2023 Filing Instructions GIRLS EDUCATION COLLABORATIVE INC Tax year ending 12-31-2023

Form filed:

Form 990 and supplemental forms and schedules

Filing method:

The return has been e-filed, do not mail.

Due date:

05-15-2024

The return reflects neither a refund nor a balance due.

Please note:

The Taxpayer First Act requires tax-exempt organizations to electronically file all information returns in the 990 series and related forms for tax years beginning after July 1, 2019. Mailing these returns is no longer allowed.

Form **990**

Return of Organization Exempt From Income Tax

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

OMB No. 1545-0047

Open to Public Do not enter social security numbers on this form as it may be made public. Department of the Treasury Inspection Go to www.irs.gov/Form990 for instructions and the latest information. Internal Revenue Service For the 2023 calendar year, or tax year beginning 2023, and ending 20 GIRLS EDUCATION COLLABORATIVE INC Check if applicable: C Name of organization D Employer identification number Address change Doing business as 61-1578303 E Telephone number Name change Number and street (or P.O. box if mail is not delivered to street address) Room/suite Initial return 657 PERSONS ST (716)725-8869 Final return/terminated City or town, state or province, country, and ZIP or foreign postal code G Gross receipts Amended return EAST AURORA, NY 14052 592,628 Application pending F Name and address of principal officer: ANNE WADSWORTH **H(a)** Is this a group return for subordinates? X No SAME AS C ABOVE H(b) Are all subordinates included? **X** 501(c)(3) 501(c) (4947(a)(1) or 527 If "No," attach a list. See instructions Tax-exempt status: WWW.GEG.NGO Website: H(c) Group exemption number X Corporation Association L Year of formation: 2012 M State of legal domicile: Part I Summary Briefly describe the organization's mission or most significant activities: GEC FINANCIALLY AND TECHNICALLY SUPPORTS LOCALLY - LED GLOBAL GIRLS EDUCATION INITIATIVES FOR GIRLS AT RISK OF BEING OUT OF SCHOOL DUE Activities & Governance TO SOCIAL, ECONOMIC AND GENDER BASED BARRIERS Check this box if the organization discontinued its operations or disposed of more than 25% of its net assets. Number of voting members of the governing body (Part VI, line 1a) 3 Number of independent voting members of the governing body (Part VI, line 1b) 4 Total number of individuals employed in calendar year 2023 (Part V, line 2a) 5 2 Total number of volunteers (estimate if necessary) 6 5 Total unrelated business revenue from Part VIII, column (C), line 12 0 **b** Net unrelated business taxable income from Form 990-T, Part I, line 11 7b 0 **Prior Year Current Year** Contributions and grants (Part VIII, line 1h) 394,764 590,201 Revenue 0 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 10 536 2,427 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 0 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 12 395,300 592,628 313,859 74,355 Benefits paid to or for members (Part IX, column (A), line 4) Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 131,801 126,313 Expenses 16a Professional fundraising fees (Part IX, column (A), line 11e) Total fundraising expenses (Part IX, column (D), line 25) Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 114,269 81,313 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 320,425 521,485 74,875 71,143 **Beginning of Current Year** End of Year Net Assets or Fund Balanc 20 285,885 353,661 21 Total liabilities (Part X, line 26) 5,127 1,760 22 Net assets or fund balances. Subtract line 21 from line 20 280,758 351,901 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 ANNE WADSWORTH Sign Signature of officer Date Here ANNE WADSWORTH, EXECUTIVE DIRECTOR Type or print name and title Print/Type preparer's name Preparer's signature Date PTIN **Paid** SAM PEWU, EA 03-19-2025 self-employed P02411194 Preparer Firm's name BLUE FOX Firm's EIN **Use Only** 2542 WOODFIELD CIR Firm's address Phone no. MELBOURNE FL 32904 321-233-3311

