
27) MARIANNE UDOW-PHILLIPS	4.00	Х						0.	0.	0
28) DANIEL BENJAMIN WOLFSON	4.00	х						0.	0.	0

Form 990 (2021) GRAMEEN
Part VIII Statement of Revenue

		Check if Schedule O contains a response	or note to any lin	e in this Part VIII			
				(A)	(B)	(C)	(D)
				Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under
					lunction revenue	business revenue	sections 512 - 514
S S	1 a	Federated campaigns 1a					
Contributions, Gifts, Grants and Other Similar Amounts		Membership dues 1b					
2 5		Fundraising events 1c					
fts,		Related organizations 1d	544,000.				
ig je			2,705,519.				
Sir		3 ()	2,703,313.				
e Hi	T	All other contributions, gifts, grants, and	6 451 652				
들 된		similar amounts not included above 1f	6,451,652.				
out	_	Noncash contributions included in lines 1a-1f	735,604.	0 701 171			
<u>0</u> <u>8</u>	h	Total. Add lines 1a-1f	D	9,701,171.			
			Business Code	051 105	054 405		
Se	2 a	PROGRAM FEES	900099	951,135.	951,135.		
ē <u>X</u>	b						
Sen	c	:					
ev	d	l					
Program Service Revenue	е						
₫	f	All other program service revenue					
	g	Total. Add lines 2a-2f	>	951,135.			
	3	Investment income (including dividends, inter	est, and				
		other similar amounts)	>	35,274.			35,274.
	4	Income from investment of tax-exempt bond					
	5	Royalties	>				
		(i) Real	(ii) Personal				
	6 a	Gross rents 6a					
		Less: rental expenses 6b					
		Rental income or (loss) 6c					
		Net rental income or (loss)	•				
		Gross amount from sales of (i) Securities	(ii) Other				
	, ,	assets other than inventory 7a 1,190,038	. ,				
	h	Less: cost or other basis	•				
ø)	N.						
ğ	_						
ther Revenue			•	12,936.			12,936.
Æ		Net gain or (loss)	·····	12,930.			12,930.
‡	8 a	Gross income from fundraising events (not					
0		including \$ of					
		contributions reported on line 1c). See					
		Part IV, line 18					
		Less: direct expenses8	b				
		Net income or (loss) from fundraising events	_				
	9 a	Gross income from gaming activities. See					
		Part IV, line 19					
		Less: direct expenses 9	b				
	c	Net income or (loss) from gaming activities	>				
	10 a	Gross sales of inventory, less returns					
		and allowances10	a				
	b	Less: cost of goods sold10	b				
	С	Net income or (loss) from sales of inventory	>				
,			Business Code				
Miscellaneous Revenue	11 a	OTHER REVENUE	900099	34,933.			34,933.
ane Dug	b	CURRENCY EXCHANGE LOSS	900099	-163,952.			-163,952.
eve	c	;					
<u>iš</u>	d	All other revenue					
2		Total. Add lines 11a-11d		-129,019.			
	12	Total revenue. See instructions	>	10,571,497.	951,135.	0.	-80,809.

132009 12-09-21

Part IX | Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) Check if Schedule O contains a response or note to any line in this Part IX (**D**) Fundraising expenses (C) Management and general expenses Do not include amounts reported on lines 6b. Program service expenses Total expenses 7b, 8b, 9b, and 10b of Part VIII. Grants and other assistance to domestic organizations 64,321. 64,321. and domestic governments. See Part IV, line 21 Grants and other assistance to domestic individuals. See Part IV, line 22 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 354,797. 354,797. Benefits paid to or for members Compensation of current officers, directors, 7,851. 953,090. 259,612. 685,627. trustees, and key employees Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 196,439. 2,524,736. 1,922,564. 405,733. Other salaries and wages 7 Pension plan accruals and contributions (include 83,888. 47,424. 29,075. 7,389. section 401(k) and 403(b) employer contributions) 195,129. 295,592. 76,078. 24,385. Other employee benefits 9 235,452. 132,606. 86,067. 16,779. 10 Payroll taxes 11 Fees for services (nonemployees): Management 87,536. 42,373. 45,154. Legal 128,727. 48,394. 79,226. 1,107. Accounting Lobbying Professional fundraising services. See Part IV, line 17 600. 600. Investment management fees Other. (If line 11g amount exceeds 10% of line 25, 4,355,762. 3,891,275. 450,811. 13,676. column (A), amount, list line 11g expenses on Sch O.) 17,134. 8,586. 2,437. 6,111. Advertising and promotion 12 209,000. 63,342. 66,280. 79,378. Office expenses 13 454,752. 317,320. 118,419. 19,013. Information technology 14 Royalties 15 123,392. 84,452. 32,633. 6,307. 16 Occupancy 168,926. 145,096. 22,962. 868. 17 Travel Payments of travel or entertainment expenses 18 for any federal, state, or local public officials ... 102,151. 6,873. 109,048. 24. Conferences, conventions, and meetings 19 20 Payments to affiliates 21 201. 201. Depreciation, depletion, and amortization 22 63,144. 35,445. 23,213. 4,486. 23 Other expenses. Itemize expenses not covered 24 above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.) 214,590. 214,590. TRANSFER PRICING MARGIN TAXES AND LICENSES 29,734. 17,383. 214. 12,137. 22,594. 22,055. 452. 87. EQUIP/VEH, REPAIR/MAINT 17,849. 4,529. 13,100. 220. d DUES AND CONFERENCE 29,963. 24.397. 5,368. 198. All other expenses _ 10,544,828. 8,006,613. 2,141,751. 396,464. Total functional expenses. Add lines 1 through 24e 25 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. if following SOP 98-2 (ASC 958-720)

Part	t X	Balance Sheet					
		Check if Schedule O contains a response or not	e to an	/ line in this Part X			
					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing			2,005,020.	1	2,595,113
	2	Savings and temporary cash investments			3,564,883.	2	3,029,971
	3	Pledges and grants receivable, net			879,314.	3	1,080,540
	4	Accounts receivable, net			164,885.	4	403,094
	5	Loans and other receivables from any current or					
		trustee, key employee, creator or founder, subst	antial c	ontributor, or 35%			
		controlled entity or family member of any of the	se perso	ons		5	
	6	Loans and other receivables from other disquali	fied per				
		under section 4958(f)(1)), and persons described	d in sec	tion 4958(c)(3)(B)		6	
ပ္	7	Notes and loans receivable, net				7	
Assets	8	Inventories for sale or use				8	
ĕ	9	B			380,097.	9	767,174
	10a	Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D	10a	147,599.			
	b	Less: accumulated depreciation	10b	147,599.	217.		0
	11	Investments - publicly traded securities			1,000,478.	11	880,030
	12	Investments - other securities. See Part IV, line	l 1			12	
	13	Investments - program-related. See Part IV, line	1,139,116.	13	668,808		
	14	Intangible assets			14		
	15	Other assets. See Part IV, line 11		L	39,305.	15	36,804
	16	Total assets. Add lines 1 through 15 (must equ			9,173,315.	16	9,461,534
	17	Accounts payable and accrued expenses			951,656.	17	1,240,097
	18	Grants payable		18	460.000		
	19	Deferred revenue	380,097.	19	460,838		
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Complete				21	
es	22	Loans and other payables to any current or form					
Liabilities		trustee, key employee, creator or founder, subst					
ia B		controlled entity or family member of any of the				22	
	23	Secured mortgages and notes payable to unrela				23	
	24	Unsecured notes and loans payable to unrelated	-			24	
	25	Other liabilities (including federal income tax, pa	-				
		parties, and other liabilities not included on lines	3 17-24)	. Complete Part X	2 020 620		2 705 152
		of Schedule D			3,832,632.		3,785,153
+	26	Total liabilities. Add lines 17 through 25			5,164,385.	26	5,486,088
_o		Organizations that follow FASB ASC 958, che	ck her				
၁၉၂	- -	and complete lines 27, 28, 32, and 33.			2 061 160		2 000 150
aaa	27	Net assets without donor restrictions			3,864,468. 144,462.	27	3,889,150 86,296
Ö	28	Net assets with donor restrictions			144,402.	28	00,290
<u>Š</u>		Organizations that do not follow FASB ASC 9	ck here				
<u>2</u>	00	and complete lines 29 through 33.					
Sign	29	Capital stock or trust principal, or current funds				29	
SSE	30	Paid-in or capital surplus, or land, building, or ed				30	
ا ب	31	Retained earnings, endowment, accumulated in			4,008,930.	31	3,975,446
	32	Total net assets or fund balances			9,173,315.	32	9,461,534
	33	Total liabilities and net assets/fund balances			3,113,313.	33	Form 990 (202

Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI		<u></u>		X
1	Total revenue (must equal Part VIII, column (A), line 12)	1	10,57	1,4	<u>97.</u>
2	Total expenses (must equal Part IX, column (A), line 25)	2	10,544		
3	Revenue less expenses. Subtract line 2 from line 1	3		6,6	
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	4,008		
5	Net unrealized gains (losses) on investments	5	-158	8,2	66.
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain on Schedule O)	9	98	8,1	13.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,				
	column (B))	10	3,975	5,4	46.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule	Ο.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a			
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	basis,			
	consolidated basis, or both:				
	Separate basis X Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	audit,			
	review, or compilation of its financial statements and selection of an independent accountant?		2c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain on Sche	edule O.			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sing	gle Audit			
	Act and OMB Circular A-133?		За	Х	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the require				
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b	Х	
			Form	990	(2021)

SCHEDULE A

(Form 990)

Total

Department of the Treasury Internal Revenue Service

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.

