

Form 990

Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

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

▶ Do not enter Social Security numbers on this form as it may be made public.

▶ Information about Form 990 and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2023

Open to Public
Inspection

A For the 2023 calendar year, or tax year beginning and ending

B Check if applicable:

<input type="checkbox"/>	Address change
<input type="checkbox"/>	Name change
<input type="checkbox"/>	Initial return
<input type="checkbox"/>	Terminated
<input type="checkbox"/>	Amended return
<input type="checkbox"/>	Application pending

C Name of organization

UNITED NATIONS FOUNDATION, INC.

Doing Business As

Number and street (or P.O. box if mail is not delivered to street address)

1750 PENNSYLVANIA AVENUE NW STE 300

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

WASHINGTON, DC 20006

F Name and address of principal officer:

ELIZABETH COUSENS

1750 PENNSYLVANIA AVENUE NW ST, WASHINGTON, DC 20006

D Employer identification number

58-2368165

E Telephone number

(202) 887-9040

G Gross receipts \$ 132,285,253.

H(a) Is this a group return for subordinates? ☐ Yes ☒ NoH(b) Are all subordinates included? ☐ Yes ☐ No

If "No," attach a list. (see instructions)

H(c) Group exemption number ▶

I Tax-exempt status: ☒ 501(c)(3) ☐ 501(c) () ◀ (insert no.) ☐ 4947(a)(1) or ☐ 527

J Website: ▶ WWW.UNFOUNDATION.ORG

K Form of organization: ☒ Corporation ☐ Trust ☐ Association ☐ Other ▶ L Year of formation: 1998 M State of legal domicile: NY

Part I Summary

Activities & Governance	1	Briefly describe the organization's mission or most significant activities: SEE SCHEDULE O		
	2	Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3	Number of voting members of the governing body (Part VI, line 1a)	3	18
	4	Number of independent voting members of the governing body (Part VI, line 1b)	4	17
	5	Total number of individuals employed in calendar year 2023 (Part V, line 2a)	5	391
	6	Total number of volunteers (estimate if necessary)	6	10
	7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	37,490.
	7b	Net unrelated business taxable income from Form 990-T, line 34	7b	24,181.
Revenue	8	Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
	9	Program service revenue (Part VIII, line 2g)	103,468,186.	107,442,405.
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	1,535,631.	4,100,315.
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	1,468,786.	1,797,733.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	676,315.	83,367.
	12		107,148,918.	113,423,820.
Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	48,272,150.	32,765,731.
	14	Benefits paid to or for members (Part IX, column (A), line 4)	NONE	NONE
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	37,024,214.	40,298,298.
	16a	Professional fundraising fees (Part IX, column (A), line 11e)	NONE	643,981.
	16b	Total fundraising expenses (Part IX, column (D), line 25) ▶ 8,081,026.		
	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	53,753,718.	53,757,628.
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	139,050,082.	127,465,638.
	19	Revenue less expenses. Subtract line 18 from line 12	-31,901,164.	-14,041,818.
Net Assets or Fund Balances	20	Total assets (Part X, line 16)	Beginning of Current Year	End of Year
	21	Total liabilities (Part X, line 26)	315,410,137.	329,134,648.
	22	Net assets or fund balances. Subtract line 21 from line 20	48,020,683.	53,232,026.
22		267,389,454.	275,902,622.	

Part II Signature Block

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

Sign Here	▶ Signature of officer	11/15/2024			
	ELIZABETH COUSENS Type or print name and title	PRESIDENT & CEO			
Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed	PTIN
	TRAVIS L PATTON		11/14/2024		P00369623
	Firm's name ▶ PWC US TAX LLP			Firm's EIN ▶ 92-0460586	
	Firm's address ▶ 655 NEW YORK AVE STE 1100 WASHINGTON, DC 20001			Phone no. 202-414-1000	

May the IRS discuss this return with the preparer shown above? (see instructions) ☒ Yes ☐ No

For Paperwork Reduction Act Notice, see the separate instructions.

Form 990 (2023)

Part III Statement of Program Service AccomplishmentsCheck if Schedule O contains a response or note to any line in this Part III ☐ Yes ☒ No**1** Briefly describe the organization's mission:

UNF SUPPORTS THE UN AND UN CAUSES AND ACTIVITIES. WE ARE AN ADVOCATE
FOR THE UN AND A PLATFORM FOR GENERATING IDEAS, RESOURCES, AND
PARTNERSHIPS TO HELP THE UN SOLVE GLOBAL PROBLEMS AND UNDERTAKE
LIFESAVING ACTIVITIES.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? ☐ Yes ☒ No
If "Yes," describe these new services on Schedule O.**3** Did the organization cease conducting, or make significant changes in how it conducts, any program services? ☐ Yes ☒ No
If "Yes," describe these changes on Schedule O.**4** Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.**4a** (Code:) (Expenses \$ 25,905,433. including grants of \$ 8,343,652.) (Revenue \$ 474,245.)

GLOBAL HEALTH: THE UNITED NATIONS FOUNDATION'S GLOBAL HEALTH
PROGRAM SUPPORTS THE UNITED NATIONS AND UN AGENCIES AND PARTNERS
THAT DELIVER VITAL SERVICES TO IMPROVE HEALTH GLOBALLY, INCLUDING
IN THE CONTEXT OF THE SUSTAINABLE DEVELOPMENT GOALS UNIVERSALLY
AGREED UPON IN 2015. IT WORKS WITH A WIDE NETWORK OF PARTNERS TO
GENERATE FRESH IDEAS, RESOURCES, AND PARTNERSHIPS TO PROMOTE
SOLUTIONS FOR HEALTHY LIVES, INCLUDING THROUGH ADVOCACY.

4b (Code:) (Expenses \$ 31,674,785. including grants of \$ 7,571,724.) (Revenue \$ 993,403.)

CLIMATE, ENERGY & ENVIRONMENT: THE UNITED NATIONS FOUNDATION'S
CLIMATE & ENVIRONMENT PROGRAM WORKS WITH THE UNITED NATIONS AND
PARTNERS TO ADDRESS ENVIRONMENTAL CHALLENGES LIKE CLIMATE CHANGE,
INCLUDING IN THE CONTEXT OF THE SUSTAINABLE DEVELOPMENT GOALS
UNIVERSALLY AGREED UPON IN 2015. IT WORKS WITH A WIDE NETWORK OF
PARTNERS TO GENERATE FRESH IDEAS, RESOURCES, AND PARTNERSHIPS TO
PROMOTE SOLUTIONS FOR A HEALTHY PLANET, INCLUDING THROUGH
ADVOCACY.

4c (Code:) (Expenses \$ 29,581,172. including grants of \$ 8,789,311.) (Revenue \$ 1,578,180.)

GIRLS AND WOMEN: THE UNITED NATIONS FOUNDATION'S GIRLS & WOMEN
PROGRAM WORKS WITH THE UNITED NATIONS AND PARTNERS TO ADDRESS
CHALLENGES RELATED TO GENDER EQUALITY, INCLUDING IN THE CONTEXT OF
THE SUSTAINABLE DEVELOPMENT GOALS UNIVERSALLY AGREED UPON IN 2015.
IT WORKS WITH A WIDE NETWORK OF PARTNERS TO GENERATE FRESH IDEAS,
RESOURCES, AND PARTNERSHIPS TO PROMOTE SOLUTIONS FOR THE EQUALITY
OF GIRLS AND WOMEN, INCLUDING THROUGH ADVOCACY.

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

(Expenses \$ 22,855,131. including grants of \$ 8,061,044.) (Revenue \$ 1,054,487.)

4e Total program service expenses 110,016,521.

Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	<input checked="" type="checkbox"/>	
2 Is the organization required to complete Schedule B, Schedule of Contributors? See instructions.	<input checked="" type="checkbox"/>	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I		<input checked="" type="checkbox"/>
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II		<input checked="" type="checkbox"/>
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III		<input checked="" type="checkbox"/>
6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I		<input checked="" type="checkbox"/>
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II		<input checked="" type="checkbox"/>
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III		<input checked="" type="checkbox"/>
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		<input checked="" type="checkbox"/>
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		<input checked="" type="checkbox"/>
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X, as applicable.		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	<input checked="" type="checkbox"/>	
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	<input checked="" type="checkbox"/>	
c Did the organization report an amount for investments-program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII		<input checked="" type="checkbox"/>
d Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	<input checked="" type="checkbox"/>	
e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	<input checked="" type="checkbox"/>	
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	<input checked="" type="checkbox"/>	
12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	<input checked="" type="checkbox"/>	
b Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional		<input checked="" type="checkbox"/>
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E		<input checked="" type="checkbox"/>
14a Did the organization maintain an office, employees, or agents outside of the United States?	<input checked="" type="checkbox"/>	
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	<input checked="" type="checkbox"/>	
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	<input checked="" type="checkbox"/>	
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV		<input checked="" type="checkbox"/>
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	<input checked="" type="checkbox"/>	
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	<input checked="" type="checkbox"/>	
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III		<input checked="" type="checkbox"/>
20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H		<input checked="" type="checkbox"/>
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		
21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	<input checked="" type="checkbox"/>	

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 Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>		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? <i>If "Yes," complete Schedule J</i>	X	
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? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>		X
24b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
24c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
24d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>		X
25b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>		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? <i>If "Yes," complete Schedule L, Part II</i>		X
27 Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>		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).		
28a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If "Yes," complete Schedule L, Part IV</i>		X
28b A family member of any individual described in line 28a? <i>If "Yes," complete Schedule L, Part IV</i>		X
28c A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? <i>If "Yes," complete Schedule L, Part IV</i>		X
29 Did the organization receive more than \$25,000 in noncash contributions? <i>If "Yes," complete Schedule M</i>	X	
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>		X
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>		X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>		X
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>		X
34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>	X	
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	X	
35b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>	X	
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>		X
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>		X
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.	X	

Part V Statements Regarding Other IRS Filings and Tax ComplianceCheck 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	226	
1b Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable.	NONE	
1c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	X	

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 391		
b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?		X	
3a Did the organization have unrelated business gross income of \$1,000 or more during the year?		X	
b If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O		X	
4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?		X	
b If "Yes," enter the name of the foreign country UNITED KINGDOM 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?			X
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?			X
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?			X
b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?			
7 Organizations that may receive deductible contributions under section 170(c).			
a 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?		X	
b If "Yes," did the organization notify the donor of the value of the goods or services provided?		X	
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?			X
d If "Yes," indicate the number of Forms 8282 filed during the year	7d		
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?			X
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?			X
g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?			
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?			
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?			
9 Sponsoring organizations maintaining donor advised funds.			
a Did the sponsoring organization make any taxable distributions under section 4966?			
b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?			
10 Section 501(c)(7) organizations. Enter:			
a Initiation fees and capital contributions included on Part VIII, line 12	10a		
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b		
11 Section 501(c)(12) organizations. Enter:			
a Gross income from members or shareholders	11a		
b Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b		
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?			
b If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b		
13 Section 501(c)(29) qualified nonprofit health insurance issuers.			
a Is the organization licensed to issue qualified health plans in more than one state? 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	13b		
c Enter the amount of reserves on hand	13c		
14a Did the organization receive any payments for indoor tanning services during the tax year?			X
b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O			
15 Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see the instructions and file Form 4720, Schedule N.			X
16 Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.			X
17 Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities that would result in the imposition of an excise tax under section 4951, 4952, or 4953? If "Yes," complete Form 6069.			