May the IRS discuss this return with the preparer shown above? See instructions

No

Yes

Page 2

Part IV

61-1578303

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," 1 X 2 2 Х 3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to 3 X 4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) 4 X Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, 5 assessments, or similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III. 5 X Did the organization maintain any donor advised funds or any similar funds or accounts for which donors 6 have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If 6 X 7 Did the organization receive or hold a conservation easement, including easements to preserve open space. 7 X 8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," 8 X Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a 9 custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or 9 X 10 Did the organization, directly or through a related organization, hold assets in donor-restricted endowments 10 Х 11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X, as applicable. a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," 11a Х b Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more 11b X c Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more 11c X d Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets 11d X e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 11e X Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part.X. 11f X 12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes." complete Schedule D, Parts XI and XII 12a X **b** Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional • • • • • • • 12b X 13 13 X 14a X 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 14b Х 15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or 15 X 16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other 16 X Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on 17 17 X 18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on 18 X Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? 19 19 X 20a 20a X 20b 21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or 21 X

Part IV

GIRLS EDUCATION COLLABORATIVE INC 61-1578303 Checklist of Required Schedules (continued)

			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23		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? If "Yes," answer lines 24b			
	through 24d and complete Schedule K. If "No," go to line 25a	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
	to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior			
	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?			
	If "Yes," complete Schedule L, Part I	25b		<u> </u>
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part. II	26		<u> </u>
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key			
	employee, creator or founder, substantial contributor or employee thereof, a grant selection committee			
	member, or to a 35% controlled entity (including an employee thereof) or family member of any of these			
••	persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (See the Schedule			
_	L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions).			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV	200		
h	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28a 28b		<u>X</u>
b		200		<u> </u>
С	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If "Yes," complete Schedule L, Part IV	28c		
20	Did the organization receive more than \$25,000 in noncash contributions? If "Yes," complete Schedule M	29		<u> </u>
29 30	Did the organization receive more than \$25,000 in noncash contributions? If res, complete schedule with the contributions of art, historical treasures, or other similar assets, or qualified	29		<u> </u>
30	conservation contributions? If "Yes," complete Schedule M	30		v
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part J</i>	31		X X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes,"</i>	31		
52	complete Schedule N. Part II	32		x
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	<u> </u>		
00	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part L	33		x
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III,			
٠.	or IV, and Part V, line 1	34		x
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		x
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a			
	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		x
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable			
	related organization? If "Yes," complete Schedule R, Part V, line 2	36		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? If "Yes," complete Schedule R, Part.VI	37		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	38	x	
Par				
	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and			
	reportable gaming (gambling) winnings to prize winners?	1c	Х	

Par	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			
	, , , , , , , , , , , , , , , , , , , ,	2		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		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	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over,			
	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X
b	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
	and services provided to the payor?	7a		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year	_		
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? • • • • • • • • • • • • • • • • • • •	7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? • • • •	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? • • • • • • • • • • • • • • • • • • •	7h		X
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
_	sponsoring organization have excess business holdings at any time during the year?	8		X
9	Sponsoring organizations maintaining donor advised funds.	00		-
a	Did the sponsoring organization make any taxable distributions under section 4966?	9a 9b		X
b 10	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	90		X
10	Section 501(c)(7) organizations. Enter: Initiation fees and capital contributions included on Part VIII, line 12			
a b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	_		
11	Section 501(c)(12) organizations. Enter:			
a	Gross income from members or shareholders			
b	Gross income from other sources. (Do not net amounts due or paid to other sources	_		
-	against amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note: See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which			
	the organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		x
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule Q	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			
	excess parachute payment(s) during the year?	15		X
	If "Yes," see the instructions and file Form 4720, Schedule N.			
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		X
	If "Yes," complete Form 4720, Schedule O.			
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?	17		
	If "Yes," complete Form 6069.			