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

OMB No. 1545-0047

2021

Open to Public Inspection

Employer identification number Name of the organization GRAMEEN FOUNDATION USA 73-1502797 Reason for Public Charity Status. (All organizations must complete this part.) See instructions. Part I The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990).) 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, 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). X An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) 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 10 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.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 11 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. 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. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations Provide the following information about the supported organization(s). (i) Name of supported (ii) EIN (iii) Type of organization (v) Amount of monetary (vi) Amount of other your governing document? (described on lines 1-10 organization support (see instructions) support (see instructions) No above (see instructions))

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

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

Sec	tion A. Public Support										
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total				
1	Gifts, grants, contributions, and										
	membership fees received. (Do not										
	include any "unusual grants.")	5447323.	4028255.	6078473.	9729276.	9701171.	34984498.				
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	5447323.	4028255.	6078473.	9729276.	9701171.	34984498.				
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)						7399676.				
	Public support. Subtract line 5 from line 4.						27584822.				
Sec	tion B. Total Support										
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total				
7	Amounts from line 4	5447323.	4028255.	6078473.	9729276.	9701171.	34984498.				
8	Gross income from interest,										
	dividends, payments received on										
	securities loans, rents, royalties,										
	and income from similar sources	54,452.	57,267.	40,590.	41,043.	35,274.	228,626.				
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.)	-131,283.	-2,486.	19,356.	72,113.		-171,319.				
11	Total support. Add lines 7 through 10						35041805.				
12	Gross receipts from related activities,	etc. (see instructio	ns)			12 5	,639,530.				
13	First 5 years. If the Form 990 is for th	e organization's fir	st, second, third, f	ourth, or fifth tax y	ear as a section 50	D1(c)(3)					
	organization, check this box and stop	here					>				
Sec	tion C. Computation of Publi	c Support Per	centage								
14	Public support percentage for 2021 (li	ne 6, column (f), di	vided by line 11, c	olumn (f))		14	78.72 <u>%</u>				
15	Public support percentage from 2020	Schedule A, Part I	I, line 14			15	79.89 <u>%</u>				
16a	33 1/3% support test - 2021. If the o	organization did no	t check the box or	line 13, and line 1	14 is 33 1/3% or m	ore, check this bo					
	stop here. The organization qualifies	as a publicly suppo	orted organization				►X				
b	33 1/3% support test - 2020. If the o	•		•		•					
	and stop here. The organization qualifies as a publicly supported organization										
17a	a 10% -facts-and-circumstances test - 2021. 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										
b	b 10% -facts-and-circumstances test - 2020. 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-circu		-	•			▶∐				
18	Private foundation. If the organization	n did not check a b	oox on line 13, 16a	a, 16b, 17a, or 17b	, check this box ar	nd see instructions	s				

Schedule A (Form 990) 2021

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

Secti	ion A. Public Support	low, picase comp	nete i art ii.j				
Calend	ar year (or fiscal year beginning in)	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
n	Sifts, grants, contributions, and nembership fees received. (Do not not not not not not not not not no						
n fo a	aross receipts from admissions, nerchandise sold or services per- ormed, or facilities furnished in ny activity that is related to the irganization's tax-exempt purpose						
а	Gross receipts from activities that re not an unrelated trade or busness under section 513						
iz	ax revenues levied for the organ- cation's benefit and either paid to rexpended on its behalf						
5 T	the value of services or facilities urnished by a governmental unit to the organization without charge						
	otal. Add lines 1 through 5						_
	mounts included on lines 1, 2, and received from disqualified persons						
fro ex	mounts included on lines 2 and 3 received om other than disqualified persons that xceed the greater of \$5,000 or 1% of the mount on line 13 for the year						
сА	add lines 7a and 7b						
	Public support. (Subtract line 7c from line 6.)						
	ar year (or fiscal year beginning in)	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
9 A 10a G d s	Amounts from line 6 Gross income from interest, lividends, payments received on ecurities loans, rents, royalties, nd income from similar sources	(4) 2011	10/2010	(0) 20 10	(4) 2020	(6) 202.	(1) 10101
b U (I	Inrelated business taxable income less section 511 taxes) from businesses cquired after June 30, 1975						
11 N a	dd lines 10a and 10b						
12 C	other income. Do not include gain or loss from the sale of capital ssets (Explain in Part VI.)						
	otal support. (Add lines 9, 10c, 11, and 12.)			1			<u> </u>
	irst 5 years. If the Form 990 is for the	· ·			•		. —
	heck this box and stop here						>
	ion C. Computation of Public			. (6)		145	
	Public support percentage for 2021 (lin		•	.,,		15	<u>%</u>
	Public support percentage from 2020					16	%
	ion D. Computation of Invest			ino 10 pali ima (n)		17	0/
	nvestment income percentage for 202					17	<u>%</u>
	nvestment income percentage from 2			on line 14 and line		18	%
	3 1/3% support tests - 2021. If the					- 4.5	▶ □
b 3	nore than 33 1/3%, check this box and 3 1/3% support tests - 2020. If the	organization did n	not check a box or	line 14 or line 19a	a, and line 16 is m	ore than 33 1/3%, a	and
lii	ne 18 is not more than 33 1/3%, chec	k this box and st	top here. The orga	nization qualifies a	as a publicly supp	orted organization	▶∐
20 P	Private foundation. If the organization	n did not check a	hox on line 14 19	a or 19h check th	nis hox and see in	structions	

Part IV | Supporting Organizations

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

Section A. All Supporting Organizations

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

		Yes	No
	1		
	2		
	2-		
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	3b		
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Par	rt IV Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and			
	11c below, the governing body of a supported organization?	11a		
b	A family member of a person described on line 11a above?	11b		
С	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide			
	detail in Part VI.	11c		
Sec	tion B. Type I Supporting Organizations			
			Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one			
	more supported organizations have the power to regularly appoint or elect at least a majority of the organization's offic directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s)	ers,		
	effectively operated, supervised, or controlled the organization's activities. If the organization had more than one support	ted		
	organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the	пе		
	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,	_		
800	supervised, or controlled the supporting organization.	2		
Sec	tion C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
Sec	the supported organization(s). tion D. All Type III Supporting Organizations	1		
	tion 217th Type in capporting organizations		Vaa	No
4	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the		Yes	No
1	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported	•		
_	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described on line 2, above, did the organization's supported organizations have a	_		
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		
Sect	tion E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instru	ctions).		
а	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.			
С	The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity	(see instruction	1 <u>s).</u>	
2	Activities Test. Answer lines 2a and 2b below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a		_
b	Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement,			
	one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in			
	Part VI the reasons for the organization's position that its supported organization(s) would have engaged in			
	these activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer lines 3a and 3b below.			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
	trustees of each of the supported organizations? If "Yes" or "No" provide details in Part VI.	3a		
h	Did the organization evergise a substantial degree of direction over the policies, programs, and activities of each			

| 3b | | | Schedule A (Form 990) 2021

of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.

Schedule A (Form 990) 2021

instructions).

Schedule A (Form 990) 2021

d Excess from 2020 e Excess from 2021

Schedule B

(Form 990)

Department of the Treasury Internal Revenue Service

Schedule of Contributors

► Attach to Form 990 or Form 990-PF.

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

OMB No. 1545-0047

2021

Name of the organization

GRAMEEN FOUNDATION USA

73-1502797

Organization type (check one):

Or garmzation	3,80 (alloak allo).		
Filers of:	Section:		
Form 990 or 9	90-EZ X 501(c)(3) (enter number) organization		
	4947(a)(1) nonexempt charitable trust not 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		
-	organization is covered by the General Rule or a Special Rule . section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.		
General Rule			
	an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or erty) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.		
Special Rules	i de la companya de		
section contr	in 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 ons 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one ributor, 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; 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 (entering "N/A" in column (b) instead of the contributor name and address), 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			
answer "No" o	organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it must 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 meet the filing requirements of Schedule B (Form 990).		

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

Schedule B (Form 990) (2021)

Schedule B (Form 990) (2021)

Name of organization Employer identification number

GRAMEEN FOUNDATION USA

73-1502797

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.					
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
1		\$ 2,233,022.	Person X Payroll			
(a)	(b)	(c)	(d)			
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution			
2		\$1,181,841.	Person X Payroll			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
3		\$934,933.	Person X Payroll X Noncash X (Complete Part II for noncash contributions.)			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
4	Name, audress, and Zir + +	\$ 638,909.	Person X Payroll Noncash (Complete Part II for noncash contributions.)			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
5		\$\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
6		\$523,347.	Person X Payroll Noncash (Complete Part II for noncash contributions.)			