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

Section A. Governing Body and Management

	Yes	No
1a Enter the number of voting members of the governing body at the end of the tax year 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.	18	
b Enter the number of voting members included on line 1a, above, who are independent.	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?	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?		X
4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		X
5 Did the organization become aware during the year of a significant diversion of the organization's assets?		X
6 Did the organization have members or stockholders?		X
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?		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?		X
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a The governing body?	X	
b Each committee with authority to act on behalf of the governing body?	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.		X

Section 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?		X
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? . . .		
11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? .		X
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	X	
b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	X	
c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done	X	
13 Did the organization have a written whistleblower policy?	X	
14 Did the organization have a written document retention and destruction policy?	X	
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?		
a The organization's CEO, Executive Director, or top management official	X	
b Other officers or key employees of the organization		X
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?		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?		

Section 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) available for public inspection. Indicate how you made these available. Check all that apply.
☒ Own website ☐ Another's website ☒ 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 financial statements available to the public during the tax year.

20 State the name, address, and telephone number of the person who possesses the organization's books and records.
SHENAE BURGESS 1750 PENNSYLVANIA AVENUE, NW, STE 300 WASHINGTON, DC 20006

202-802-4502

Form 990 (2023)

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent ContractorsCheck if Schedule O contains a response or note to any line in this Part VII ☒ X**Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees****1a** Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's **current** key employees, if any. See the instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/ 1099-MISC/ 1099-NEC)	(E) Reportable compensation from related organizations (W-2/ 1099-MISC/ 1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) ELIZABETH COUSENS PRESIDENT & CEO	34.00 6.00	X		X				382,983.	67,585.	47,769.
(2) HENRY F DE SIO JR. CHIEF OPERATING OFFICER	34.00 6.00			X				290,626.	51,287.	36,517.
(3) DYMPHNA VAN DER LANS CHIEF EXECUTIVE OFFICER, CCA	40.00 NONE					X		327,904.	NONE	45,845.
(4) MICHELLE MORSE VP FOR GIRLS & WOMEN STRATEGY	40.00 NONE					X		317,061.	NONE	44,099.
(5) LESLIE A EDMOND CHIEF PEOPLE OFFICER	34.00 6.00				X			269,665.	47,588.	26,875.
(6) KATHERINE DODSON SR ADVISOR GLOBAL HEALTH	40.00 NONE					X		285,438.	NONE	45,770.
(7) SOFIA BORGES SENIOR VICE PRESIDENT	40.00 NONE					X		311,796.	NONE	13,680.
(8) OGDEN PETER VP FOR CLIMATE, ENRG & ENVRN	40.00 NONE					X		294,487.	NONE	25,004.
(9) SHENAE BURGESS CHIEF FINANCIAL OFFICER	34.00 6.00			X				81,952.	14,462.	9,097.
(10) R.E. TURNER CHAIRMAN	5.00 5.00	X		X				NONE	NONE	NONE
(11) HER MAJESTY QUEEN RANIA AL-AB DIRECTOR	5.00 NONE	X						NONE	NONE	NONE
(12) FABIO C. BARBOSA DIRECTOR	5.00 5.00	X						NONE	NONE	NONE
(13) GRO HARLEM BRUNDTLAND DIRECTOR	5.00 NONE	X						NONE	NONE	NONE
(14) VALERIE AMOS DIRECTOR & VICE CHAIR	5.00 NONE	X		X				NONE	NONE	NONE

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(15) KATHRYN CALVIN WALTERS DIRECTOR	5.00 5.00	X						NONE	NONE	NONE
(16) JULIO FRENK DIRECTOR	5.00 NONE	X						NONE	NONE	NONE
(17) N.R. NARAYANA MURTHY DIRECTOR	5.00 5.00	X						NONE	NONE	NONE
(18) CHARLES HOLLIDAY DIRECTOR	5.00 NONE	X						NONE	NONE	NONE
(19) NAKO ISHII DIRECTOR	5.00 NONE	X						NONE	NONE	NONE
(20) DR. FRANNIE LEAUTIER DIRECTOR	5.00 NONE	X						NONE	NONE	NONE
(21) MARK MALLOCH-BROWN DIRECTOR	5.00 NONE	X						NONE	NONE	NONE
(22) EDWARD NDOPU DIRECTOR	5.00 NONE	X						NONE	NONE	NONE
(23) LAURA TURNER SEYDEL DIRECTOR	5.00 5.00	X						NONE	NONE	NONE
(24) MARTI G. SUBRAHMANYAM DIRECTOR	5.00 NONE	X						NONE	NONE	NONE
(25) HANS VESTBERG DIRECTOR	5.00 NONE	X						NONE	NONE	NONE
1b Sub-total								2,561,912.	180,922.	294,656.
c Total from continuation sheets to Part VII, Section A								NONE	NONE	NONE
d Total (add lines 1b and 1c)								2,561,912.	180,922.	294,656.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ► 113

	Yes	No
3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>		
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i>		
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>		

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization ►

Part VIII Statement of RevenueCheck if Schedule O contains a response or note to any line in this Part VIII ☐

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Contributions, Gifts, Grants, and Other Similar Amounts	1a	Federated campaigns	1a				
	b	Membership dues	1b	649,145.			
	c	Fundraising events	1c				
	d	Related organizations	1d	10,000.			
	e	Government grants (contributions) . .	1e	2,736,521.			
	f	All other contributions, gifts, grants, and similar amounts not included above .	1f	104,046,739.			
	g	Noncash contributions included in lines 1a-1f	1g	\$ 4,807,885.			
	h	Total. Add lines 1a-1f		107,442,405.			
	Program Service Revenue				Business Code		
2a		CONTRACT REVENUE		900099	4,100,315.	4,100,315.	
b							
c							
d							
e							
f		All other program service revenue					
g		Total. Add lines 2a-2f			4,100,315.		
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts)		238,959.		37,490.	201,469.
	4	Income from investment of tax-exempt bond proceeds . . .		NONE			
	5	Royalties		NONE			
			(i) Real	(ii) Personal			
	6a	Gross rents	6a	63,990.			
	b	Less: rental expenses	6b				
	c	Rental income or (loss)	6c	63,990.	NONE		
	d	Net rental income or (loss)		63,990.			63,990.
	7a	Gross amount from sales of assets other than inventory		(i) Securities	(ii) Other		
	7a		20,285,857.				
	b	Less: cost or other basis and sales expenses . .	7b	18,727,083.			
	c	Gain or (loss)	7c	1,558,774.			
	d	Net gain or (loss)		1,558,774.			1,558,774.
	8a	Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18	8a	577,320.			
	b	Less: direct expenses	8b	134,350.			
	c	Net income or (loss) from fundraising events		442,970.			442,970.
	9a	Gross income from gaming activities. See Part IV, line 19	9a	NONE			
b	Less: direct expenses	9b	NONE				
c	Net income or (loss) from gaming activities		NONE				
10a	Gross sales of inventory, less returns and allowances	10a	NONE				
b	Less: cost of goods sold	10b	NONE				
c	Net income or (loss) from sales of inventory		NONE				
Miscellaneous Revenue				Business Code			
	11a	GRANT RECOVERIES AND ADJUSTMENTS		900099	20,556.		20,556.
	b	MISCELLANEOUS		900099	-444,149.		-444,149.
	c						
	d	All other revenue					
	e	Total. Add lines 11a-11d			-423,593.		
12	Total revenue. See instructions			113,423,820.	4,100,315.	37,490.	1,843,610.

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

	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	22,663,828.	22,663,828.		
2 Grants and other assistance to domestic individuals. See Part IV, line 22	NONE			
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16	10,101,903.	10,101,903.		
4 Benefits paid to or for members	NONE			
5 Compensation of current officers, directors, trustees, and key employees	1,136,164.	915,502.	119,970.	100,692.
6 Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	NONE			
7 Other salaries and wages	32,169,675.	25,921,781.	3,396,866.	2,851,028.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	1,483,671.	1,223,518.	134,160.	125,993.
9 Other employee benefits	3,238,028.	2,694,607.	364,210.	179,211.
10 Payroll taxes	2,270,760.	1,872,663.	196,917.	201,180.
11 Fees for services (nonemployees):				
a Management	NONE			
b Legal	585,596.	350,100.	121,109.	114,387.
c Accounting	871,350.	286,420.	551,021.	33,909.
d Lobbying	NONE			
e Professional fundraising services. See Part IV, line 17	643,981.			643,981.
f Investment management fees	263,300.		263,300.	
g Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Schedule O.)	SEE SCHE O 32,071,167.	28,840,230.	1,521,424.	1,709,513.
12 Advertising and promotion	NONE			
13 Office expenses	1,154,598.	747,044.	349,635.	57,919.
14 Information technology	860,151.	376,333.	480,142.	3,676.
15 Royalties	NONE			
16 Occupancy	5,123,405.	2,821,570.	1,298,331.	1,003,504.
17 Travel	4,758,760.	4,337,680.	108,726.	312,354.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials	NONE			
19 Conferences, conventions, and meetings	5,660,355.	5,079,801.	88,537.	492,017.
20 Interest	NONE			
21 Payments to affiliates	NONE			
22 Depreciation, depletion, and amortization	595,791.	327,685.	148,948.	119,158.
23 Insurance	161,911.	89,558.	40,163.	32,190.
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.)				
a UNCOLLECTIBLE CONTRIBUTIONS	585,038.	531,892.	6,520.	46,626.
b SUBSCRIPTIONS	347,453.	247,624.	83,712.	16,117.
c COMMUNICATIONS	195,957.	134,807.	52,514.	8,636.
d BANK FEES AND CHARGES	136,343.	75,639.	33,646.	27,058.
e All other expenses	386,453.	376,336.	8,240.	1,877.
25 Total functional expenses. Add lines 1 through 24e	127,465,638.	110,016,521.	9,368,091.	8,081,026.
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

Part X Balance SheetCheck if Schedule O contains a response or note to any line in this Part X ☒

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing	1,404.	1	1,404.
	2 Savings and temporary cash investments.	66,100,159.	2	39,452,518.
	3 Pledges and grants receivable, net	63,676,079.	3	77,142,490.
	4 Accounts receivable, net	5,899,348.	4	7,635,334.
	5 Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons	NONE	5	NONE
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B).	NONE	6	NONE
	7 Notes and loans receivable, net	NONE	7	NONE
	8 Inventories for sale or use	NONE	8	NONE
	9 Prepaid expenses and deferred charges	879,911.	9	188,010.
	10 a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 12,042,619.		
	b Less: accumulated depreciation.	10b 9,101,944.		
	11 Investments - publicly traded securities.	35,153,722.	11	74,781,307.
	12 Investments - other securities. See Part IV, line 11.	108,162,883.	12	101,940,250.
	13 Investments - program-related. See Part IV, line 11.	NONE	13	NONE
	14 Intangible assets	NONE	14	NONE
	15 Other assets. See Part IV, line 11	32,034,215.	15	25,052,660.
16 Total assets. Add lines 1 through 15 (must equal line 33)	315,410,137.	16	329,134,648.	
Liabilities	17 Accounts payable and accrued expenses.	4,933,629.	17	4,971,933.
	18 Grants payable	NONE	18	NONE
	19 Deferred revenue	NONE	19	13,518,645.
	20 Tax-exempt bond liabilities	NONE	20	NONE
	21 Escrow or custodial account liability. Complete Part IV of Schedule D	NONE	21	NONE
	22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons	NONE	22	NONE
	23 Secured mortgages and notes payable to unrelated third parties	NONE	23	NONE
	24 Unsecured notes and loans payable to unrelated third parties.	NONE	24	NONE
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D	43,087,054.	25	34,741,448.
	26 Total liabilities. Add lines 17 through 25.	48,020,683.	26	53,232,026.
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here and complete lines 27, 28, 32, and 33. <input checked="" type="checkbox"/>			
	27 Net assets without donor restrictions	155,780,815.	27	174,420,443.
	28 Net assets with donor restrictions.	111,608,639.	28	101,482,179.
	Organizations that do not follow FASB ASC 958, check here and complete lines 29 through 33. <input type="checkbox"/>			
	29 Capital stock or trust principal, or current funds		29	
	30 Paid-in or capital surplus, or land, building, or equipment fund		30	
	31 Retained earnings, endowment, accumulated income, or other funds		31	
	32 Total net assets or fund balances	267,389,454.	32	275,902,622.
	33 Total liabilities and net assets/fund balances.	315,410,137.	33	329,134,648.