Part VI

Se	ction A. Governing Body and Management			
1-	Enter the number of voting members of the governing hads at the and of the toy very		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	_		
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar			
	committee, explain on Schedule O.			
b	Enter the number of voting members included in line 1a, above, who are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with	-		
-	any other officer, director, trustee, or key employee?	2		х
3	Did the organization delegate control over management duties customarily performed by or under the direct	_		Λ
•	supervision of officers, directors, trustees, or key employees to a management company or other person?	3		x
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets? • • • • • • • • • • • • • • • • • • •	5		x
6	Did the organization have members or stockholders?	6		х
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint			
	one or more members of the governing body?	7a		x
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,			
	stockholders, or persons other than the governing body?	7b		x
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			
	the year by the following:			
а	The governing body?	8a	х	
b	Each committee with authority to act on behalf of the governing body?	8b	х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at			
	the organization's mailing address? If "Yes," provide the names and addresses on Schedule Q	9		х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			ı
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		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?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	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	12a	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? • •	12b	X	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"	40-		
40	describe on Schedule O how this was done	12c	X	
13	Did the organization have a written whistleblower policy?	13		X
14 15	Did the organization have a written document retention and destruction policy?	14		X
13	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	x	
b	Other officers or key employees of the organization	15b	X	
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.	.55	Α	
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement			
. • •	with a taxable entity during the year?	16a		х
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its			
	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the			
	organization's exempt status with respect to such arrangements?	16b		х
Sec	tion C. Disclosure			ı
17	List the states with which a copy of this Form 990 is required to be filed New York			
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.			
	▼ ■ 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.			
	ANNE WADSWORTH (716)725-8869, 657 PERSONS ST, EAST AURORA, NY 14052			

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

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

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

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

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

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

o	(B) Average hours per week (list any hours for related organizations below dotted line)	box,	er and	pers	tion ore that on is	both an trustee)	(D) Reportable compensation from the organization (W-2/1099-NISC/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
Name and title	Average hours per week (list any hours for related organizations below dotted line)	box, offic	unless er and Institutional trus	ck mo perso a dire	ore that on is ector/t	both an trustee)	Reportable compensation from the	Reportable compensation from related organizations (W-2/ 1099-MISC/	Estimated amount of other compensation from the organization and
Name and title	Average hours per week (list any hours for related organizations below dotted line)	box, offic	unless er and Institutional trus	persona dire	on is ector/t	both an trustee)	Reportable compensation from the	Reportable compensation from related organizations (W-2/ 1099-MISC/	Estimated amount of other compensation from the organization and
c	hours per week (list any hours for related organizations below dotted line)	offic	er and Institutional trus	a dire	ector/t	trustee)	compensation from the	compensation from related organizations (W-2/ 1099-MISC/	of other compensation from the organization and
o	(list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensation	organization (W-2/	organizations (W-2/ 1099-MISC/	from the organization and
o	hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensa	1099-MISC/ 1099-NEC)	1099-MISC/	organization and
o	related organizations below dotted line)	ividual trustee director	titutional trustee	icer	y employee	hest compensa	1099-NEC)	1099-NEC)	related organizations
	organizations below dotted line)	ial trustee itor	onal trustee		ıployee	t compensa			
	below dotted line)	ustee	trustee		/66	npensa			
	·	Ф	tee			ารล			
(1) ANNE WADSWORTH	40.00					ted			
(1)ANNE WADSWORTH	40.00								
EXECUTIVE DIRECTOR		X		X			95,000	0	0
(2) KARI BONARO									
DIRECTOR		X					0	0	0
(3)BRIANNE SZOPINSKI	0.50								
DIRECTOR		X					0	0	0
(4) ROBYNN RICH	0.50								
DIRECTOR		x					0	0	0
(5) ROBERT BERGER	0.50								
DIRECTOR		x					0	0	0
(6) TONI VAZQUEZ	0.50								
DIRECTOR		x					0	0	0
(7) BRIANNA CORNELIUS	0.50								
DIRECTOR		x					0	0	0
(8) CHRISTINE BROWN	2.00								
SECRETARY		x		x			0	0	0
(9) GEORGIA DACHILLE	2.00								
VICE CHAIR		x		x			0	0	0
(10)RYAN KNOWLES	6.00								
CHAIR & TREASURER		x		x			0	0	0
(11)									
(12)									
<u>(13)</u>									
(14)									