Schedule B (Form 990) (2021)

Name of organization Employer identification number GRAMEEN FOUNDATION USA

Part I	Contributors (see instructions). Use duplicate copies of Part I if addition	onal space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7		\$492,337	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
8		\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
9			Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
10			Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person Payroll Noncash (Complete Part II for noncash contributions.)

73-1502797

Schedule B (Form 990) (2021) Page **3**

Name of organization

Employer identification number

GRAMEEN FOUNDATION USA

73-1502797

Part II	Noncash Property (see instructions). Use duplicate copies of Part II if a	dditional space is needed.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
	SHARES OF STOCK: 2,531 BCAAX, 2,681 DBLTX, 527 EAASX, 419		
3	EGIFX, 1,329 JOHIX AND 1,966 JVLCX		
		\$344,178.	12/09/21
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
2	SHARSE OF STOCK: 636 ODMAX, 4,808 PIMCO & 1,111 VMBS		
3		\$344,177.	12/09/21
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
	<u> </u>	\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
	·	\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
	-		
		\$	

Page 4

Name of organization **Employer identification number** GRAMEEN FOUNDATION USA 73-1502797 Part III 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.) Use duplicate copies of Part III if additional space is needed. (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 (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 (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 (a) No. from (b) Purpose of gift (d) Description of how gift is held (c) Use of gift Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

SCHEDULE C (Form 990)

Political Campaign and Lobbying Activities

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

For Organizations Exempt From Income Tax Under section 501(c) and section 527 Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ. ► Go to www.irs.gov/Form990 for instructions and the latest information.

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

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

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

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

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

•	Section 501(c)(4), (5), or (6) organiza	tions: Complete Part III.			
Nan	ne of organization			Emp	loyer identification number
	GRAMEEN	FOUNDATION USA			73-1502797
Pa	art I-A Complete if the org	janization is exempt und	er section 501(c)	or is a section 527 or	ganization.
2	Provide a description of the organiz Political campaign activity expendit Volunteer hours for political campa	tures		>	S
Pa	art I-B Complete if the org	janization is exempt und	er section 501(c)(3).	
1	Enter the amount of any excise tax				<u> </u>
	Enter the amount of any excise tax				
	If the organization incurred a section				
48	a Was a correction made?				Yes No
<u>k</u>	f "Yes," describe in Part IV.				
_	·	janization is exempt und			e)(3)
	Enter the amount directly expended				S
2	Enter the amount of the filing organ		•		
_	exempt function activities				S
3	Total exempt function expenditures		,		
4	line 17b Did the filing organization file Form				Yes No
4 5	Enter the names, addresses and en				
٥	made payments. For each organiza	• • •	•	•	• •
	contributions received that were pr				·
	political action committee (PAC). If	additional space is needed, prov	vide information in Part	IV.	
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0

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

Schedule C (Form 990) 2021

LHA

132041 11-03-21

Ochcadic O (1 0111 330) 202 1	GIVENITE IN 1 CO.	MDAITON ODA		/3 1	JUZIJI Tagoz
Part II-A Complete if the org section 501(h)).	anization is exen	npt under section	1 501(c)(3) and file	ed Form 5768 (ele	ction under
	ation belongs to an affil		Part IV each affiliated	group member's name	e, address, EIN,
	, ,	nd "limited control" pro	visions apply.		
Limi	ts on Lobbying Exper			(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditures to influ	uence public opinion (d	grassroots lobbying)		0.	
b Total lobbying expenditures to influ				0.	
c Total lobbying expenditures (add li	-			0.	
d Other exempt purpose expenditure				10,544,828.	
e Total exempt purpose expenditure				10,544,828.	
f Lobbying nontaxable amount. Enter				677,241.	
If the amount on line 1e, column (a) o		bying nontaxable am		·	
Not over \$500,000	• •	the amount on line 1e.			
Over \$500,000 but not over \$1,000		00 plus 15% of the exce	ess over \$500.000.		
Over \$1,000,000 but not over \$1,5		00 plus 10% of the exce			
Over \$1,500,000 but not over \$17,000,000 \$225,000 plus 5% of the excess over \$1,500,000.					
Over \$17,000,000					
	\$1,000,0				
g Grassroots nontaxable amount (en	169,310.				
h Subtract line 1g from line 1a. If zer	, ,,,			0.	
i Subtract line 1f from line 1c. If zero	a ar loop ontor O			0.	
j If there is an amount other than ze					
reporting section 4911 tax for this					Yes No
· •		eraging Period Under	Section 501(h)		
(Some organizations t		• •	•	of the five columns be	low.
	See the separa	ate instructions for lin	nes 2a through 2f.)		
	Lobbying Exper	nditures During 4-Yea	r Averaging Period		
Calendar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) Total
2a Lobbying nontaxable amount	628,943.	565,492.	633,291.	677,241.	2,504,967
b Lobbying ceiling amount (150% of line 2a, column(e))					3,757,451
c Total lobbying expenditures					
d Grassroots nontaxable amount	157,236.	141,373.	158,323.	169,310.	626,242
e Grassroots ceiling amount (150% of line 2d, column (e))					939,363
	l	I	I		

Schedule C (Form 990) 2021

Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

	each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description	(a)		(b)	
	ne lobbying activity.	Yes	No	Amo	ount
1	During the year, did the filing organization attempt to influence foreign, national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:				
k	Volunteers? Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?				
	Media advertisements?				
	d Mailings to members, legislators, or the public?				
	Publications, or published or broadcast statements?				
1	f Grants to other organizations for lobbying purposes?				
•	g Direct contact with legislators, their staffs, government officials, or a legislative body?				
r	h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
į	i Other activities?				
	j Total. Add lines 1c through 1i				
	a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?				
	b If "Yes," enter the amount of any tax incurred under section 4912				
	c If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
	d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? Irt III-A Complete if the organization is exempt under section 501(c)(4), section	501(c)(5)	or sec	tion	
_	501(c)(6).				
				Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?		1		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?		2		
3	Did the organization agree to carry over lobbying and political campaign activity expenditures from the irt III-B Complete if the organization is exempt under section 501(c)(4), section		3		
	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "answered "Yes."		1	II-A, line	3, is
1 2	Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenditures)		1		
	expenses for which the section 527(f) tax was paid).				
á	a Current year		2a		
	Carryover from last year		2b		
	c Total		2c		
	4		3		
3	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exce	SS			
3 4					
3 4	does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and pol				
3 4			4		
3 4 5	does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and polynomials and polynomials are strong and the property of the polynomials and polynomials are strong and the polynomials are strong and the polynomials are strong and the polynomials are strong and polynomials are strong are strong and polynomials are strong and polynomials are strong and polynomials are strong are strong and polynomials are strong and polynomials are strong and polynomials are strong are strong and polynomials are strong and polynomials are strong and polynomials are strong and are strong are strong are strong and are s		4 5		
	does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and polexpenditure next year?				
Pa Prov	does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and polexpenditure next year? Taxable amount of lobbying and political expenditures. See instructions	itical	5	nd 2 (See	
Pa Prov	does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and polexpenditure next year? Taxable amount of lobbying and political expenditures. See instructions Int IV Supplemental Information vide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group I	itical	5	nd 2 (See	
Pa Prov	does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and polexpenditure next year? Taxable amount of lobbying and political expenditures. See instructions Int IV Supplemental Information vide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group I	itical	5	nd 2 (See	
Pa Prov	does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and polexpenditure next year? Taxable amount of lobbying and political expenditures. See instructions Int IV Supplemental Information vide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group I	itical	5	nd 2 (See	
Pa Prov	does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and polexpenditure next year? Taxable amount of lobbying and political expenditures. See instructions Int IV Supplemental Information vide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group I	itical	5	nd 2 (See	
Pa Prov	does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and polexpenditure next year? Taxable amount of lobbying and political expenditures. See instructions Int IV Supplemental Information vide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group I	itical	5	nd 2 (See	

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

Supplemental Financial Statements

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

► Attach to Form 990.