Form **990** (2023)

Part XI Reconciliation of Net AssetsCheck if Schedule O contains a response or note to any line in this Part XI ☒

1	Total revenue (must equal Part VIII, column (A), line 12)	1	113,423,820.
2	Total expenses (must equal Part IX, column (A), line 25)	2	127,465,638.
3	Revenue less expenses. Subtract line 2 from line 1	3	-14,041,818.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	267,389,454.
5	Net unrealized gains (losses) on investments	5	22,264,759.
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	290,227.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	275,902,622.

Part XII Financial Statements and ReportingCheck if Schedule O contains a response or note to any line in this Part XII. ☐

- 1** Accounting method used to prepare the Form 990: ☐ Cash ☒ Accrual ☐ Other _____
If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.
- 2a** Were the organization's financial statements compiled or reviewed by an independent accountant?
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?
If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:
☒ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis
- c** 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?
If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.
- 3a** As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Uniform Guidance, 2 C.F.R. Part 200, Subpart F?
- b** If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits . . .

	Yes	No
2a		X
2b	X	
2c	X	
3a		X
3b		

Form **990** (2023)

SCHEDULE A
(Form 990)

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

2023

**Open to Public
Inspection**

Name of the organization

UNITED NATIONS FOUNDATION, INC.

Employer identification number

58-2368165

Part I Reason for Public Charity Status. (All organizations must complete this part.) See instructions.

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

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

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-10 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
(A)						
(B)						
(C)						
(D)						
(E)						
Total						

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

Schedule A (Form 990) 2023

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)
 (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	117,830,806.	281,195,084.	82,821,917.	103,468,186.	107,442,405.	692,758,398.
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						NONE
3 The value of services or facilities furnished by a governmental unit to the organization without charge						NONE
4 Total. Add lines 1 through 3.	117,830,806.	281,195,084.	82,821,917.	103,468,186.	107,442,405.	692,758,398.
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).						113,438,751.
6 Public support. Subtract line 5 from line 4						579,319,647.

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
7 Amounts from line 4	117,830,806.	281,195,084.	82,821,917.	103,468,186.	107,442,405.	692,758,398.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	123,009.	460,985.	89,337.	1,350,612.	302,949.	2,326,892.
9 Net income from unrelated business activities, whether or not the business is regularly carried on	NONE	50,203.	252,750.	165,982.	468,151.	937,086.
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	101,161.	701,119.	-447,866.	169,279.	-423,593.	100,100.
11 Total support. Add lines 7 through 10						696,122,476.
12 Gross receipts from related activities, etc. (see instructions)					12	11,032,942.
13 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here						<input type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2023 (line 6, column (f), divided by line 11, column (f))	14	83.22 %
15 Public support percentage from 2022 Schedule A, Part II, line 14	15	83.40 %
16a 33 1/3% support test - 2023. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here . The organization qualifies as a publicly supported organization.		<input checked="" type="checkbox"/>
b 33 1/3% support test - 2022. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here . The organization qualifies as a publicly supported organization		<input type="checkbox"/>
17a 10%-facts-and-circumstances test - 2023. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here . Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization.		<input type="checkbox"/>
b 10%-facts-and-circumstances test - 2022. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here . Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization.		<input type="checkbox"/>
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions		<input type="checkbox"/>

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5.						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b.						
8 Public support. (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
9 Amounts from line 6.						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on.						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						
14 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

15 Public support percentage for 2023 (line 8, column (f), divided by line 13, column (f))	15	%
16 Public support percentage from 2022 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2023 (line 10c, column (f), divided by line 13, column (f))	17	%
18 Investment income percentage from 2022 Schedule A, Part III, line 17	18	%

19a 33 1/3% support tests - 2023. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization . . . ☐

b 33 1/3% support tests - 2022. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization . . ☐

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions . . ☐

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

	Yes	No
1 Are all of the organization's supported organizations listed by name in the organization's governing documents? <i>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.</i>		
2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>		
3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer lines 3b and 3c below.</i>		
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)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>		
c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>		
4a Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.</i>		
b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>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.</i>		
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)? <i>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.</i>		
5a Did the organization add, substitute, or remove any supported organizations during the tax year? <i>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).</i>		
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? <i>If "Yes," provide detail in Part VI.</i>		
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? <i>If "Yes," complete Part I of Schedule L (Form 990).</i>		
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? <i>If "Yes," complete Part I of Schedule L (Form 990).</i>		
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))? <i>If "Yes," provide detail in Part VI.</i>		
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? <i>If "Yes," provide detail in Part VI.</i>		
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? <i>If "Yes," provide detail in Part VI.</i>		
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)? <i>If "Yes," answer line 10b below.</i>		
b Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)</i>		

Part IV Supporting Organizations (continued)

	Yes	No
11 Has the organization accepted a gift or contribution from any of the following persons?		
a 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?		
b A family member of a person described on line 11a above?		
c 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 .		
11a		
11b		
11c		

Section B. Type I Supporting Organizations

	Yes	No
1 Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.		
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, supervised, or controlled the supporting organization.		
1		
2		

Section 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 the supported organization(s).		
1		

Section D. All Type III Supporting Organizations

	Yes	No
1 Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?		
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).		
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.		
1		
2		
3		

Section E. Type III Functionally Integrated Supporting Organizations

	Yes	No
1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).		
a <input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.		
b <input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.		
c <input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see instructions).		
2 Activities Test. Answer lines 2a and 2b below.		
a 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.		
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.		
3 Parent of Supported Organizations. Answer lines 3a and 3b below.		
a 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 .		
b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.		
2a		
2b		
3a		
3b		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

- 1** ☐ Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (*explain in Part VI*). See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	1		
2 Recoveries of prior-year distributions	2		
3 Other gross income (see instructions)	3		
4 Add lines 1 through 3.	4		
5 Depreciation and depletion	5		
6 Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7 Other expenses (see instructions)	7		
8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1 Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):			
a Average monthly value of securities	1a		
b Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	1d		
e Discount claimed for blockage or other factors (<i>explain in detail in Part VI</i>):			
2 Acquisition indebtedness applicable to non-exempt-use assets	2		
3 Subtract line 2 from line 1d.	3		
4 Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).	4		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6 Multiply line 5 by 0.035.	6		
7 Recoveries of prior-year distributions	7		
8 Minimum Asset Amount (add line 7 to line 6)	8		
Section C - Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, column A)	1		
2 Enter 0.85 of line 1.	2		
3 Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4 Enter greater of line 2 or line 3.	4		
5 Income tax imposed in prior year	5		
6 Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6		
7 <input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).			

Schedule A (Form 990) 2023

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)

Section D - Distributions		Current Year
1	Amounts paid to supported organizations to accomplish exempt purposes	1
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	2
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	3
4	Amounts paid to acquire exempt-use assets	4
5	Qualified set-aside amounts (prior IRS approval required - <i>provide details in Part VI</i>)	5
6	Other distributions (<i>describe in Part VI</i>). See instructions.	6
7	Total annual distributions. Add lines 1 through 6.	7
8	Distributions to attentive supported organizations to which the organization is responsive (<i>provide details in Part VI</i>). See instructions.	8
9	Distributable amount for 2023 from Section C, line 6	9
10	Line 8 amount divided by line 9 amount	10

Section E - Distribution Allocations (see instructions)		(i) Excess Distributions	(ii) Underdistributions Pre-2023	(iii) Distributable Amount for 2023
1	Distributable amount for 2023 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2023 (reasonable cause required - <i>explain in Part VI</i>). See instructions.			
3	Excess distributions carryover, if any, to 2023			
a	From 2018			
b	From 2019			
c	From 2020			
d	From 2021			
e	From 2022			
f	Total of lines 3a through 3e			
g	Applied to underdistributions of prior years			
h	Applied to 2023 distributable amount			
i	Carryover from 2018 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4	Distributions for 2023 from Section D, line 7: \$			
a	Applied to underdistributions of prior years			
b	Applied to 2023 distributable amount			
c	Remainder. Subtract lines 4a and 4b from line 4.			
5	Remaining underdistributions for years prior to 2023, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, <i>explain in Part VI</i> . See instructions.			
6	Remaining underdistributions for 2023. Subtract lines 3h and 4b from line 1. For result greater than zero, <i>explain in Part VI</i> . See instructions.			
7	Excess distributions carryover to 2024. Add lines 3j and 4c.			
8	Breakdown of line 7:			
a	Excess from 2019			
b	Excess from 2020			
c	Excess from 2021			
d	Excess from 2022			
e	Excess from 2023			

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

SCHEDULE A, PART II - OTHER INCOME

DESCRIPTION	2019	2020	2021	2022	2023	TOTAL
GRANT RECOVERIES/ADJUSTMENTS	101,161.	593,923.	-274,199.	95,020.	20,556.	536,461.
MISCELLANEOUS INCOME		107,196.	-173,667.	74,259.	-444,149.	-436,361.
TOTALS	101,161.	701,119.	-447,866.	169,279.	-423,593.	100,100.

**Schedule B
(Form 990)**

Department of the Treasury
Internal Revenue Service

Schedule of Contributors

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

OMB No. 1545-0047

2023

Name of the organization

Employer identification number

UNITED NATIONS FOUNDATION, INC.

58-2368165

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

☒ 501(c)(03) (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

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

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

General Rule

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

Special Rules

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

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

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

Name of organization

UNITED NATIONS FOUNDATION, INC.

Employer identification number

58-2368165

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	N/A	\$ 12,493,008.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2	N/A	\$ 9,720,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
3	N/A	\$ 7,625,665.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
4	N/A	\$ 5,750,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
5	N/A	\$ 5,055,580.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
6	N/A	\$ 4,400,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization

UNITED NATIONS FOUNDATION, INC.