EEA Form **990** (2023)

	90 (2023) GIRLS EDUCATION C									61-15		Page 8
Part	VII Section A. Officers, Directors, T	rustees, l	Key I	Emp		yee (C)	s, ar	nd F	Highest Comp │	ensated Em	ployees	(continued
	(A) Name and title	(B) Average hours per week (list any	Average box, unless person i officer and a director per week (list any)	(D) Reportable compensation from the organization (W-2/	(E) Reportable compensation from related organizations (W-2	со	(F) nated amount of other mpensation from the
		hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	1099-MISC/ 1099-NEC)	1099-MISC/ 1099-NEC)	-	anization and d organizations
<u>(15)</u>												
<u>(16)</u>												
<u>(17)</u>												
<u>(18)</u>												
<u>(19)</u>												
(20)												
(21)												
<u>(22)</u>												
(23)												
(24)												
(25)												
1b c	Subtotal			• •								
d	Total (add lines 1b and 1c)								95,000			0
2	Total number of individuals (including but neeportable compensation from the organiza		thos	e lis	ted	abo	ove) w	/ho i	received more th	nan \$100,000	of	(
		••••										Yes No
3	Did the organization list any former officer, direct						-					_
4	employee on line 1a? If "Yes," complete Schedu. For any individual listed on line 1a, is the sum of re	eportable cor	npens	ation	and	d oth	er con	npen	sation from the	• • • • • • •	. 3	X
	organization and related organizations greater th										. 4	x
5	Did any person listed on line 1a receive or accrue for services rendered to the organization? <i>If "Yes</i>	compensation	on from	n any	unr	elate	ed org	aniza	ation or individual			
Secti	on B. Independent Contractors	s, complete	ocned	iuie c	3 101	Suc	ii peis	SACIA .	• • • • • • • •	<u> </u>	. 3	X
1	Complete this table for your five highest concompensation from the organization. Report	-										s tax vear.
	(A)								(B)		(C)	
	Name and business addres	00							Description of service	00	Compen:	oaliUH
2	Total number of independent contractors (in received more than \$100,000 of compensation)	-					ose li	stec	d above) who			

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Form 990 (2023) GIRLS EDUCATION COLLABORATIVE INC Part VIII Statement of Revenue

		Check if Schedule O contains a respons	e or note to any li	ine in this Part V	'III		
				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512–514
	1a	Federated campaigns 1a					
	b	Membership dues 1b					
Contributions, Gifts, Grants and Other Similar Amounts	c	Fundraising events 1c					
Gr.	d	Related organizations 1d					
ffs, rAn	e	Government grants (contributions) 1e					
n ia	f	All other contributions, gifts, grants,					
Sin		and similar amounts not included above	590,201				
buti ther	q	Noncash contributions included in	0,00,000				
d d	3	lines 1a-1f 1g	 \$				
ಕ್ಷ ಬ	h			590,201			
			Business Code	030,101			
	2a						
8	b						
Le ez	c						
ıram Serv Revenue	d						
Re	e						
Program Service Revenue	_	All other program service revenue					
ъ		Total. Add lines 2a-2f					
	3	Investment income (including dividends, interest, other similar amounts)		2,427	2,427		
	4	Income from investment of tax-exempt bond prod	-	2/12/	2/12/		
	5	Royalties	- t				
		(i) Real	(ii) Personal				
	6a	Gross rents 6a	(ii) i croonar				
		Rental income or (loss) 6c					
		Net rental income or (loss)					
		, ,	(ii) Other				
	/a	Gross amount from (i) Securities sales of assets	(ii) Guici				
		other than inventory 7a					
	b	Less: cost or other basis					
Φ	_	and sales expenses 7b					
venue	c	Gain or (loss) 7c					
	l .	Net gain or (loss)					
Other Re	l .	Gross income from fundraising					
Ě		events (not including \$					
J		of contributions reported on line					
		1c). See Part IV, line 18 8a					
	b	Less: direct expenses	+				
	l .	Not become a floor for a for all all and a set					
		Gross income from gaming					
	••	activities. See Part IV, line 19 9a					
	b	Less: direct expenses 9th	+				
		Not become a floor of the second of the seco					
	IUa	Gross sales of inventory, less returns and allowances					
	b	Less: cost of goods sold 10	+				
		Net income or (loss) from sales of inventory	-				
			Business Code				
σ.	11a						
Miscellanous Revenue	b						
scellano	C						
Sce	_	All other revenue			1		
Σ	l .	Total. Add lines 11a-11d					
		Total revenue. See instructions		592,628	2,427	0	0