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

OMB No. 1545-0047

Inspection

GRAMEEN FOUNDATION USA

Employer identification number 73-1502797

Pai	TI Organizations Maintaining Donor Advised organization answered "Yes" on Form 990, Part IV, line		unds or Ad	counts. Complete if the
	Organization driented (150 or) or other observations	(a) Donor advised funds		(b) Funds and other accounts
1	Total number at end of year			
2	Aggregate value of contributions to (during year)			
3	Aggregate value of grants from (during year)			
4	Aggregate value at end of year			
5	Did the organization inform all donors and donor advisors in w	riting that the assets held in dono	or advised fund	ds
	are the organization's property, subject to the organization's e	exclusive legal control?		Yes No
6	Did the organization inform all grantees, donors, and donor ac			
	for charitable purposes and not for the benefit of the donor or	donor advisor, or for any other pu	ırpose conferr	ing
Pai	t II Conservation Easements. Complete if the org	anization answered "Yes" on Forn	n 990, Part IV,	line 7.
1	Purpose(s) of conservation easements held by the organizatio	n (check all that apply).		
	Preservation of land for public use (for example, recreat	ion or education) Preserva	ation of a histo	orically important land area
	Protection of natural habitat	Preserva	ation of a certi	fied historic structure
	Preservation of open space			
2	Complete lines 2a through 2d if the organization held a qualifie	ed conservation contribution in the	e form of a co	
	day of the tax year.			Held at the End of the Tax Year
а	Total number of conservation easements			2a
				2b
	Number of conservation easements on a certified historic stru			2c
d	Number of conservation easements included in (c) acquired at	•		
_	listed in the National Register			2d
3	Number of conservation easements modified, transferred, rele	eased, extinguished, or terminated	by the organi	zation during the tax
_	year >			
4	Number of states where property subject to conservation ease	· · · · · · · · · · · · · · · · · · ·		
5	Does the organization have a written policy regarding the periodic state of the periodic		· ·	Yes No
6	violations, and enforcement of the conservation easements it			
6	Staff and volunteer hours devoted to monitoring, inspecting, h	landling of violations, and emorcin	ig conservatio	in easements during the year
7	Amount of expenses incurred in monitoring, inspecting, handl	ing of violations, and enforcing co	neonyation oa	coments during the year
′	\$\\$\$ \$\$ \$\$	ing of violations, and emorcing co	i isei valioi i ea	sements during the year
8	Does each conservation easement reported on line 2(d) above	satisfy the requirements of section	on 170(h)(4)(R)	(i)
Ü	and section 170(h)(4)(B)(ii)?	•		
9	In Part XIII, describe how the organization reports conservatio			
•	balance sheet, and include, if applicable, the text of the footnot		•	
	organization's accounting for conservation easements.	oto to the organization o imanolar t		
Pai	t III Organizations Maintaining Collections of	Art, Historical Treasures,	or Other S	imilar Assets.
	Complete if the organization answered "Yes" on Form	990, Part IV, line 8.		
1a	If the organization elected, as permitted under FASB ASC 958	3, not to report in its revenue state	ment and bala	ance sheet works
	of art, historical treasures, or other similar assets held for publ	lic exhibition, education, or researc	ch in furtherar	nce of public
	service, provide in Part XIII the text of the footnote to its finance	cial statements that describes the	se items.	·
b	If the organization elected, as permitted under FASB ASC 958	3, to report in its revenue statemer	nt and balance	sheet works of
	art, historical treasures, or other similar assets held for public	exhibition, education, or research	in furtherance	e of public service,
	provide the following amounts relating to these items:			
	(i) Revenue included on Form 990, Part VIII, line 1			> \$
				L 4
2	If the organization received or held works of art, historical trea	sures, or other similar assets for fi	inancial gain, _l	
	the following amounts required to be reported under FASB AS	SC 958 relating to these items:		
а	Revenue included on Form 990, Part VIII, line 1			> \$
	Assets included in Form 990, Part X			
	For Paperwork Reduction Act Notice, see the Instructions			Schedule D (Form 990) 2021

132051 10-28-21

Par	t III Organizations Maintaining C	ollections of Ar	t, Historical Tr	easures, or	Other S	imilar Ass	sets _{(continue}	ed)
3	Using the organization's acquisition, accession	on, and other record	s, check any of the	following that	make signi	ficant use of	its	
	collection items (check all that apply):							
а	Public exhibition	d	I Loan or ex	change program	m			
b	Scholarly research	е	Other					
С	Preservation for future generations							
4	Provide a description of the organization's co	llections and explain	n how they further	the organizatior	n's exempt	purpose in I	Part XIII.	
5	During the year, did the organization solicit or	r receive donations o	of art, historical trea	asures, or other	similar ass	sets		
	to be sold to raise funds rather than to be ma	aintained as part of the	he organization's c	ollection?			Yes	☐ No
Par	t IV Escrow and Custodial Arrang						IV, line 9, or	
	reported an amount on Form 990, Par		-					
1a	Is the organization an agent, trustee, custodia	an or other intermed	iary for contribution	ns or other asse	ets not incl	uded		
	on Form 990, Part X?						Yes	☐ No
b	If "Yes," explain the arrangement in Part XIII							
	· · ·	•	-				Amount	
С	Beginning balance					1c		
	Additions during the year					1d		
	Distributions during the year					1e		
	Ending balance					1f		
	Did the organization include an amount on Fo						Yes	No
	If "Yes," explain the arrangement in Part XIII.				•			
Par								
	·	(a) Current year	(b) Prior year	(c) Two years		Three years b	oack (e) Four ye	ears back
1a	Beginning of year balance	, ,	. , ,		,,,			
h	Contributions							
c	Net investment earnings, gains, and losses							
	Grants or scholarships							
	Other expenditures for facilities							-
f	Administrative expenses							
g 2	Provide the estimated percentage of the curr	ont year and halance	l (line 1a column (a)) hold as:				
	Board designated or quasi-endowment	•	e (iiile Tg, coluitiit (a)) Helu as.				
	Permanent endowment	%						
b	· · · · · · · · · · · · · · · · · · ·	⁷⁰						
C	The percentages on lines 2a, 2b, and 2c shou	, -						
2-	Are there endowment funds not in the posses	•	ation that are hold a	and administers	d for the e	vacnization		
Sa		SSION OF THE Organiza	ation that are neid a	and administere	ed for the o	rgariizatiori	[v	es No
	by:							- 110
	(i) Unrelated organizations							+
	(ii) Related organizations						3a(ii)	+
	If "Yes" on line 3a(ii), are the related organiza			·			3b	
4 Par	Describe in Part XIII the intended uses of the tVI Land, Buildings, and Equipm		wment lunus.					
· ui	Complete if the organization answered) Part IV line 11a	See Form 990	Part X line	10		
	<u>-</u>			T T			(-I) D I	
	Description of property	(a) Cost or o		st or other		ımulated ciation	(d) Book \	/alue
		basis (investr	nenty basis	s (other)	uepre	CIALIUII		
	Land						-	
	Buildings						 	
	Leasehold improvements						 	
	Equipment		1	47 500	1 4	7 500	 	
	Other		•	47,599.	<u> 14</u>	<u>7,599.</u>	 	0.
Lota	. Add lines 1a through 1e. (Column (d) must e	aual Form 000 Part	Y column (P) line	1001			1	U.

Schedule D (Form 990) 2021

Part VII Investments - Other Securities. Complete if the organization answered "Yes" of the organization and the organization answered "Yes" of the organization answered "Yes" of the organization and the organiz	on Form 990. Part IV. line 1	1b. See Form 990. Part X. line 12.	, 1001/37 rage 0
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or en	d-of-vear market value
(1) Financial derivatives	(2)	(-,	<u> </u>
(2) Closely held equity interests			
(3) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) Part VIII Investments - Program Related.			
Complete if the organization answered "Yes" o			
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or en	
(1) GRAMEEN CAPITAL INDIA LTD	32,122.	END-OF-YEAR MARKET	VALUE
(2) GRAMEEN FOUNDATION INDIA			
(3) PRIVATE LIMITED	552,967.	COST	
(4) RADAUR HOLDINGS	83,719.	END-OF-YEAR MARKET	VALUE
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ▶	668,808.		
Part IX Other Assets.			
Complete if the organization answered "Yes" of	on Form 990, Part IV, line 1	1d. See Form 990, Part X, line 15.	
(a) [Description		(b) Book value
<u>(1)</u>			
(2)			
(4)			
(7)			
(8)			
(9)	45)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line Part X Other Liabilities.	15.)		<u>'</u>
Complete if the organization answered "Yes" of	on Form 900 Part IV line 1	1e or 11f See Form 990 Part Y line 25	<u> </u>
(a) Description of liability	on on section of the	Te of TH. See Form 930, Fart X, line 25	(b) Book value
<u> </u>			(b) book value
(1) Federal income taxes			2 705 152
(2) REFUNDABLE ADVANCE			3,785,153.
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line	25.)	>	3,785,153.