Employer identification number

58-2368165

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
7	N/A	\$ 4,000,000.	Person <input checked="checked" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
8	N/A	\$ 3,708,865.	Person <input checked="checked" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
9	N/A	\$ 2,883,922.	Person <input checked="checked" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
10	N/A	\$ 2,499,929.	Person <input checked="checked" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Employer identification number

58-2368165

Part II

[illegible]

Name of organization

UNITED NATIONS FOUNDATION, INC.

Employer identification number

58-2368165

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 information once. See instructions.) \$ _____

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

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
_____	_____	_____	_____
	_____	_____	_____
	_____	_____	_____
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
_____		_____	
_____		_____	
_____		_____	
_____	_____	_____	_____
	_____	_____	_____
	_____	_____	_____
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
_____		_____	
_____		_____	
_____		_____	
_____	_____	_____	_____
	_____	_____	_____
	_____	_____	_____
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
_____		_____	
_____		_____	
_____		_____	
_____	_____	_____	_____
	_____	_____	_____
	_____	_____	_____
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
_____		_____	
_____		_____	
_____		_____	

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Name of the organization

UNITED NATIONS FOUNDATION, INC.

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

2023

Open to Public
Inspection

Employer identification number

58-2368165

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts

Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

	(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 writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?		<input type="checkbox"/> Yes <input type="checkbox"/> No
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?		<input type="checkbox"/> Yes <input type="checkbox"/> No

Part II Conservation Easements

Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply).	
<input type="checkbox"/> Preservation of land for public use (for example, recreation or education)	<input type="checkbox"/> Preservation of a historically important land area
<input type="checkbox"/> Protection of natural habitat	<input type="checkbox"/> Preservation of a certified historic structure
<input type="checkbox"/> Preservation of open space	
2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.	
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included on line 2a	2c
d Number of conservation easements included on line 2c acquired after July 25, 2006, and not on a historic structure listed in the National Register	2d
3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year	
4 Number of states where property subject to conservation easement is located	
5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?	<input type="checkbox"/> Yes <input type="checkbox"/> No
6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year	
7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year	
8 Does each conservation easement reported on line 2d above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?	<input type="checkbox"/> Yes <input type="checkbox"/> No
9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.	

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

Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

1a If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items.	
b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:	
(i) Revenue included on Form 990, Part VIII, line 1.	\$
(ii) Assets included in Form 990, Part X.	\$
2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items:	
a Revenue included on Form 990, Part VIII, line 1.	\$
b Assets included in Form 990, Part X.	\$

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

Schedule D (Form 990) 2023

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

3 Using the organization's acquisition, accession, and other records, check any of the following that make significant use of its collection items (check all that apply).

- ☐ a Public exhibition
☐ b Scholarly research
☐ c Preservation for future generations
☐ d Loan or exchange program
☐ e Other _____

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

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

Part IV Escrow and Custodial Arrangements

Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

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

b If "Yes," explain the arrangement in Part XIII and complete the following table.

	Amount
c Beginning balance	1c
d Additions during the year	1d
e Distributions during the year	1e
f Ending balance	1f

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

b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII. ☐

Part V Endowment Funds

Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

- a Board designated or quasi-endowment _____ %
 b Permanent endowment _____ %
 c Term endowment _____ %

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

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

	Yes	No
(i) Unrelated organizations?	3a(i)	
(ii) Related organizations?	3a(ii)	
b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?	3b	

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

Part VI Land, Buildings, and Equipment

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings		NONE	NONE	NONE
c Leasehold improvements		8,733,375.	5,792,700.	2,940,675.
d Equipment		350,519.	350,519.	NONE
e Other		2,958,725.	2,958,725.	NONE
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, line 10c, column (B))				2,940,675.

Part VII Investments - Other Securities

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

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely held equity interests		
(3) Other _____		
(A) ALTERNATIVE INVESTMENTS	101,940,250.	FMV
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Column (b) must equal Form 990, Part X, line 12, col. (B)) . . .	101,940,250.	

Part VIII Investments - Program Related

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

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Column (b) must equal Form 990, Part X, line 13, col. (B)) . . .		

Part IX Other Assets

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

(a) Description	(b) Book value
(1) ROU ASSETS	25,052,660.
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, line 15, col. (B)).	25,052,660.

Part X Other Liabilities

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

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) LEASE LIABILITIES	34,741,448.
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, line 25, col. (B)).	34,741,448.

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 . ☒

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

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

1	Total revenue, gains, and other support per audited financial statements	1	135,715,506.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains (losses) on investments	2a	22,264,759.
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII.)	2d	26,927.
e	Add lines 2a through 2d	2e	22,291,686.
3	Subtract line 2e from line 1	3	113,423,820.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	
c	Add lines 4a and 4b	4c	
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12.)	5	113,423,820.

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

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

1	Total expenses and losses per audited financial statements	1	127,202,338.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIII.)	2d	
e	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	127,202,338.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	263,300.
b	Other (Describe in Part XIII.)	4b	
c	Add lines 4a and 4b	4c	263,300.
5	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18.)	5	127,465,638.

Part XIII Supplemental Information

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

SEE SUPPLEMENTAL PAGE

Part XIII Supplemental Information (continued)

SCHEDULE D, PART X, LINE 2:

UNF HAS RECEIVED A RULING FROM THE INTERNAL REVENUE SERVICE THAT IT IS EXEMPT FROM FEDERAL INCOME TAX UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE AS A PUBLIC CHARITY, OTHER THAN UNRELATED BUSINESS INCOME. SINCE UNF HAS NO SIGNIFICANT UNRELATED BUSINESS INCOME, NO PROVISION FOR INCOME TAX HAS BEEN RECORDED.

FASB'S GUIDANCE ON ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES CLARIFIES THE ACCOUNTING FOR UNCERTAINTY OF INCOME TAX POSITIONS. THIS GUIDANCE DEFINES THE THRESHOLD FOR RECOGNIZING TAX RETURN POSITIONS IN THE FINANCIAL STATEMENTS AS "MORE LIKELY THAN NOT" THAT THE POSITION IS SUSTAINABLE, BASED ON ITS TECHNICAL MERITS. THIS GUIDANCE ALSO PROVIDES GUIDANCE ON THE MEASUREMENT, CLASSIFICATION, AND DISCLOSURE OF TAX RETURN POSITIONS IN THE FINANCIAL STATEMENTS. THERE WAS NO IMPACT ON UNF'S FINANCIAL STATEMENTS DURING THE YEARS ENDED DECEMBER 31, 2023 AND 2022 RESULTING FROM THIS GUIDANCE.

SCHEDULE D, PART XI, LINE 2D:

UNREALIZED FOREIGN EXCHANGE GAIN:	\$ 290,227
INVESTMENT EXPENSES:	(\$ 263,300)

TOTAL	\$ 26,927

**SCHEDULE F
(Form 990)**

Department of the Treasury
Internal Revenue Service

Name of the organization

UNITED NATIONS FOUNDATION, INC.

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.

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

OMB No. 1545-0047

2023

**Open to Public
Inspection**

Employer identification number

58-2368165

Part I **General Information on Activities Outside the United States.** Complete if the organization answered "Yes" on Form 990, Part IV, line 14b.

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

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

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

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in the region	(d) Activities conducted in the region (by type) (such as, fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in the region	(f) Total expenditures for and investments in the region
(1) CENTRAL AMERICA/CARIBBEAN			GRANTMAKING		1,624,468.
(2) EUROPE			GRANTMAKING		3,620,839.
(3) NORTH AMERICA			GRANTMAKING		169,023.
(4) EAST ASIA AND THE PACIFIC			GRANTMAKING		1,991,000.
(5) SOUTH AMERICA			GRANTMAKING		119,700.
(6) SOUTH ASIA			GRANTMAKING		608,028.
(7) SUB-SAHARAN AFRICA			GRANTMAKING		1,968,844.
(8) EUROPE	NONE	64	MAINTAINING OFFICES		1,248,740.
(9)					
(10)					
(11)					
(12)					
(13)					
(14)					
(15)					
(16)					
(17)					
3a Subtotal	NONE	64.			11,350,642.
b Total from continuation sheets to Part I					
c Totals (add lines 3a and 3b)	NONE	64.			11,350,642.

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

Schedule F (Form 990) 2023

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

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)			CENT. AMERICA/CARIBBEAN	ENVIRONMENT	37,500.	WIRE		N/A	N/A
(2)			CENT. AMERICA/CARIBBEAN	ENVIRONMENT	50,000.	WIRE		N/A	N/A
(3)			CENT. AMERICA/CARIBBEAN	ENVIRONMENT	61,842.	WIRE		N/A	N/A
(4)			CENT. AMERICA/CARIBBEAN	ENVIRONMENT	100,000.	WIRE		N/A	N/A
(5)			CENT. AMERICA/CARIBBEAN	ENVIRONMENT	125,000.	WIRE		N/A	N/A
(6)			CENT. AMERICA/CARIBBEAN	ENVIRONMENT	126,500.	WIRE		N/A	N/A
(7)			CENT. AMERICA/CARIBBEAN	ENVIRONMENT	374,325.	WIRE		N/A	N/A
(8)			CENT. AMERICA/CARIBBEAN	ENVIRONMENT	651,801.	WIRE		N/A	N/A
(9)			CENT. AMERICA/CARIBBEAN	GIRLS & WMN	32,500.	WIRE		N/A	N/A
(10)			CENT. AMERICA/CARIBBEAN	GIRLS & WMN	32,500.	WIRE		N/A	N/A
(11)			CENT. AMERICA/CARIBBEAN	GIRLS & WMN	32,500.	WIRE		N/A	N/A
(12)			EUROPE/ICELAND/GREENLAND	ENVIRONMENT	9,446.	WIRE		N/A	N/A
(13)			EUROPE/ICELAND/GREENLAND	ENVIRONMENT	15,000.	WIRE		N/A	N/A
(14)			EUROPE/ICELAND/GREENLAND	ENVIRONMENT	27,676.	WIRE		N/A	N/A
(15)			EUROPE/ICELAND/GREENLAND	ENVIRONMENT	100,000.	WIRE		N/A	N/A
(16)			EUROPE/ICELAND/GREENLAND	ENVIRONMENT	150,000.	WIRE		N/A	N/A

- 2** 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 58
- 3** Enter total number of other organizations or entities 14

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

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)			EUROPE/ICELAND/GREENLAND	GIRLS & WMN	340,000.	WIRE		N/A	N/A
(2)			EUROPE/ICELAND/GREENLAND	GIRLS & WMN	631,660.	WIRE		N/A	N/A
(3)			EUROPE/ICELAND/GREENLAND	GIRLS & WMN	798,581.	WIRE		N/A	N/A
(4)			EUROPE/ICELAND/GREENLAND	GIRLS & WMN	1,116,000.	WIRE		N/A	N/A
(5)			EUROPE/ICELAND/GREENLAND	GLOBAL HLTH	200,000.	WIRE		N/A	N/A
(6)			EUROPE/ICELAND/GREENLAND	GLOBAL HLTH	232,477.	WIRE		N/A	N/A
(7)			NORTH AMERICA	ENVIRONMENT	13,143.	WIRE		N/A	N/A
(8)			NORTH AMERICA	ENVIRONMENT	30,000.	WIRE		N/A	N/A
(9)			NORTH AMERICA	GIRLS & WMN	125,880.	WIRE		N/A	N/A
(10)			EAST ASIA/PACIFIC	ENVIRONMENT	20,000.	WIRE		N/A	N/A
(11)			EAST ASIA/PACIFIC	ENVIRONMENT	75,000.	WIRE		N/A	N/A
(12)			EAST ASIA/PACIFIC	ENVIRONMENT	1,341,000.	WIRE		N/A	N/A
(13)			EAST ASIA/PACIFIC	GIRLS & WMN	550,000.	WIRE		N/A	N/A
(14)			SOUTH AMERICA	ENVIRONMENT	20,500.	WIRE		N/A	N/A
(15)			SOUTH AMERICA	GIRLS & WMN	20,000.	WIRE		N/A	N/A
(16)			SOUTH AMERICA	GIRLS & WMN	32,500.	WIRE		N/A	N/A