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 n	,			
	ot include amounts reported on lines 6b, 7b,	(A) Total expenses	(B) Program service	(C) Management and	(D) Fundraising
8b, 9	9b, and 10b of Part VIII.	•	expenses	general expenses	expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and				
	foreign individuals. See Part IV, lines 15 and 16	313,859	313,859		
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	95,000	42,750	14,250	38,000
6	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	20,510	20,510		
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes	10,803	2,033	2,360	6,410
11	Fees for services (nonemployees):		_,;;;	_,	-,-10
а	Management				
b	Legal				
c	Accounting				
d	Lobbying				
e	Professional fundraising services. See Part IV, line 17. •				
f	Investment management fees				
g g	Other. (If line 11g amount exceeds 10% of line 25, column				
9	(A), amount, list line 11g expenses on Schedule O.) • •				
12	Advertising and promotion				
13	_ · · · · · · · · · · · · · · · · · · ·	908	146	422	240
	Office expenses		146		340
14	Information technology	1,484	610	193	681
15	Royalties	12 222	2 600	2 400	
16	Occupancy	12,000	3,600	2,400	6,000
17	Travel	16,675	16,675		
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23	Insurance	2,507		2,507	
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.)				
а	FUNDRAISING EXPENSES	6,798			6,798
b	COMMUNICATIONS	5,220	4,298	263	659
С	PROFESSIONAL FEES	27,200	7,875	8,340	10,985
d					
е	All other expenses	8,521	4,963	3,558	
25	Total functional expenses. Add lines 1 through 24e	521,485	417,319	34,293	69,873
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				
	following SOP 98-2 (ASC 958-720)				
	, ,				Form 000 (2022)

Part X Balance Sheet

		Check if Schedule O contains a response or note	to ar	y line in this Part X			
		·			(A)		(B)
					Beginning of year		End of year
	1	Cash - non-interest-bearing			241,669	1	349,019
	2	Savings and temporary cash investments			35,088	2	•
	3	Pledges and grants receivable, net			·	3	
	4	Accounts receivable, net				4	
	5	Loans and other receivables from any current or former of					
		trustee, key employee, creator or founder, substantial con	tribut	or, or 35%			
		controlled entity or family member of any of these person	s .			5	
	6	Loans and other receivables from other disqualified perso		s defined			
		under section 4958(f)(1)), and persons described in section	on 49	58(c)(3)(B)		6	
	7	Notes and loans receivable, net				7	
sets	8	Inventories for sale or use				8	
Assets	9	Prepaid expenses and deferred charges				9	
	10a	Land, buildings, and equipment: cost or other					
			10a	3,202			
	b	Less: accumulated depreciation	10b	3,202		10c	
	11	Investments - publicly traded securities			11		
	12	Investments - other securities. See Part IV, line 11				12	
	13	Investments - program-related. See Part IV, line 11		13			
	14	Intangible assets			14		
	15	Other assets. See Part IV, line 11			9,128	15	4,642
	16	Total assets. Add lines 1 through 15 (must equal line 33	3) .		285,885	16	353,661
	17	Accounts payable and accrued expenses			5,127	17	1,760
	18	Grants payable				18	
	19	Deferred revenue				19	
	20	Tax-exempt bond liabilities		20			
	21	Escrow or custodial account liability. Complete Part IV of	Sche	dule D		21	
g	22	Loans and other payables to any current or former officer	, direc	ctor,			
Liabilities		trustee, key employee, creator or founder, substantial con-	tribut	or, or 35%			
jab		controlled entity or family member of any of these persons	s .			22	
_	23	Secured mortgages and notes payable to unrelated third	l parti	es		23	
	24	Unsecured notes and loans payable to unrelated third pa	arties			24	
	25	Other liabilities (including federal income tax, payables to	relat	ed third			
		parties, and other liabilities not included on lines 17-24).	Comp	lete Part X			
		of Schedule D				25	
	26	Total liabilities. Add lines 17 through 25			5,127	26	1,760
		Organizations that follow FASB ASC 958, check here	X				
ģ		and complete lines 27, 28, 32, and 33.					
ည	27	Net assets without donor restrictions			280,758	27	351,901
ala	28	Net assets with donor restrictions				28	
<u>Б</u>		Organizations that do not follow FASB ASC 958, chec	ck he	e 🗌			
Fu		and complete lines 29 through 33.					
ō	29					29	
ets	30	Paid-in or capital surplus, or land, building, or equipment				30	
Net Assets or Fund Balances	31	Retained earnings, endowment, accumulated income, or				31	
ēt	32	Total net assets or fund balances			280,758	32	351,901
_	33	Total liabilities and net assets/fund balances			285,885	33	353,661