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) 2021

Par	t XI Reconciliation of Revenue per Audited Financial Statem	ents Wit	h Revenue per Re	turn.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12	2a.			
1	Total revenue, gains, and other support per audited financial statements			1	11,532,855.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
а	Net unrealized gains (losses) on investments	2a	-158,266. 301,638.		
b	Donated services and use of facilities		301,638.		
С	Recoveries of prior year grants				
d	Other (Describe in Part XIII.)		1,362,586.		
е	Add lines 2a through 2d			2e	1,505,958.
3	Subtract line 2e from line 1			3	1,505,958. 10,026,897.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	600.		
	Other (Describe in Part XIII.)		544,000.		
	Add lines 4a and 4b			4c	544,600.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			5	544,600. 10,571,497.
	t XII Reconciliation of Expenses per Audited Financial Stater	nents Wi	th Expenses per F	Retur	n.
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12	2a.			
1				1	11,642,230.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
_	Donated services and use of facilities	2a	301,638.		
b		1 1	302,0001	-	
0	Prior year adjustments Other losses	1 _ 1			
4			2,517,661.	-	
d	Other (Describe in Part XIII.) Add lines 2a through 2d			00	2 819 299
	•			2e 3	2,819,299. 8,822,931.
3	Subtract line 2e from line 1			3	0,022,931.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	1.1	600		
	Investment expenses not included on Form 990, Part VIII, line 7b		600. 1,721,297.		
	Other (Describe in Part XIII.)	4b	1,/21,29/.		1 701 007
	Add lines 4a and 4b			4c	1,721,897.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)			5	10,544,828.
	t XIII Supplemental Information.				
	de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Pa			; Part I	X, line 2; Part XI,
lines	2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any a	dditional info	ormation.		
PAF	T X, LINE 2:				
50	MILE VEND ENDED TIME 20 2022 CONNEED III	A DOO	THEN THE	~~ > T	GTDED 3 #1031
FOR THE YEAR ENDED JUNE 30, 2022, GRAMEEN HAS DOCUMENTED ITS CONSIDERATION					
OF FIGH AGG TAG AG THOUGH HINES HAVE PROVIDED CONTROL TO THE CONTR					
OF	FASB ASC 740-10, INCOME TAXES, THAT PROVE	LDES G	UIDANCE FOR	REP	ORTING
TTNTC	THE PROPERTY OF THE PROPERTY O	יום חוו	AM NO MAMEDI	7 T	IINGEDEN TN
OMC	ERTAINTY IN INCOME TAXES AND HAS DETERMIN	NED TH	AT NO MATERI	AL	UNCERTAIN
	, DOGETHIONS OUR THE HOD HIMMED DESCRIPTION	D			-
TAX	POSITIONS QUALIFY FOR EITHER RECOGNITION	N OR D	ISCLOSURE IN	TH	<u>E</u>
001	ACOLIDADED DINANCIAL COMMUNICA				
COL	SOLIDATED FINANCIAL STATEMENTS.				
	OD OMUTE 15 THE CONTROL				
PART XI, LINE 2D - OTHER ADJUSTMENTS:					
αD.	WHEN TOINIDATION THEFT PRIME LINITED DE				401 744
GRAMEEN FOUNDATION INDIA PRIVATE LIMITED REVENUE INCLUDED 491,744.					
THE DEVICE OF THE CONTROL TRANSPORT OF THE CONTROL					
IN REVENUE ON THE CONSOLIDATED FINANCIAL STATEMENTS AND EXCLUDED					
TROM CRANTERY TOURISHESON HEAD TORN 000					
FRO	M GRAMEEN FOUNDATION USA FORM 990.				
					202 555
FRE	EDOM FROM HUNGER REVENUE INCLUDED IN REVI	inue o			389,767.
132054	10-28-21			Sche	dule D (Form 990) 2021

Schedule D (Form 990) 2021 GRAMEEN FOUNDATION USA Part XIII Supplemental Information (continued)	73-1502797 Page 5
THE CONSOLIDATED FINANCIAL STATEMENTS AND EXCLUDED	
FROM GRAMEEN FOUNDATION USA FORM 990.	
GRAMEEN FOUNDATION FOR SOCIAL IMPACT REVENUE INCLUDED	278,402.
IN REVENUE ON THE CONSOLIDATED FINANCIAL STATEMENTS	
AND EXCLUDED FROM GRAMEEN FOUNDATION USA FORM 990.	
GRAMEEN IMPACT VENTURES PRIVATE LIMITED REVENUE INCLUDED	202,673.
IN REVENUE ON THE CONSOLIDATED FINANCIAL STATEMENTS AND EXCLU	UDED
FROM GRAMEEN FOUNDATION USA FORM 990.	
TOTAL TO SCHEDULE D, PART XI, LINE 2D	1,362,586.
PART XI, LINE 4B - OTHER ADJUSTMENTS:	
GRANT RECEIVED FROM SUBSIDIARY ELIMINATED IN CONSOLIDATED	544,000.
FINANCIAL STATEMENTS AND INCLUDED IN GRAMEEN FOUNDATION USA	FORM 990.
PART XII, LINE 2D - OTHER ADJUSTMENTS:	
GRAMEEN FOUNDATION INDIA PRIVATE LIMITED EXPENSES INCLUDED	1,806,527.
IN EXPENSES ON THE CONSOLIDATED FINANCIAL STATEMENTS AND EXC	LUDED
FROM GRAMEEN FOUNDATION USA FORM 990.	
FREEDOM FROM HUNGER EXPENSES INCLUDED IN EXPENSES ON	16,310.
THE CONSOLIDATED FINANCIAL STATEMENTS AND EXCLUDED	
FROM GRAMEEN FOUNDATION USA FORM 990.	
GRAMEEN FOUNDATION FOR SOCIAL IMPACT EXPENSES INCLUDED	336,937.
IN EXPENSES ON THE CONSOLIDATED FINANCIAL STATEMENTS	
AND EXCLUDED FROM GRAMEEN FOUNDATION USA FORM 990.	
GRAMEEN IMPACT VENTURES PRIVATE LIMITED REVENUE INCLUDED	357,887.
IN REVENUE ON THE CONSOLIDATED FINANCIAL STATEMENTS AND EXCLU	UDED
FROM GRAMEEN FOUNDATION USA FORM 990.	
TOTAL TO SCHEDULE D, PART XII, LINE 2D	2,517,661.
100055 10 00 01	Schedule D (Form 990) 2021

SCHEDULE F (Form 990)

Statement of Activities Outside the United States

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

➤ Attach to Form 990.

Open to Public Inspection

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

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

Employer identification number

	N FOUNDATION USA		73-1502797
Part I	General Information on Activities Outside the United States.	Complete if the organ	nization answered "Yes" on

73-1502797

Form 990, Part I	V, line 14b.						
1 For grantmakers. Does							
the grantees' eligibility f	the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? X Yes No						
2 For grantmakers. Desc	cribe in Part V the	e organization's	procedures for monitoring the use of its	s grants and other assistance out	side the		
United States.							
3 Activities per Region. (T	he following Part		an be duplicated if additional space is n				
(a) Region	(b) Number of		(d) Activities conducted in the region	(e) If activity listed in (d)	(f) Total		
	offices	employees, agents, and	(by type) (such as, fundraising, pro-	is a program service,	expenditures for and		
	in the region	independent contractors	gram services, investments, grants to recipients located in the region)	describe specific type of service(s) in the region	investments		
		in the region	recipients located in the region)	or service(s) in the region	in the region		
				INFORMATION, CAPITAL,			
				AND BUSINESS			
				OPPORTUNITIES FOR THE			
SUB-SAHARAN AFRICA	3	12		POOR	836,659.		
				INFORMATION, CAPITAL,			
				AND BUSINESS			
EAST ASIA AND THE				OPPORTUNITIES FOR THE			
PACIFIC	0	0		POOR	3,668,331.		
				INFORMATION, CAPITAL,			
				AND BUSINESS			
				OPPORTUNITIES FOR THE			
SOUTH AMERICA	1	23		POOR	791,779.		
				INFORMATION, CAPITAL,			
				AND BUSINESS			
		_		OPPORTUNITIES FOR THE			
SOUTH ASIA	0	0	PROGRAM SERVICES	POOR	209,254.		
COUNTY ACTA			THE GENERAL THE PEGICAL		115 041		
SOUTH ASIA	0	0	INVESTMENTS IN REGION		115,841.		
			GRANTS TO RECIPIENTS				
SOUTH ASIA	0	0	LOCATED IN REGION		11 750		
500IR ASIA		0	LOCATED IN REGION		41,759.		
EAST ASIA AND THE			GRANTS TO RECIPIENTS				
PACIFIC	0	0	LOCATED IN REGION		61,805.		
			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		12,000.		
			GRANTS TO RECIPIENTS				
SOUTH AMERICA	0	0	LOCATED IN REGION		13,715.		
3 a Subtotal	4	35			5,739,143.		
b Total from continuation							
sheets to Part I	0	0			237,518.		
c Totals (add lines 3a							
and 3b)	4	35			5,976,661.		
LHA For Paperwork Reduct	tion Act Notice,	see the Instruc	tions for Form 990.	Schedule F	(Form 990) 2021		

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

Part I Continuation	n of Activities	s per Region	• (Schedule F (Form 990), Part I, line 3)	
(a) Region	(b) Number of offices in the region		(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
SUB-SAHARAN AFRICA	0		GRANTS TO RECIPIENTS LOCATED IN REGION		237,518.
BUB-SAHARAN AFATCA	0	U	BOCKIED IN REGION		237,310.
Totals					237,518.

Part II

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

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FM\ appraisal, other)
			WOMEN'S ECONOMIC					
		SOUTH AMERICA	EMPOWERMENT	8,136.		0.		
			WOMEN'S ECONOMIC					
			EMPOWERMENT	5,579.		0.		
				,,,,,,,				
		EAST ASIA AND THE	WOMEN'S ECONOMIC					
		PACIFIC	EMPOWERMENT	26,694.		0.		
		EAST ASIA AND THE	WOMEN'S ECONOMIC					
			EMPOWERMENT	29,111.		0.		
		11101110		25,111.		3.		
		EAST ASIA AND THE	DIGITAL FINANCIAL					
		PACIFIC	SERVICES	6,000.		0.		
		SUB-SAHARAN	DIGITAL FINANCIAL					
		AFRICA	SERVICES	11,520.		0.		
				,				
			DIGITAL FINANCIAL					
		AFRICA	SERVICES	148,369.		0.		
		SUB-SAHARAN	BUILDING FEMALE AGENT					
			NETWORKS	15,946.		0.		