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3 Enter total number of other organizations or entities

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

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)			SOUTH AMERICA	GIRLS & WMN	46,700.	WIRE		N/A	N/A
(2)			SOUTH ASIA	ENVIRONMENT	20,000.	WIRE		N/A	N/A
(3)			SOUTH ASIA	GIRLS & WMN	7,500.	WIRE		N/A	N/A
(4)			SOUTH ASIA	GIRLS & WMN	10,000.	WIRE		N/A	N/A
(5)			SOUTH ASIA	GIRLS & WMN	16,000.	WIRE		N/A	N/A
(6)			SOUTH ASIA	GIRLS & WMN	17,500.	WIRE		N/A	N/A
(7)			SOUTH ASIA	GIRLS & WMN	17,500.	WIRE		N/A	N/A
(8)			SOUTH ASIA	GIRLS & WMN	18,000.	WIRE		N/A	N/A
(9)			SOUTH ASIA	GIRLS & WMN	20,253.	WIRE		N/A	N/A
(10)			SOUTH ASIA	GIRLS & WMN	24,775.	WIRE		N/A	N/A
(11)			SOUTH ASIA	GIRLS & WMN	25,000.	WIRE		N/A	N/A
(12)			SOUTH ASIA	GIRLS & WMN	25,000.	WIRE		N/A	N/A
(13)			SOUTH ASIA	GIRLS & WMN	25,000.	WIRE		N/A	N/A
(14)			SOUTH ASIA	GIRLS & WMN	25,000.	WIRE		N/A	N/A
(15)			SOUTH ASIA	GIRLS & WMN	31,500.	WIRE		N/A	N/A
(16)			SOUTH ASIA	GIRLS & WMN	35,000.	WIRE		N/A	N/A

2 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

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

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)			SOUTH ASIA	GIRLS & WMN	35,000.	WIRE		N/A	N/A
(2)			SOUTH ASIA	GIRLS & WMN	37,500.	WIRE		N/A	N/A
(3)			SOUTH ASIA	GIRLS & WMN	37,500.	WIRE		N/A	N/A
(4)			SOUTH ASIA	GIRLS & WMN	37,500.	WIRE		N/A	N/A
(5)			SOUTH ASIA	GIRLS & WMN	37,500.	WIRE		N/A	N/A
(6)			SOUTH ASIA	GIRLS & WMN	37,500.	WIRE		N/A	N/A
(7)			SOUTH ASIA	GIRLS & WMN	37,500.	WIRE		N/A	N/A
(8)			SOUTH ASIA	GLOBAL HLTH	25,000.	WIRE		N/A	N/A
(9)			SUB-SAHARAN AFRICA	ENVIRONMENT	6,689.	WIRE		N/A	N/A
(10)			SUB-SAHARAN AFRICA	ENVIRONMENT	8,000.	WIRE		N/A	N/A
(11)			SUB-SAHARAN AFRICA	ENVIRONMENT	59,000.	WIRE		N/A	N/A
(12)			SUB-SAHARAN AFRICA	ENVIRONMENT	40,000.	WIRE		N/A	N/A
(13)			SUB-SAHARAN AFRICA	ENVIRONMENT	20,000.	WIRE		N/A	N/A
(14)			SUB-SAHARAN AFRICA	GIRLS & WMN	10,120.	WIRE		N/A	N/A
(15)			SUB-SAHARAN AFRICA	GIRLS & WMN	32,500.	WIRE		N/A	N/A
(16)			SUB-SAHARAN AFRICA	GIRLS & WMN	50,000.	WIRE		N/A	N/A

2 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

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

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)			SUB-SAHARAN AFRICA	GIRLS & WMN	60,000.	WIRE		N/A	N/A
(2)			SUB-SAHARAN AFRICA	GIRLS & WMN	100,000.	WIRE		N/A	N/A
(3)			SUB-SAHARAN AFRICA	GIRLS & WMN	105,000.	WIRE		N/A	N/A
(4)			SUB-SAHARAN AFRICA	GIRLS & WMN	1,211,010.	WIRE		N/A	N/A
(5)			SUB-SAHARAN AFRICA	GIRLS & WMN	80,000.	WIRE		N/A	N/A
(6)			SUB-SAHARAN AFRICA	GIRLS & WMN	100,000.	WIRE		N/A	N/A
(7)			SUB-SAHARAN AFRICA	GIRLS & WMN	32,500.	WIRE		N/A	N/A
(8)			SUB-SAHARAN AFRICA	GLOBAL HLTH	54,025.	WIRE		N/A	N/A
(9)									
(10)									
(11)									
(12)									
(13)									
(14)									
(15)									
(16)									

2 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

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

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

Part IV Foreign Forms

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

Schedule F (Form 990) 2023

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).

SCHEDULE F, PART I, LINE 2:

THE UNITED NATIONS FOUNDATION PRIMARILY MAKES GRANTS TO THE UNITED
NATIONS AND ITS RELATED/AFFILIATED AGENCIES AS WELL AS OTHER
ORGANIZATIONS IN SUPPORT OF OUR MISSION. MONITORING OF FUNDS GRANTED TO
THOSE AGENCIES AND ORGANIZATIONS CONSISTS PRIMARILY OF GRANT REPORTS
RECEIVED QUARTERLY, SEMIANNUALLY OR ANNUALLY AS STIPULATED IN THE GRANT
AGREEMENTS. FROM TIME TO TIME THE UNITED NATIONS FOUNDATION ALSO REQUIRES
INTERMITTENT UPDATES FROM GRANTEES TO MONITOR THE DISTRIBUTION OF
GRANT-RELATED RESOURCES AND ASSESS THE EFFECTIVENESS AND PROGRESS OF
GRANT ACTIVITIES.

SCHEDULE G
(Form 990)

Department of the Treasury
Internal Revenue Service

Name of the organization

UNITED NATIONS FOUNDATION, INC.

Supplemental Information Regarding Fundraising or Gaming Activities

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

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2023

Open to Public
Inspection

Employer identification number

58-2368165

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

1 Indicate whether the organization raised funds through any of the following activities. Check all that apply.

- a ☒ Mail solicitations e ☒ Solicitation of non-government grants
b ☒ Internet and email solicitations f ☒ Solicitation of government grants
c ☐ Phone solicitations g ☐ Special fundraising events
d ☒ In-person solicitations

- 2a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? ☒ Yes ☐ No
b If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
SEE SUPPLEMENT INFORMATION 1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
Total					643,981.	

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

AL, AK, AZ, AR, CA, CO, CT, DE, FL, GA, HI, ID, IL, IN,
IA, KS, KY, LA, ME, MD, MA, MI, MN, MS, MO, MT, NE, NV, NH, NJ, NM, NY, NC, ND, OH,
OK, OR, PA, RI, SC, SD, TN, TX, UT, VT, VA, WA, WV, WI, WY,

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

		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events
		WE THE PEOPLES (event type)	(event type)	NONE (total number)	(add col. (a) through col. (c))
Revenue	1 Gross receipts	577,320.			577,320.
	2 Less: Contributions				
	3 Gross income (line 1 minus line 2)	577,320.			577,320.
Direct Expenses	4 Cash prizes				
	5 Noncash prizes				
	6 Rent/facility costs				
	7 Food and beverages				
	8 Entertainment				
	9 Other direct expenses	134,350.			134,350.
	10 Direct expense summary. Add lines 4 through 9 in column (d)				134,350.
11 Net income summary. Subtract line 10 from line 3, column (d)				442,970.	

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

	(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
Revenue				
1 Gross revenue				
Direct Expenses				
6 Volunteer labor	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	
7 Direct expense summary. Add lines 2 through 5 in column (d)				
8 Net gaming income summary. Subtract line 7 from line 1, column (d)				

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

a Is the organization licensed to conduct gaming activities in each of these states? ☐ Yes ☐ No

b If "No," explain: _____

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

b If "Yes," explain: _____

- 11 Does the organization conduct gaming activities with nonmembers? ☐ Yes ☐ No
- 12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming? ☐ Yes ☐ No
- 13 Indicate the percentage of gaming activity conducted in:
- | | | |
|-------------------------------|-----|---|
| a The organization's facility | 13a | % |
| b An outside facility | 13b | % |
- 14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name ▶ _____

Address ▶ _____

- 15 a Does the organization have a contract with a third party from whom the organization receives gaming revenue? ☐ Yes ☐ No
- b If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ _____ and the amount of gaming revenue retained by the third party ▶ \$ _____.
- c If "Yes," enter name and address of the third party:

Name ▶ _____

Address ▶ _____

16 Gaming manager information:

Name ▶ _____

Gaming manager compensation ▶ \$ _____

Description of services provided ▶ _____

☐ Director/officer ☐ Employee ☐ Independent contractor

17 Mandatory distributions:

- a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? ☐ Yes ☐ No
- b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$ _____

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

FORM 990, SCHEDULE G, LINE 2B - HIGHEST PAID INDIVIDUALS/ENTITIES

=====

NAME:

ELIASSON SCHAMIS GROUP

ADDRESS:

2829 29TH STREET NW
WASHINGTON, DC 20008

ACTIVITY :

INTERNET/ DIRECT MAIL

CUSTODY OR CONTROL OF CONTRIBUTION?

NO

AMOUNT PAID TO (OR RETAINED BY) FUNDRAISER : 574,116.

NAME:

INTEGRATED DIRECT MARKETING

ADDRESS:

1250 CONNECTICUT AVENUE NW SUITE 700
WASHINGTON, DC 20036

ACTIVITY :

INTERNET/ DIRECT MAIL

CUSTODY OR CONTROL OF CONTRIBUTION?

NO

AMOUNT PAID TO (OR RETAINED BY) FUNDRAISER : 69,865.

SCHEDULE I
(Form 990)

Department of the Treasury
Internal Revenue Service

Grants and Other Assistance to Organizations,
Governments, and Individuals in the United States
Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.
Attach to Form 990.
Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2023

Open to Public
Inspection

Name of the organization

UNITED NATIONS FOUNDATION, INC.