EEA Form **990** (2023)

Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1		592	,628
2	Total expenses (must equal Part IX, column (A), line 25)	2		521	, 485
3	Revenue less expenses. Subtract line 2 from line 1	3		71	,143
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4		280	,758
5	Net unrealized gains (losses) on investments	5			
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			0
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line				
	32, column (B))	10		351	,901
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990: X 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?	• • •	2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or				
	reviewed on a separate basis, consolidated basis, or both.				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	, ,	• • •	2h)	X
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a				
	separate basis, consolidated basis, or both.				
	Separate basis Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of				
	the audit, review, or compilation of its financial statements and selection of an independent accountant?	• • •	20	:	
	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?	• • •	38		-
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	• • •			(0005)
EEA			Fo	rm 990	(2023)

SCHEDULE A (Form 990)

Public Charity Status and Public Support

OMB No. 1545-0047

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

Department of the Treasury Internal Revenue Service Name of the organization

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

Open to Public Inspection Employer identification number

GIRI	S	EDUCATION COLLABORATIVE					61-157830			
Par	t I	Reason for Public Char	ity Status. (Al	l organizations mus	t comple	ete this p	oart.) See instruction	ons.		
The o	rga	anization is not a private foundation be	•	•	-	,				
1	L	A church, convention of churches, of				(b)(1)(A)(i)).			
2	L	A school described in section 170 (b)(1)(A)(ii). (Attac	h Schedule E (Form 990	0).)					
3	L	A hospital or a cooperative hospital	_							
4		A medical research organization op	erated in conjunct	ion with a hospital descr	ribed in se	ction 170	(b)(1)(A)(iii). Enter the			
	_	hospital's name, city, and state:								
5		An organization operated for the ber	=	r university owned or ope	erated by a	a governme	ental unit described in			
_	_	section 170(b)(1)(A)(iv). (Complete	•							
6	-	A federal, state, or local governmen	•		` , ,	, , , , ,				
7										
	described in section 170(b)(1)(A)(vi). (Complete Part II.)									
8	 ☐ A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) ☐ An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college 									
9		or university or a non-land-grant coll				-	=	ege		
		university:	ege of agriculture	(See Instructions). Enter	ine name,	city, and s	ate of the college of			
10	Г	An organization that normally receive	es (1) more than 3	13 1/3% of its support fro	m contribu	tions man	hershin fees and gross	•		
10		receipts from activities related to its	exempt functions.	subject to certain except	tions; and	(2) no mor	e than 33 1/3% of its	•		
		support from gross investment incon acquired by the organization after J	ne and unrelated b	ousiness taxable income	(less secti	ion 511 tax) from businesses			
11	Г	An organization organized and oper			•		1).			
12	Ē	An organization organized and opera						es of		
		one or more publicly supported orga	anizations describ	ed 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.									
а	a Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving									
		the supported organization(s) th	e power to regula	rly appoint or elect a maj	ority of the	directors	or trustees of the			
		supporting organization. You m	ust complete Pa	rt IV, Sections A and B						
b		Type II. A supporting organizati	on supervised or	controlled in connection	with its su	pported or	ganization(s), by havin	g		
		control or management of the su		•	persons tha	at control o	r manage the supporte	d		
		organization(s). You must com	plete Part IV, Se	ctions A and C.						
С				•			• •	with,		
		its supported organization(s) (so		=						
d		☐ Type III non-functionally integ		• •				. ,		
		that is not functionally integrated					ent and an attentivenes	S		
_		requirement (see instructions).	=				I Time II Time III			
е		Check this box if the organizatio functionally integrated, or Type I					і, туре іі, туре ііі			
f		Enter the number of supported organization		integrated supporting of	gariizatioi	l.				
g		Provide the following information about		nanization(s)	• • • • •	• • • • •		•••		
9		(i) Name of supported organization	(ii) EIN	(iii) Type of organization	(iv) Is the o	rganization	(v) Amount of monetary	(vi) Am	ount of	
		(y) manie or oupported organization	(,	(described on lines 1-10	listed in you	ır governing	support (see	other sup		
				above (see instructions))	docum	ent?	instructions)	instru	ctions)	
					Yes	No				
(4)										
(A)										
(B)										
(C)										
-										
(D)										
(E)										
(E)										
Total							1			