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

3 Enter total number of other organizations or entities

<u>9</u> ▶ 5

Schedule F (Form 990) 2021

Part II Continuation o	f Grants and Other	Assistance to Organiza	tions or Entities Outside the l	United States.	(Schedule F (Form 9	90), Part II, line	1)	
1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN	BUILDING FEMALE AGENT					
		AFRICA	NETWORKS	12,020.		0.		
		SUB-SAHARAN	BUILDING FEMALE AGENT					
		AFRICA	NETWORKS	17,165.		0.		
			WOMEN'S ECONOMIC					
		AFRICA	EMPOWERMENT	5,062.		0.		
		I .	WOMEN'S ECONOMIC					
		SOUTH ASIA	EMPOWERMENT	41,759.		0.		
			WOMEN'S ECONOMIC	T 106				
		AFRICA	EMPOWERMENT	7,186.		0.		
			FINANCIAL SERVICES PRODUCT INNOVATION	9,216.		0.		
				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				

Part III				ites. Complete i	if the organization answered "Yes"	on Form 990, Part	IV, line 16.	
Part III can be duplicated if ad		(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of noncash assistance	(g) Description of noncash assistance	(h) Method of valuation (book, FMV, appraisal, other)

Schedule F (Form 990) 2021 (Part IV Foreign Forms

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

Schedule F (Form 990) 2021

Part V | Supplemental Information

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

PART I, LINE 2:
EACH GRANT AGREEMENT CONTAINS MULTIPLE COVENANTS REGARDING HOW THE GRANT
IS TO BE USED - IN ACCORDANCE WITH THE APPROVED BUDGET, NOT TO BENEFIT
ANY PRIVATE INDIVIDUAL, FOR NO NON-CHARITABLE ACTIVITIES, IN COMPLIANCE
WITH ALL LOCAL LAWS, IN COMPLIANCE WITH THE FOREIGN CORRUPT PRACTICES
ACT, ETC. IN ADDITION, EACH GRANTEE IS REQUIRED TO SUBMIT A DETAILED
OPERATING REPORT TO GRAMEEN FOUNDATION USA WITHIN 10 DAYS AFTER THE END
OF THE GRANT TERM. GRANTEES ARE REQUIRED TO MAINTAIN A FULL AND ACCURATE
RECORD OF THE RECEIPTS AND DISBURSEMENTS UNDER THE GRANT AND RETAIN SUCH
BOOKS AND RECORDS FOR AT LEAST FOUR YEARS AFTER COMPLETION OF THE USE OF
THE GRANT. ALL GRANTEES ARE REQUIRED TO ALLOW FIELD VISITS OR AUDITS BY
GRAMEEN FOUNDATION, WHICH WE CONDUCT RANDOMLY. LASTLY, MANY GRANT
RECIPIENTS ARE REQUIRED TO SUBMIT QUARTERLY FINANCIAL AND OPERATIONAL
PERFORMANCE REPORTS.

SCHEDULE I (Form 990)

Department of the Treasury Internal Revenue Service

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

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

➤ Attach to Form 990.

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

Open to Public

OMB No. 1545-0047

Inspection **Employer identification number** Name of the organization 73-1502797 GRAMEEN FOUNDATION USA Part I **General Information on Grants and Assistance** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? X Yes Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990. Part IV. line 21. for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. (f) Method of 1 (a) Name and address of organization (b) EIN (c) IRC section (d) Amount of (e) Amount of (g) Description of (h) Purpose of grant valuation (book, or government (if applicable) cash grant noncash noncash assistance or assistance FMV, appraisal, assistance other) AMERICAN BAR ASSOCIATION 321 N CLARK STREET PROGRAM SUPPORT-RICHES 36-0723150 501(C)(6) CHICAGO, IL 60654 0 PROGRAM 62,970. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table Enter total number of other organizations listed in the line 1 table

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

Schedule I (Form 990) 2021

		Ŭ	cash assistance	(book, FMV, appraisal, other)						
Part IV Supplemental Information. Provide the information	equired in Part I, lin	ie 2; Part III, column	n (b); and any other ac	ditional information.						
PART I, LINE 2:										
EACH GRANT AGREEMENT CONTAINS MUL	TIPLE COVE	NANTS REGA	ARDING HOW	THE GRANT IS						
TO BE USED - IN ACCORDANCE WITH T	HE APPROVE	D BUDGET,	NOT TO BEN	EFIT ANY						
PRIVATE INDIVIDUAL, FOR NO NON-CH	ARITABLE A	CTIVITIES	, IN COMPLI	ANCE WITH						
ALL LOCAL LAWS, IN COMPLIANCE WIT	H THE FORE	IGN CORRUI	PT PRACTICE	S ACT, ETC.						
IN ADDITION, EACH GRANTEE IS REQU	IRED TO SU	JBMIT A DET	TAILED OPER	ATING REPORT						
TO GRAMEEN FOUNDATION USA WITHIN	10 DAYS AF	TER THE E	ND OF THE G	RANT TERM.						
GRANTEES ARE REQUIRED TO MAINTAIN	A FULL AN	ID ACCURATI	E RECORD OF	THE						
RECEIPTS AND DISBURSEMENTS UNDER										

RECORDS FOR AT LEAST FOUR YEARS AFTER COMPLETION OF THE USE OF THE GRANT. ALL GRANTEES ARE REQUIRED TO ALLOW FIELD VISITS OR AUDITS BY GRAMEEN FOUNDATION USA, WHICH WE CONDUCT RANDOMLY. LASTLY, MANY GRANT RECIPIENTS ARE REQUIRED TO SUBMIT QUARTERLY FINANCIAL AND OPERATIONAL PERFORMANCE REPORTS.
FOUNDATION USA, WHICH WE CONDUCT RANDOMLY. LASTLY, MANY GRANT RECIPIENTS ARE REQUIRED TO SUBMIT QUARTERLY FINANCIAL AND OPERATIONAL PERFORMANCE
ARE REQUIRED TO SUBMIT QUARTERLY FINANCIAL AND OPERATIONAL PERFORMANCE
REPORTS.

Schedule I (Form 990)

SCHEDULE J (Form 990)

Department of the Treasury

Compensation Information

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

2021

OMB No. 1545-0047

Open to Public Inspection

Internal Revenue Service Name of the organization

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

GRAMEEN FOUNDATION USA

Employer identification number 73-1502797

Pa	art I Questions Regarding Compensation						
			Yes	No			
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990,						
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.						
	First-class or charter travel Housing allowance or residence for personal use						
	Travel for companions Payments for business use of personal residence						
	Tax indemnification and gross-up payments Health or social club dues or initiation fees						
	Discretionary spending account Personal services (such as maid, chauffeur, chef)						
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or						
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b					
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors,						
	trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?	2					
3	Indicate which, if any, of the following the organization used to establish the compensation of the organization's						
	CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to						
	establish compensation of the CEO/Executive Director, but explain in Part III.						
	Compensation committee Written employment contract						
	Independent compensation consultant X Compensation survey or study						
	Form 990 of other organizations X Approval by the board or compensation committee						
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing						
4	organization or a related organization:						
a		4a		х			
a h							
c	Participate in or receive payment from a supplemental nonqualified retirement plan? Participate in or receive payment from an equity-based compensation arrangement?						
·	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.	4c		Х			
	The state of the s						
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.						
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation						
	contingent on the revenues of:						
а	The organization?	5a		X			
b	Any related organization?	5b		Х			
	If "Yes" on line 5a or 5b, describe in Part III.						
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation						
	contingent on the net earnings of:						
а	The organization?	6a		Х			
b	Any related organization?	6b		Х			
	If "Yes" on line 6a or 6b, describe in Part III.						
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments						
	not described on lines 5 and 6? If "Yes," describe in Part III	7		X			
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the			37			
	initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8		X			
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in						
	Regulations section 53.4958-6(c)?	9		<u> </u>			

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

Schedule J (Form 990) 2021

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

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

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

	(B) Breakdown of W	/-2 and/or 1099-MIS/ compensation	C and/or 1099-NEC	(C) Retirement and other deferred	(D) Nontaxable benefits	benefits (B)(i)-(D)		
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation			reported as deferred on prior Form 990
(1) STEVE HOLLINGWORTH	(i)	233,214.	0.	0.	7,119.	20,290.	260,623.	0.
PRESIDENT & CEO (THRU 3/22)	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) BRENT CHISM	(i)	180,089.	0.	0.	5,400.	1,259.	186,748.	0.
INTERIM CEO (BEG. 3/22)	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
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rovide the information, explanation, or descriptions required	I for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

SCHEDULE M (Form 990)

Noncash Contributions

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

Attach to Form 990.