Employer identification number

58-2368165

Part I General Information on Grants and Assistance

- 1 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? ☒ Yes ☐ No
- 2 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.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) AMERICAN ASSOCIATION OF NURSE PRACTITIONERS P.O. BOX 12846 AUSTIN, TX 78711	22-2547543	501 (C) (6)	30,000.		N/A	N/A	GLOBAL HLTH
(2) BERKELEY AIR MONITORING GROUP 1935 ADDISON STREET BERKELEY, CA 94704			35,000.		N/A	N/A	ENVIRONMENT
(3) BIOLITE, INC. 65 JAY ST 4TH FLOOR BROOKLYN, NY 11201	27-2826296		42,494.		N/A	N/A	ENVIRONMENT
(4) BROOKINGS INSTITUTION 1775 MASSACHUSETTS AVE NW	53-0196577	501 (C) (3)	60,000.		N/A	N/A	UN STRNGTHNG
(5) BURN MANUFACTURING CO. 18850 103RD AVE VASHON, WA 98070	45-3247706		20,000.		N/A	N/A	ENVIRONMENT
(6) CARE, USA 151 ELLIS NE ATLANTA, GA 30303	13-1685039	501 (C) (3)	150,000.		N/A	N/A	ADVOCACY
(7) COLORADO STATE UNIVERSITY 430 N COLLEGE AVE FORT COLLINS, CO 80524	23-7098397	501 (C) (3)	60,000.		N/A	N/A	ENVIRONMENT
(8) DUKE UNIVERSITY BOX 96559 DUKE UNIV DURHAM, NC 27708	56-0532129	501 (C) (3)	25,000.		N/A	N/A	ENVIRONMENT
(9) FRIENDS OF THE WORLD FOOD PROGRAM, INC. 1725 I ST NW STE 510 WASHINGTON, DC 20006			200,031.		N/A	N/A	ENVIRONMENT
(10) GENERAL FEDERATION OF WOMEN'S CLUBS (GFWC) 1734 N STREET NW WASHINGTON, DC 20036	53-0196514	501 (C) (3)	30,000.		N/A	N/A	GLOBAL HLTH
(11) GOVERNOR'S OFFICE, STATE OF COLORADO 200 E. COLFAX AVE STE 136 DENVER, CO 80203	84-0644739	GOVERNMENT	347,662.		N/A	N/A	ENVIRONMENT
(12) GREAT PLAINS INSTITUTE 2801 21ST AVE S STE 220	41-1921126	501 (C) (3)	205,000.		N/A	N/A	ENVIRONMENT

- 2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table 28
- 3 Enter total number of other organizations listed in the line 1 table 34

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

Schedule I (Form 990) 2023

Name of the organization
UNITED NATIONS FOUNDATION, INC.

Employer identification number
58-2368165

Part I

General Information on Grants and Assistance

- 1 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? ☐ Yes ☐ No
- 2 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.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) ILLINOIS GOVERNOR'S OFFICE 401 S SPRING ST 7TH FL	90-0110906	GOVERNMENT	50,000.		N/A	N/A	ENVIRONMENT
(2) INTERNATIONAL CENTER FOR RESEARCH ON WOMEN 1120 20TH STREET NW STE 500	52-1081455	501 (C) (3)	75,000.		N/A	N/A	ADVOCACY
(3) INTERNATIONAL COALITION OF GIRLS' SCHOOLS, P.O. BOX 5729 CHARLOTTESVILLE, VA 22905	04-3158798	501 (C) (3)	30,000.		N/A	N/A	GIRLS & WMN
(4) INTERNATIONAL LIFELINE FUND 1220 L STREET NW WASHINGTON, DC 20005	81-0629010	501 (C) (3)	30,000.		N/A	N/A	ENVIRONMENT
(5) LOCAL FIRST ARIZONA FOUNDATION DBA LOCAL FI 407 E ROOSEVELT ST PHOENIX, AZ 85004	26-1657951	501 (C) (3)	37,500.		N/A	N/A	ENVIRONMENT
(6) MENENGAGE GLOBAL ALLIANCE 1725 I ST NW STE 300 WASHINGTON, DC 20006	81-1666828	501 (C) (3)	100,000.		N/A	N/A	ADVOCACY
(7) MOJALOOP FOUNDATION 401 EDGEWATER PLACE STE 600	85-0922903	501 (C) (3)	125,000.		N/A	N/A	UN STRNGTHNG
(8) NATIONAL ASSOCIATION OF PEDIATRIC NURSE PRA 5 HANOVER SQUARE STE 1401	23-7403934	501 (C) (6)	30,000.		N/A	N/A	GLOBAL HLTH
(9) NEW MEXICO ENERGY, MINERALS AND NATURAL RES 1220 S ST. FRANCIS DR SANTA FE, NM 87505	85-6000565	GOVERNMENT	205,500.		N/A	N/A	ENVIRONMENT
(10) NGO COMMITTEE ON THE STATUS OF WOMEN 777 UNITED NATIONS PLAZA NEW YORK, NY 10017	13-4124912	501 (C) (3)	100,000.		N/A	N/A	ADVOCACY
(11) NITHIO HOLDINGS, INC. 700 K ST NW STE 300 WASHINGTON, DC 20001	83-2790452		20,000.		N/A	N/A	ENVIRONMENT
(12) NORTH CAROLINA GOVERNOR'S OFFICE 20320 MAIL SVCS CTR RALEIGH, NC 27699-0320	56-1310675	GOVERNMENT	138,666.		N/A	N/A	ENVIRONMENT

- 2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table
- 3 Enter total number of other organizations listed in the line 1 table

Employer identification number
58-2368165

Part I

General Information on Grants and Assistance

- 1 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? ☐ Yes ☐ No
- 2 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.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) NORTHEAST STATES FOR COORDINATED AIR USE MG 89 SOUTH ST STE 602 BOSTON, MA 02111	04-2814018	501 (C) (3)	10,500.		N/A	N/A	ENVIRONMENT
(2) OREGON STATE UNIVERSITY 312 KERR ADMIN BLDG CORVALLIS, OR 97339	93-6022772		30,000.		N/A	N/A	ENVIRONMENT
(3) PAN AMERICAN HEALTH ORGANIZATION (PAHO) 525 23RD STREET NW WASHINGTON, DC 20037			118,500.		N/A	N/A	GLOBAL HLTH
(4) PANORAMA GLOBAL 2101 4TH AVE STE 2100 SEATTLE, WA 98121	81-4204119	501 (C) (3)	75,000.		N/A	N/A	ADVOCACY
(5) PLANNED PARENTHOOD FEDERATION OF AMERICA, I 123 WILLIAM STREET, 10TH FL	13-1644147	501 (C) (3)	225,000.		N/A	N/A	ADVOCACY
(6) POPULATION ACTION INTERNATIONAL (PAI) 1300 19TH ST NW STE 200	52-0812075	501 (C) (3)	150,000.		N/A	N/A	ADVOCACY
(7) POPULATION COUNCIL ONE DAG HAMMARSKJOLD PLAZA	13-1687001	501 (C) (3)	951,310.		N/A	N/A	ADVOCACY
(8) RADIKAL 12 GLEN ROAD WEST HEMPSTEAD, NY 11552			85,000.		N/A	N/A	ENVIRONMENT
(9) SAVE THE CHILDREN 777 UNITED NATIONS PLZ STE 3A	06-0726487	501 (C) (3)	619,515.		N/A	N/A	ADVOCACY
(10) STUDENT NATIONAL PHARMACEUTICAL ASSOCIATION P.O. BOX 2141 WEST MONROE, LA 71294	31-1175939	501 (C) (3)	20,000.		N/A	N/A	GLOBAL HLTH
(11) THE MIFOS INITIATIVE 4505 PACIFIC HWY E STE C-2 FIFE, WA 98424	45-3613178	501 (C) (3)	125,000.		N/A	N/A	UN STRNGTHNG
(12) THE PRAXIS PROJECT P.O. BOX 7259 OAKLAND, CA 94061	30-0044814	501 (C) (3)	150,000.		N/A	N/A	ADVOCACY

- 2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table
- 3 Enter total number of other organizations listed in the line 1 table

SCHEDULE I
(Form 990)

Department of the Treasury
Internal Revenue Service

Grants and Other Assistance to Organizations,
Governments, and Individuals in the United States
Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.
Attach to Form 990.
Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2023

Open to Public
Inspection

Name of the organization

UNITED NATIONS FOUNDATION, INC.

Employer identification number

58-2368165

Part I General Information on Grants and Assistance

- 1 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? ☐ Yes ☐ No
- 2 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.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) UNITED NATIONS ENTITY FOR GENDER EQUALITY A 220 EAST 42ND ST NEW YORK, NY 10017			40,000.		N/A	N/A	GIRLS & WMN
(2) UNITED NATIONS FUND FOR INTERNATIONAL PARTN 1 UNITED NATIONS PLAZA, RM. DC1-1328			93,458.		N/A	N/A	ADVOCACY
(3) UNITED NATIONS FUND FOR INTERNATIONAL PARTN 1 UNITED NATIONS PLAZA, RM. DC1-1328			234,375.		N/A	N/A	ADVOCACY
(4) UNITED NATIONS FUND FOR INTERNATIONAL PARTN 1 UNITED NATIONS PLAZA, RM. DC1-1328			1,107,450.		N/A	N/A	ENVIRONMENT
(5) UNITED NATIONS FUND FOR INTERNATIONAL PARTN 1 UNITED NATIONS PLAZA, RM. DC1-1328			3,833,130.		N/A	N/A	ENVIRONMENT
(6) UNITED NATIONS FUND FOR INTERNATIONAL PARTN 1 UNITED NATIONS PLAZA, RM. DC1-1328			200,000.		N/A	N/A	GIRLS & WMN
(7) UNITED NATIONS FUND FOR INTERNATIONAL PARTN 1 UNITED NATIONS PLAZA, RM. DC1-1328			341,214.		N/A	N/A	GIRLS & WMN
(8) UNITED NATIONS FUND FOR INTERNATIONAL PARTN 1 UNITED NATIONS PLAZA, RM. DC1-1328			232,690.		N/A	N/A	GIRLS & WMN
(9) UNITED NATIONS FUND FOR INTERNATIONAL PARTN 1 UN PLAZA, RM. DC1-1328 NEW YORK, NY 10017			386,326.		N/A	N/A	GIRLS & WMN
(10) UNITED NATIONS FUND FOR INTERNATIONAL PARTN 1 UNITED NATIONS PLAZA, RM. DC1-1328			2,922,422.		N/A	N/A	GLOBAL HLTH
(11) UNITED NATIONS FUND FOR INTERNATIONAL PARTN 1 UNITED NATIONS PLAZA, RM. DC1-1328			814,847.		N/A	N/A	GLOBAL HLTH
(12) UNITED NATIONS FUND FOR INTERNATIONAL PARTN 1 UNITED NATIONS PLAZA, RM. DC1-1328			111,875.		N/A	N/A	GLOBAL HLTH

- 2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table
- 3 Enter total number of other organizations listed in the line 1 table

SCHEDULE I
(Form 990)

Department of the Treasury
Internal Revenue Service

Grants and Other Assistance to Organizations,
Governments, and Individuals in the United States
Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.
Attach to Form 990.
Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2023

Open to Public
Inspection

Name of the organization

UNITED NATIONS FOUNDATION, INC.