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

Name of the organization GRAMEEN FOUNDATION USA Employer identification number 73-1502797

Par	τι	Types of Property								
			(a)	(b) Number of	(c) Noncash contri	hution	Ma	(d)	inina	
			Check if applicable	contributions or	amounts repor			thod of determ ch contribution		9
			аррпоавто	items contributed	Form 990, Part VI	II, line 1g	Horioda			
1	Art -	Works of art								
2	Art -	Historical treasures								
3	Art -	Fractional interests								
4	Boo	ks and publications								
5	Clot									
6	Cars	and other vehicles								
7	Boat	ts and planes								
8	Intel	lectual property								
9	Seci	urities - Publicly traded	X	36	735	<u>,604.</u>	FMV			
10	Seci	urities - Closely held stock								
11	Seci	urities - Partnership, LLC, or								
	trust	t interests								
12	Seci	urities - Miscellaneous								
13		lified conservation contribution -								
	Histo	oric structures								
14	Qua	lified conservation contribution - Other $_{\dots}$								
15	Real	estate - Residential								
16	Real	estate - Commercial								
17		estate - Other								
18		ectibles								
19		d inventory								
20		gs and medical supplies								
21		dermy								
22		orical artifacts								
23		ntific specimens								
24		neological artifacts								
25		er ▶ ()								
26	Othe	er > ()								
27	Othe	er ▶ ()								
28	Othe									
29	Num	nber of Forms 8283 received by the organization	ation during	the tax year for co	ontributions					
	for v	which the organization completed Form 828	3, Part V, D	onee Acknowledg	ement	29				
									Yes	No
30a	Duri	ng the year, did the organization receive by	contributio	n any property rep	orted in Part I, line	s 1 throug	h 28, that it			
		t hold for at least three years from the date								
		npt purposes for the entire holding period?						30	а	Х
b	If "Y	es," describe the arrangement in Part II.								
31		s the organization have a gift acceptance po	olicy that re	quires the review o	of any nonstandard	l contribut	ions?	31		Х
		s the organization hire or use third parties o								
		ributions?	•					32	a	Х
b		es," describe in Part II.								
33		e organization didn't report an amount in co	olumn (c) for	a type of property	for which column	(a) is ched	cked,			
		cribe in Part II.	• •	, , ,			•			
ЦΔ		or Panerwork Reduction Act Notice see t	he Instruct	ions for Form 990	1		9	chedule M (Eo	rm 000)	2021

132142 11-17-21 Schedule M (Form 990) 2021

SCHEDULE 0 (Form 990)

Supplemental Information to Form 990 or 990-EZ

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

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

Inspection

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Name of the organization

GRAMEEN FOUNDATION USA

Employer identification number 73-1502797

FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS:
NEIGHBORHOODS.
IN ESWATINI, WE LAUNCHED AN INNOVATION PRIZE FOR ORGANIZATIONS THAT
PROMOTE DIGITAL FINANCIAL LITERACY AMONG WOMEN. THE WINNERS, IMBITA AND
DIGIMAGE, WERE ABLE TO GROW THEIR PLATFORMS WITH THE PRIZE MONEY.
IMBITA CAN NOW OFFER DIGITAL PAYMENTS, EMERGENCY LOANS, AND SAVINGS
ACCOUNTS TO 37,000 CUSTOMERS, AND DIGIMAGE ONBOARDED AN ADDITIONAL 500
WOMEN TO THEIR EPAYNET PLATFORM.
THEY HAVE ALSO BEEN TRAINED ON GENDER-BASED VIOLENCE MITIGATION
RESOURCES, AND TOGETHER WE'RE ADDRESSING HARMFUL CULTURAL PRACTICES
THAT RESULT IN GENDER-BASED VIOLENCE.
FORM 990, PART III, LINE 4B, PROGRAM SERVICE ACCOMPLISHMENTS:
WITHOUT BORDERS PROGRAM, WE MOBILIZED THE TIME AND TALENT OF OUR
VOLUNTEERS TO CONTRIBUTE 894 HOURS, WORTH MORE THAN \$101,000, IN
IN-KIND SERVICES TO FARMING COOPERATIVES AND OTHER SMALL BUSINESSES.
FORM 990, PART III, LINE 4C, PROGRAM SERVICE ACCOMPLISHMENTS:
HEALTH, AND USE BIOFORTIFIED ZINC WHEAT SEEDS TO GROW A MORE NUTRITIOUS
AND DROUGHT-RESISTANT CROP.
IN INDIA, GRAMEEN STRENGTHENED 24 FARMER-PRODUCER ORGANIZATIONS TO
BETTER SUPPORT SMALLHOLDER FARMERS, USING DIGITAL TECHNOLOGY TO CONNECT
THEM TO EXTENSION SERVICES, MARKETS, AND FINANCIAL PRODUCTS. WE ALSO

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

Schedule O (Form 990) 2021

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Employer identification number Name of the organization 73-1502797 GRAMEEN FOUNDATION USA HELPED FPOS IMPROVE MEMBERSHIP AND LEADERSHIP BY WOMEN. ALL 24 OF THE FARMER-PRODUCER ORGANIZATIONS CAN NOW BOAST AT LEAST 40% WOMEN'S MEMBERSHIP AND, OVERALL, 2,200 WOMEN FARMERS WERE ADDED AS MEMBERS. FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES: PUBLIC EDUCATION: IN FY22, GRAMEEN FOUNDATION RAISED PUBLIC AWARENESS ABOUT SUCCESSFUL POVERTY EFFORTS THROUGH ITS 25TH ANNIVERSARY CELEBRATION, AS WELL AS THROUGH WEBINARS, BLOGS, SOCIAL MEDIA POSTS, AND PRINT AND EMAIL PUBLICATIONS. EXPENSES \$ 385,059. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0. REGIONAL PROGRAMS: GRAMEEN FOUNDATION USA (WITH FREEDOM FROM HUNGER AS A SUPPORTING ORGANIZATION) SERVES POOR COMMUNITIES IN ASIA, LATIN AMERICA, AND SUB-SAHARAN AFRICA. IN INDIA, WE WORK THROUGH OUR WHOLLY OWNED SUBSIDIARY, GRAMEEN FOUNDATION INDIA PRIVATE LIMITED. IN ADDITION, WE ARE PARTNERS IN A JOINT VENTURE, GRAMEEN CAPITAL INDIA. IN FY22, WE HAD ACTIVE PROJECTS IN EL SALVADOR, ESWATINI, GHANA, GUATEMALA, HONDURAS, INDIA, PHILIPPINES, SENEGAL, SRI LANKA, TIMOR LESTE, UGANDA, PALAU, NAURU, TUVALU, AND THE MARSHALL ISLANDS. EXPENSES \$ 326,592. INCLUDING GRANTS OF \$ 1,955. REVENUE \$ 0. FORM 990, PART VI, SECTION B, LINE 11B: THE FORM 990 AND OTHER NON-PROFIT TAX RETURNS ARE PREPARED BY THE TAX DEPARTMENT OF THE AUDIT FIRM PERFORMING THE ANNUAL AUDIT OF THE ORGANIZATION'S FINANCIAL STATEMENTS. DRAFTS OF THE RETURNS ARE PRESENTED TO

Schedule O (Form 990) 2021

THE AUDIT COMMITTEE AND PRESIDENT/CEO FOR THEIR REVIEW. ONCE ALL NECESSARY

CHANGES ARE MADE, THE FINAL RETURNS ARE PROVIDED ELECTRONICALLY TO ALL

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Name of the organization

GRAMEEN FOUNDATION USA

Employer identification number 73-1502797

BOARD MEMBERS FOR THEIR REVIEW AND COMMENTS BEFORE THE RETURNS ARE FILED.

FORM 990, PART VI, SECTION B, LINE 12C:

GRAMEEN FOUNDATION USA MAINTAINS A CONFLICT OF INTEREST POLICY FOR BOARD

MEMBERS, OFFICERS, EMPLOYEES, AND VOLUNTEERS. BOARD MEMBERS, OFFICERS, AND

STAFF WITH SIGNATURE AUTHORITY ARE REQUIRED TO COMPLETE AND SIGN A CONFLICT

OF INTEREST QUESTIONNAIRE ANNUALLY, HIGHLIGHTING ANY POTENTIAL CONFLICTS.

ADDITIONALLY, ALL BOARD AND STAFF ARE EXPECTED TO MAKE POTENTIAL CONFLICTS

KNOWN TO THE EXECUTIVE LEADERSHIP TEAM OR BOARD OF DIRECTORS. UNTIL

GRAMEEN FOUNDATION USA APPROVES ACTIONS TO MITIGATE OR OTHERWISE RESOLVE

THE CONFLICT, THE GRAMEEN FOUNDATION USA STAFF OR BOARD MEMBER MUST ABSTAIN

FROM PARTICIPATING IN ANY DISCUSSIONS, DELIBERATIONS, DECISIONS OR VOTING

RELATED TO THE CONFLICT OF INTEREST. DISREGARDING OR FAILING TO COMPLY

WITH THE CONFLICT OF INTEREST POLICY COULD LEAD TO DISCIPLINARY ACTION, UP

TO AND INCLUDING TERMINATION OF EMPLOYMENT.

FORM 990, PART VI, SECTION B, LINE 15:

THE GRAMEEN FOUNDATION USA BOARD OF DIRECTORS APPROVES THE SALARY OF THE

CEO ANNUALLY AND OF EACH OFFICER UPON HIRING OR PROMOTION. MANAGEMENT

PROVIDES THE BOARD WITH SALARY SURVEY INFORMATION RELATED TO COMPARABLE

POSITIONS TO DETERMINE WHETHER SALARIES ARE REASONABLE. DISCUSSIONS AND

DECISIONS ARE RECORDED IN THE CORPORATE MINUTES. IN SUBSEQUENT YEARS AFTER

INITIAL BOARD APPROVAL, COMPENSATION ADJUSTMENTS FOR OTHER OFFICERS ARE

DETERMINED BY THE CEO. THE LAST SALARY REVIEW WAS CONDUCTED IN FEBRUARY

2022.