Employer identification number

58-2368165

Part I General Information on Grants and Assistance

- 1 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? ☐ Yes ☐ No
- 2 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.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) UNITED NATIONS FUND FOR INTERNATIONAL PARTN 1 UNITED NATIONS PLAZA, RM. DC1-1328			500,000.		N/A	N/A	GLOBAL HLTH
(2) UNITED NATIONS FUND FOR INTERNATIONAL PARTN 1 UNITED NATIONS PLAZA, RM. DC1-1328			700,000.		N/A	N/A	GLOBAL HLTH
(3) UNITED NATIONS FUND FOR INTERNATIONAL PARTN 1 UNITED NATIONS PLAZA, RM. DC1-1328			1,741,591.		N/A	N/A	GLOBAL HLTH
(4) UNITED NATIONS FUND FOR INTERNATIONAL PARTN 1 UNITED NATIONS PLAZA, RM. DC1-1328			133,000.		N/A	N/A	GLOBAL HLTH
(5) UNITED NATIONS FUND FOR INTERNATIONAL PARTN 1 UNITED NATIONS PLAZA, RM. DC1-1328			737,848.		N/A	N/A	GLOBAL HLTH
(6) UNITED NATIONS FUND FOR INTERNATIONAL PARTN 1 UNITED NATIONS PLAZA, RM. DC1-1328			826,050.		N/A	N/A	UN STRNGTHNG
(7) UNITED NATIONS FUND FOR INTERNATIONAL PARTN 1 UNITED NATIONS PLAZA, RM. DC1-1328			200,627.		N/A	N/A	UN STRNGTHNG
(8) UNITED NATIONS FUND FOR INTERNATIONAL PARTN 1 UNITED NATIONS PLAZA, RM. DC1-1328			1,199,220.		N/A	N/A	UN STRNGTHNG
(9) UNITED NATIONS FUND FOR INTERNATIONAL PARTN 1 UNITED NATIONS PLAZA, RM. DC1-1328			352,415.		N/A	N/A	UN STRNGTHNG
(10) UNITED NATIONS FUND FOR INTERNATIONAL PARTN 1 UNITED NATIONS PLAZA, RM. DC1-1328			124,219.		N/A	N/A	UN STRNGTHNG
(11) UNITED NATIONS FUND FOR INTERNATIONAL PARTN 1 UNITED NATIONS PLAZA, RM. DC1-1328			46,500.		N/A	N/A	UN STRNGTHNG
(12) UNITED NATIONS FUND FOR INTERNATIONAL PARTN 1 UNITED NATIONS PLAZA, RM. DC1-1328			826,050.		N/A	N/A	UN STRNGTHNG

- 2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table
- 3 Enter total number of other organizations listed in the line 1 table

Employer identification number
58-2368165

Part I

General Information on Grants and Assistance

- 1 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? ☐ Yes ☐ No
- 2 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.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) WASHINGTON REGIONAL ASSOCIATION OF GRANTMAK 1100 NEW JERSEY AVE SE STE 710	52-1756853	501 (C) (3)	79,500.		N/A	N/A	ENVIRONMENT
(2) WISCONSIN DEPARTMENT OF ADMINISTRATION 101 E WILSON STREET, 6TH FL	39-6028867	GOVERNMENT	149,000.		N/A	N/A	ENVIRONMENT
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							

- 2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table
- 3 Enter total number of other organizations listed in the line 1 table

Part III

Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22.
Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
1					
2					
3					
4					
5					
6					
7					

Part IV

Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b); and any other additional information.

SCHEDULE I, PART I, LINE 1:

THE UNITED NATIONS FOUNDATION PRIMARILY MAKES GRANTS TO THE UNITED NATIONS AND ITS RELATED/AFFILIATED AGENCIES AS WELL AS OTHER ORGANIZATIONS IN SUPPORT OF OUR MISSION. MONITORING OF FUNDS GRANTED TO THOSE AGENCIES CONSISTS PRIMARILY OF GRANT REPORTS RECEIVED QUARTERLY, SEMIANNUALLY OR ANNUALLY AS STIPULATED IN THE GRANT AGREEMENTS. FROM TIME TO TIME, THE UNITED NATIONS FOUNDATION ALSO REQUIRES INTERMITTENT UPDATES FROM GRANTEES TO MONITOR THE DISTRIBUTION OF GRANT-RELATED RESOURCES AND ASSESS THE EFFECTIVENESS AND PROGRESS OF GRANT ACTIVITIES.

SCHEDULE J
(Form 990)

Department of the Treasury
Internal Revenue Service

Name of the organization

UNITED NATIONS FOUNDATION, INC.

Compensation Information

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

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

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

OMB No. 1545-0047

2023

Open to Public
Inspection

Employer identification number

58-2368165

Part I Questions Regarding Compensation

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.

- | | |
|--|--|
| <input checked="" type="checkbox"/> First-class or charter travel | <input type="checkbox"/> Housing allowance or residence for personal use |
| <input checked="" type="checkbox"/> Travel for companions | <input type="checkbox"/> Payments for business use of personal residence |
| <input type="checkbox"/> Tax indemnification and gross-up payments | <input type="checkbox"/> Health or social club dues or initiation fees |
| <input type="checkbox"/> Discretionary spending account | <input type="checkbox"/> 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

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?

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.

- | | |
|--|---|
| <input type="checkbox"/> Compensation committee | <input type="checkbox"/> Written employment contract |
| <input type="checkbox"/> Independent compensation consultant | <input checked="" type="checkbox"/> Compensation survey or study |
| <input type="checkbox"/> Form 990 of other organizations | <input checked="" type="checkbox"/> 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 organization or a related organization:

- a Receive a severance payment or change-of-control payment?
- b Participate in or receive payment from a supplemental nonqualified retirement plan?
- c 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.

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:

- a The organization?
- b Any related organization?
- 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:

- a The organization?
- b Any related organization?
- 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

8 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III

9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

Yes No

1b	X	
2	X	
4a		X
4b		X
4c		X
5a		X
5b		X
6a		X
6b		X
7		X
8		X
9		

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

Schedule J (Form 990) 2023

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

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

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

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC and/or 1099-NEC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)–(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
1 ELIZABETH COUSENS PRESIDENT & CEO	(i)	342,611.	NONE	40,372.	17,400.	25,814.	426,197.	NONE
	(ii)	60,461.	NONE	7,124.	NONE	4,555.	72,140.	NONE
2 HENRY F DE SIO JR. CHIEF OPERATING OFFICER	(i)	246,001.	NONE	44,625.	17,400.	16,249.	324,275.	NONE
	(ii)	43,412.	NONE	7,875.	NONE	2,868.	54,155.	NONE
3 LESLIE A EDMOND CHIEF PEOPLE OFFICER	(i)	250,540.	NONE	19,125.	17,400.	8,054.	295,119.	NONE
	(ii)	44,213.	NONE	3,375.	NONE	1,421.	49,009.	NONE
4 DYMPHNA VAN DER LANS CHIEF EXECUTIVE OFFICER, CCA	(i)	281,824.	NONE	46,080.	17,400.	28,445.	373,749.	NONE
	(ii)	NONE	NONE	NONE	NONE	NONE	NONE	NONE
5 MICHELLE MORSE VP FOR GIRLS & WOMEN STRATEGY	(i)	278,061.	NONE	39,000.	17,400.	26,699.	361,160.	NONE
	(ii)	NONE	NONE	NONE	NONE	NONE	NONE	NONE
6 SOFIA BORGES SENIOR VICE PRESIDENT	(i)	289,296.	NONE	22,500.	13,680.	NONE	325,476.	NONE
	(ii)	NONE	NONE	NONE	NONE	NONE	NONE	NONE
7 OGDEN PETER VP FOR CLIMATE, ENRG & ENVRN	(i)	282,727.	NONE	11,760.	17,400.	7,604.	319,491.	NONE
	(ii)	NONE	NONE	NONE	NONE	NONE	NONE	NONE
8 KATHERINE DODSON SR ADVISOR GLOBAL HEALTH	(i)	273,888.	NONE	11,550.	17,325.	28,445.	331,208.	NONE
	(ii)	NONE	NONE	NONE	NONE	NONE	NONE	NONE
9	(i)							
	(ii)							
10	(i)							
	(ii)							
11	(i)							
	(ii)							
12	(i)							
	(ii)							
13	(i)							
	(ii)							
14	(i)							
	(ii)							
15	(i)							
	(ii)							
16	(i)							
	(ii)							

Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

SCHEDULE J, PART I, LINE 1A

THE TRAVEL EXPENSES OF THE PRESIDENT'S SPOUSE WERE COVERED WHEN ATTENDING
OFFICIAL BUSINESS FUNCTIONS.

BOARD MEMBERS AND THEIR SPOUSES WERE REIMBURSED FOR AIRFARE, HOTEL,
MEALS, AND INCIDENTAL TAXIS OR OTHER TRANSPORTATION WHEN ATTENDING BOARD
MEETINGS OR TRAVELING ON BEHALF OF THE FOUNDATION, AS MAY BE REQUESTED BY
THE CHAIRMAN OR PRESIDENT FROM TIME TO TIME.

**SCHEDULE M
(Form 990)**

Department of the Treasury
Internal Revenue Service

Noncash Contributions

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.

OMB No. 1545-0047

2023

**Open to Public
Inspection**

Name of the organization

UNITED NATIONS FOUNDATION, INC.

Employer identification number

58-2368165

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art - Works of art				
2 Art - Historical treasures				
3 Art - Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities - Publicly traded	X	7	4,807,885.	FMV
10 Securities - Closely held stock				
11 Securities - Partnership, LLC, or trust interests				
12 Securities - Miscellaneous				
13 Qualified conservation contribution - Historic structures				
14 Qualified conservation contribution - Other				
15 Real estate - Residential				
16 Real estate - Commercial				
17 Real estate - Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ()				
26 Other ()				
27 Other ()				
28 Other ()				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part V, Donee Acknowledgement **29** NONE

	Yes	No
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least 3 years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period?		X
b If "Yes," describe the arrangement in Part II.		
31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?	X	
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?	X	
b If "Yes," describe in Part II.		
33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.		

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

Schedule M (Form 990) 2023

Part II **Supplemental Information.** Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

SCHEDULE M, PART I, COLUMN (B) :

AMOUNTS REPORTED IN PART I, COLUMN (B) REPRESENT THE NUMBER OF ITEMS
CONTRIBUTED AND NOT THE NUMBER OF CONTRIBUTIONS.

SCHEDULE M, PART I, LINE 32B:

THE UNITED NATIONS FOUNDATION ENTERS INTO AGREEMENTS WITH THIRD-PARTY
VENDORS/INSTITUTIONS/ORGANIZATIONS TO ASSIST WITH THE SALE OF
SOPHISTICATED GIFTS RECEIVED, SUCH AS WORKS OF ART, SECURITIES, AND THE
LIKE.

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Name of the organization

UNITED NATIONS FOUNDATION, INC.

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 990-EZ.

▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2023

**Open to Public
Inspection**

Employer identification number

58-2368165

FORM 990, PART I, LINE 1 - ORGANIZATION'S MISSION

UNF SUPPORTS THE UN AND UN CAUSES AND ACTIVITIES. WE ARE AN ADVOCATE FOR
THE UN AND A PLATFORM FOR GENERATING IDEAS, RESOURCES, AND PARTNERSHIPS
TO HELP THE UN SOLVE GLOBAL PROBLEMS AND UNDERTAKE LIFESAVING ACTIVITIES.

FORM 990, PART III, LINE 4D - PROGRAM SERVICES ACTIVITIES #4 & 5

UNITED NATIONS STRENGTHENING: THE UNITED NATIONS FOUNDATION SUPPORTS THE
UNITED NATIONS AND UN INITIATIVES TO ADVANCE A SAFER, FAIRER, AND
HEALTHIER WORLD, INCLUDING IN THE CONTEXT OF THE SUSTAINABLE DEVELOPMENT
GOALS UNIVERSALLY AGREED UPON IN 2015. IT WORKS WITH A WIDE NETWORK OF
PARTNERS TO ENCOURAGE INNOVATION ACROSS THE UN SYSTEM AND GENERATE FRESH
IDEAS, RESOURCES, AND PARTNERSHIPS TO PROMOTE EFFECTIVE COOPERATION TO
ADDRESS HUMANITY'S MOST PRESSING PROBLEMS, INCLUDING THROUGH ADVOCACY.

EXPENSES: \$22,013,019 GRANTS: \$7,733,211 REVENUE: \$1,043,608

ADVOCACY: THE UNITED NATIONS FOUNDATION ENGAGES IN PUBLIC EDUCATION AND
ADVOCACY ABOUT THE ROLE AND VALUE OF THE UNITED NATIONS IN ADDRESSING
HUMANITY'S MOST PRESSING PROBLEMS. WE ENCOURAGE COOPERATION BETWEEN THE
UNITED NATIONS AND U.S. GOVERNMENT, UNDERSTANDING ABOUT THE UN AMONG THE
AMERICAN PUBLIC, AND PAYMENT OF U.S. DUES TO THE UNITED NATIONS ON TIME
AND IN FULL.

THE UNITED NATIONS FOUNDATION PRIMARILY MAKES GRANTS TO THE UNITED
NATIONS AND ITS RELATED/AFFILIATED AGENCIES AS WELL AS OTHER
ORGANIZATIONS IN SUPPORT OF OUR MISSION.

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Name of the organization

UNITED NATIONS FOUNDATION, INC.

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 990-EZ.

► Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

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Inspection**

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EXPENSES: \$842,112 GRANTS: \$327,833 REVENUE: \$ 10,879

FORM 990, PART VI, LINE 2:

LAURA TURNER SEYDEL IS THE DAUGHTER OF R. E. TURNER AND SPOUSE OF
RUTHERFORD SEYDEL.

R. E. TURNER IS FATHER OF LAURA TURNER SEYDEL AND FATHER-IN-LAW OF
RUTHERFORD SEYDEL.

RUTHERFORD SEYDEL IS SPOUSE TO LAURA TURNER SEYDEL AND SON-IN-LAW TO R.
E. TURNER.

FORM 990, PART VI, LINE 11B:

THE DRAFT FORM IS REVIEWED BY THE CHIEF FINANCIAL OFFICER, THE CHIEF
OPERATING OFFICER, THE CHIEF EXECUTIVE OFFICER AND RELEVANT MEMBERS OF
THE BOARD OF DIRECTORS, AND THE ORGANIZATION'S LEGAL COUNSEL. THE
FINALIZED DRAFT, INCORPORATING ANY CHANGES OR COMMENTS, IS FILED WITH THE
IRS AND POSTED ON OUR WEBSITE.

FORM 990, PART VI, LINE 12C:

OFFICERS, DIRECTORS OR TRUSTEES, AND KEY EMPLOYEES ARE REQUIRED TO
DISCLOSE IN WRITING INTERESTS THAT COULD GIVE RISE TO CONFLICTS ANNUALLY
OR WHEN CIRCUMSTANCES CHANGE. THESE CIRCUMSTANCES ARE REVIEWED BY
MANAGEMENT ON AN ON-GOING BASIS IN THE COURSE OF OUR DAY-TO-DAY
OPERATIONS. WHEN A CONFLICT OF INTEREST ARISES, RECUSAL FROM THE
DECISIONS AND DELIBERATION IS REQUIRED. THERE WERE NO SUCH CIRCUMSTANCES
IN THE PERIOD COVERED BY THIS REPORT.

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Name of the organization

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 990-EZ.

► Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

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**Open to Public
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Employer identification number

UNITED NATIONS FOUNDATION, INC.

58-2368165

FORM 990, PART VI, LINES 15A & 15B:

ANY CHANGES TO THE PRESIDENT'S COMPENSATION REQUIRE BOARD APPROVAL. THE
BOARD REVIEWS THE PRESIDENT'S COMPENSATION ANNUALLY AND IT WAS LAST
REVIEWED IN JANUARY 2023. COMPARABLE DATA FROM PEER ORGANIZATIONS IS USED
IN DETERMINING THE PRESIDENT'S COMPENSATION. ANY CHANGES TO THE
PRESIDENT'S COMPENSATION ARE DOCUMENTED BY THE ORGANIZATION. FOR
APPLICABLE OFFICERS AND FOR KEY EMPLOYEES, COMPENSATION IS DETERMINED
BASED ON QUALIFICATIONS, DUTIES AND SALARIES PAID BY PEER ORGANIZATIONS.

FORM 990, PART VI, LINE 19:

THE GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AUDITED FINANCIAL
STATEMENTS AND FORM 990S ARE AVAILABLE ON OUR WEBSITE.

FORM 990, PART XI, LINE 9:

OTHER CHANGES IN NET ASSETS:

UR FOREIGN EXCHANGE GAIN/(LOSS): \$290,227

Name of the organization

UNITED NATIONS FOUNDATION, INC.

Employer identification number

58-2368165

FORM 990, PART III, LINE 4D - OTHER PROGRAM SERVICES

=====

DESCRIPTION -----	GRANTS -----	EXPENSES -----	REVENUE -----
ADVOCACY	327,833.	842,112.	10,879.
UN STRENGTHENING	7,733,211.	22,013,019.	1,043,608.
	-----	-----	-----
TOTALS	8,061,044.	22,855,131.	1,054,487.
	=====	=====	=====

Name of the organization

UNITED NATIONS FOUNDATION, INC.

Employer identification number

58-2368165

FORM 990, PART VI, LINE 17 - STATES
=====

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

Name of the organization

Employer identification number

UNITED NATIONS FOUNDATION, INC.

58-2368165

FORM 990, PART VII-COMPENSATION OF THE 5 HIGHEST PAID IND. CONTRACTORS

NAME AND ADDRESS -----	DESCRIPTION OF SERVICES -----	COMPENSATION -----
VELOCITY GLOBAL 3858 WALNUT STREET, SUITE 101-107 DENVER, CO 80205	CONSULTANT	1,738,602.
PRICEWATERHOUSECOOPERS 7 MORE LONDON RIVERSIDE LONDON UNITED KINGDOM SE1 2RT	CONSULTANT	841,450.
ELIASSON GROUP 2829 29TH ST NW WASHINGTON, DC 20008	CONSULTANT	558,358.
DAVIS, PICKREN, SEYDEL & SNEED LLP 285 PEACHTREE CTR AVE, NE ATLANTA, GA 30303	CONSULTANT	432,820.
EVENT MANAGEMENT GROUP 930 COUNTY ROAD 139 GAINESVILLE, TX 76240	CONSULTANT	331,806.

Name of the organization

UNITED NATIONS FOUNDATION, INC.

Employer identification number

58-2368165

FORM 990, PART IX - OTHER FEES

=====

DESCRIPTION	(A) TOTAL FEES	(B) PROGRAM SERVICE EXP.	(C) MANAGEMENT AND GENERAL	(D) FUNDRAISING EXPENSES
-----	-----	-----	-----	-----
OTHER PROFESSIONAL FEES	32,071,167.	28,840,230.	1,521,424.	1,709,513.
TOTALS	----- 32,071,167. =====	----- 28,840,230. =====	----- 1,521,424. =====	----- 1,709,513. =====

Name of the organization

UNITED NATIONS FOUNDATION, INC.

Employer identification number

58-2368165

FORM 990, PART X - PREPAID EXPENSES AND DEFERRED CHARGES

=====

DESCRIPTION -----	ENDING BOOK VALUE -----
PREPAID EXPENSES	188,010.
TOTALS	----- 188,010. =====

Name of the organization

UNITED NATIONS FOUNDATION, INC.

Employer identification number

58-2368165

FORM 990, PART X - INVESTMENTS - PUBLICLY TRADED SECURITIES

=====

DESCRIPTION	ENDING BOOK VALUE	COST OR FMV
-----	-----	-----
PUBLICLY TRADED SECURITIES	74,781,307.	

TOTALS	74,781,307.	
	=====	

SCHEDULE R
(Form 990)

Department of the Treasury
Internal Revenue Service

Name of the organization

UNITED NATIONS FOUNDATION, INC.

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.

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

OMB No. 1545-0047

2023

Open to Public
Inspection

Employer identification number

58-2368165

Part I Identification of Disregarded Entities. Complete 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 assets	(f) Direct controlling entity
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					

Part II Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related tax-exempt 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 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No
(1) BETTER WORLD FUND 1750 PENNSYLVANIA AVENUE NW WASHINGTON, DC 20006 58-2366765	SUPPORT OF UN	GA	501 (C) (3)	7	UNF	X	
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							

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

Schedule R (Form 990) 2023

Part III 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.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512 - 514)	(f) Share of total income	(g) Share of end-of- year assets	(h) Disproportionate allocations?		(i) Code V - UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	
(1)												
(2)												
(3)												
(4)												
(5)												
(6)												
(7)												

Part IV 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) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?	
								Yes	No
(1)									
(2)									
(3)									
(4)									
(5)									
(6)									
(7)									

Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.**Note:** 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 related organizations listed in Parts II-IV?		
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	1a	X
b Gift, grant, or capital contribution to related organization(s)	1b	X
c Gift, grant, or capital contribution from related organization(s)	1c	X
d Loans or loan guarantees to or for related organization(s)	1d	X
e 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)	1h	X
i Exchange of assets with related organization(s)	1i	X
j Lease of facilities, equipment, or other assets to related organization(s)	1j	X
k Lease of facilities, equipment, or other assets from related organization(s)	1k	X
l Performance of services or membership or fundraising solicitations for related organization(s)	1l	X
m Performance of services or membership or fundraising solicitations by related organization(s)	1m	X
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n	X
o Sharing of paid employees with related organization(s)	1o	X
p Reimbursement paid to related organization(s) for expenses	1p	X
q Reimbursement paid by related organization(s) for expenses	1q	X
r Other transfer of cash or property to related organization(s)	1r	X
s Other transfer of cash or property from related organization(s)	1s	X
2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.		

(a) Name of related organization	(b) Transaction type (a - s)	(c) Amount involved	(d) Method of determining amount involved
(1) BETTER WORLD FUND	Q	6,825,798.	GAAP
(2)			
(3)			
(4)			
(5)			
(6)			

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)	(e) Are all partners section 501(c)(3) organizations?		(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V - UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
				Yes	No			Yes	No		Yes	No	
(1)													
(2)													
(3)													
(4)													
(5)													
(6)													
(7)													
(8)													
(9)													
(10)													
(11)													
(12)													
(13)													
(14)													
(15)													
(16)													

Part VII**Supplemental Information**

Provide additional information for responses to questions on Schedule R. See instructions.