FORM 990, PART VI, LINE 17, LIST OF STATES RECEIVING COPY OF FORM 990:

AL,AR,CA,FL,GA,HI,IL,KS,KY,MD,MA,MI,MN,MS,NH,NJ,NM,NY,NC,OR,PA,RI,SC,TN,UT

Schedule O (Form 990) 2021	Page :
Name of the organization GRAMEEN FOUNDATION USA	Employer identification number 73-1502797
VA,WV,WI	
FORM 990, PART VI, SECTION C, LINE 19:	
GRAMEEN FOUNDATION USA MAKES ITS AUDITED FINANCIA	LS, GOVERNING DOCUMENTS
AND CONFLICT OF INTEREST POLICY AVAILABLE TO THE	PUBLIC UPON REQUEST.
FORM 990, PART IX, LINE 11G, OTHER FEES:	
CONTRACT SERVICE:	
PROGRAM SERVICE EXPENSES	1,506,723.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	1,506,723.
CONSULTANTS:	
PROGRAM SERVICE EXPENSES	2,285,820.
MANAGEMENT AND GENERAL EXPENSES	445,166.
FUNDRAISING EXPENSES	13,676.
TOTAL EXPENSES	2,744,662.
RESEARCH SERVICES:	
PROGRAM SERVICE EXPENSES	15,623.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	15,623.
CONTRACTORS' EXPENSES:	
PROGRAM SERVICE EXPENSES	33,548.
MANAGEMENT AND GENERAL EXPENSES	5,645.
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Name of the organization GRAMEEN FOUNDATION USA	Employer identification number 73–1502797
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	39,193.
TRANSLATION FEES:	
PROGRAM SERVICE EXPENSES	49,561.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	49,561.
TOTAL OTHER FEES ON FORM 990, PART IX, LINE 11G, COL A	4,355,762.
FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:	
FY22 INCREASE IN EQUITY OF GRAMEEN FOUNDATION INDIA PRIVAT	r <u>e</u>
LIMITED	87,966.
FY22 GRAMEEN FOUNDATION INDIA PRIVATE LIMITED VALUATION OF	
PRI	10,147.
TOTAL TO FORM 990, PART XI, LINE 9	98,113.

SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships

Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

Attach to Form 990.

Department of the Treasury Internal Revenue Service Name of the organization

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization GRAMEEN FOUNDA	ATION USA		GRAMEEN FOUNDATION USA								
Part I Identification of Disregarded Entities. Complete	ete if the organization answered "Yes	on Form 990, Part IV, line 33.									
(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year asset	(f) is Direct controlling entity						
TAROWORKS, LLC - 47-3737302 1400 K STREET NW SUITE 1255 WASHINGTON, DC 20005	MOBILE PRODUCTS TO HELP	DELAWARE	972,611.	323 504	4. GRAMEEN FOUNDATION USA						
MADITINGTON, DC 20003	BOCIAL ENTERFRISES	DELAWARE	372,011.	323,304	SKAMBEN FOUNDATION USA						
Identification of Related Tay-Evempt Organiz											

organizations during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section	(f) Direct controlling entity		512(b)(13) rolled ity?
				501(c)(3))		Yes	No
FREEDOM FROM HUNGER - 95-1647835							
1400 K STREET NW SUITE 1255	SUPPORTING ORGANIZATION TO				GRAMEEN		
WASHINGTON, DC 20005	GRAMEEN FOUNDATION USA	CALIFORNIA	501(C)(3)	LINE 12A, I	FOUNDATION USA	Х	
GRAMEEN FOUNDATION FOR SOCIAL IMPACT	ACTIVITIES AND SERVICES						
E-86, LOWER GROUND FL, SUNCITY, SECTOR 54,	THAT IMPACT THE LIVES OF				GRAMEEN		
GURUGRAM, HARYANA, INDIA	THE POOR, ESPECIALLY WOMEN	INDIA	501(C)(3)		FOUNDATION INDIA	Х	

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

Schedule R (Form 990) 2021

Identification of Related Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a partnership during the tax year. Part III

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(I	h)	(i)	(j)	(k)
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign	Direct controlling entity	Predominant income (related, unrelated, excluded from tax under end-of-year assets) Predominant income (related, unrelated, income end-of-year assets) Dispropo end-of-year end-of-ye		Direct controlling entity Predominant income (related, unrelated, excluded from tax under sections 512-514) Share of total income end-of-year assets Share of end-of-year assets Disproportionate allocations? Yes No Total part of total end-of-year assets Very No Total part of total end-of-year assets Total part of tot	amount in bo		General managii partner	Percentage ownership	
		country)		sections 512-514)			Yes	No	K-1 (Form 1065)	Yes N	0

Identification of Related Organizations Taxable as a Corporation or Trust. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a corporation or trust during the tax year.

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)	Sec	i)
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign country)	Direct controlling entity	Type of entity (C corp, S corp, or trust)	Share of total income		Percentage ownership	512(t contr ent	b)(13) rolled tity?
		country)						Yes	No
GRAMEEN FOUNDATION INDIA PRIVATE LIMITED -	MICROFINANCE AND								İ
47-3737302, E-86, LOWER GROUND FL, SUNCITY,	TECHNOLOGY SERVICES		GRAMEEN						
SECTOR 54,, GURUGRAM, HARYANA, INDIA	TO BENEFIT THE POOR	INDIA	FOUNDATION USA	C CORP	2,275,007.	1,236,565.	100%	Х	
GRAMEEN IMPACT VENTURES PRIVATE LIMITED	SCALABLE INNOVATIVE		GRAMEEN						
E-86, LOWER GROUND FL, SUNCITY, SECTOR 54,	DIGITAL SOLUTIONS TO		FOUNDATION						
GURUGRAM, HARYANA, INDIA	BENEFIT LOW-INCOME	INDIA	INDIA PRIVATE	C CORP	374,300.	154,460.	100%	Х	

Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

Not	e: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.					Yes	No		
1	During the tax year, did the organization engage in any of the following transactions	with one or more re	lated organizations listed in Par	ts II-IV?					
а	Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity				1a		Х		
	Gift, grant, or capital contribution to related organization(s)				1b		X		
	Gift, grant, or capital contribution from related organization(s)				1c	Х			
	Loans or loan guarantees to or for related organization(s)				1d		X		
	Loans or loan guarantees by related organization(s)				1e		X		
f	Dividends from related organization(s)				1f		X		
g	Sale of assets to related organization(s)				1g		X		
h	Purchase of assets from related organization(s)	Purchase of assets from related organization(s)							
i	Sale of assets to related organization(s) Purchase of assets from related organization(s) Exchange of assets with related organization(s) Lease of facilities, equipment, or other assets to related organization(s) Lease of facilities, equipment, or other assets from related organization(s) Performance of services or membership or fundraising solicitations for related organization(s)								
j					1j		Х		
•									
k	Lease of facilities, equipment, or other assets from related organization(s)				1k		Х		
					11		Х		
	Performance of services or membership or fundraising solicitations by related organ				1m	Х			
	Sharing of facilities, equipment, mailing lists, or other assets with related organization	. ,			1n		Х		
					10		Х		
_									
р	Reimbursement paid to related organization(s) for expenses				1p		Х		
	Reimbursement paid by related organization(s) for expenses				1q		Х		
٩	The initial content paid by folded organization (c) for expenses								
r	Other transfer of cash or property to related organization(s)				1r		х		
	Other transfer of cash or property from related organization(s)				1s		Х		
	If the answer to any of the above is "Yes," see the instructions for information on wh								
	•	·	<u> </u>	•					
	(a) Name of related organization	(b) Transaction	(c) Amount involved	(d) Method of determining amount invo	olved				
	•	type (a-s)		Ç					
(a)]	REEDOM FROM HUNGER	В	544 000 FM	/ OF CONTRIBUTION					

Name of related organization

(a) Transaction type (a·s)

(b) Transaction type (a·s)

(c) Amount involved Method of determining amount involved

(1) FREEDOM FROM HUNGER

B 544,000. FMV OF CONTRIBUTION

(2) GRAMEEN FOUNDATION INDIA PRIVATE LIMITED M 1,494,701. COST PLUS ALLOCATED EXPENSES

(3) GRAMEEN FOUNDATION IMPACT VENTURES M 135,000. COST PLUS ALLOCATED EXPENSES

(4) GRAMEEN FOUNDATION FOR SOCIAL IMPACT M 91,721. COST PLUS ALLOCATED EXPENSES

(5) 91,721. COST PLUS ALLOCATED EXPENSES

Part VI Unrelated Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	Are all partners sec 501(c)(3) orgs.?	(g) Share of end-of-year assets	Disprotion allocat	por- ate ions?		General manage partner	(k) Al or Percentage ging ownership
	-									
										-
	_							Ochodolo		

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