61-1578303

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.)

Secti	on A. Public Support	•		•		,							
Calen	dar 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.")	391,812	368,200	369,320	394,764	590,283	2,114,379						
2	Tax revenues levied for the												
	organization's benefit and either paid												
	to or expended on its behalf												
3	The value of services or facilities												
	furnished by a governmental unit to the												
	organization without charge												
4	Total. Add lines 1 through 3	391,812	368,200	369,320	394,764	590,283	2,114,379						
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)						23,753						
_6	Public support. Subtract line 5 from line 4.						2,090,626						
Secti	Section B. Total Support												
Calen	dar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total						
7	Amounts from line 4	391,812	368,200	369,320	394,764	590,283	2,114,379						
8	Gross income from interest, dividends,												
	payments received on securities loans,												
	rents, royalties, and income from												
	similar sources	1,776					1,776						
9	Net income from unrelated business												
	activities, whether or not the business												
	is regularly carried on												
10	Other income. Do not include gain or												
	loss from the sale of capital assets												
	(Explain in Part VI.)												
11	Total support. Add lines 7 through 10						2,116,155						
12	Gross receipts from related activities, etc.					12							
13	First 5 years. If the Form 990 is for the or	•			•	•	, , ,						
	organization, check this box and stop her												
Secti	on C. Computation of Public Suppo												
14	Public support percentage for 2023 (line 6		-			14	98.79 %						
15	Public support percentage from 2022 Sch					15	%						
16a	33 1/3% support test - 2023. If the organ												
	box and stop here. The organization qua	•		-									
b	33 1/3% support test - 2022. If the organ												
	this box and stop here. The organization			•			_						
17a	10%-facts-and-circumstances test - 20	_											
	10% or more, and if the organization mee												
	Part VI how the organization meets the fa			-			_						
	organization												
b	10%-facts-and-circumstances test - 20	•											
	15 is 10% or more, and if the organization					-	-						
	in Part VI how the organization meets the			-									
	organization												
18	Private foundation. If the organization di	d not check a b	pox on line 13,	16a, 16b, 17a	, or 17b, check	this box and s	see						
	instructions				• • • • • • •		<u> </u>						

Schedule A (Form 990) 2023 EEA

61-1578303

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

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

Secti	on A. Public Support						
Calen	dar year (or fiscal year beginning in)	(a) 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						
4	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						
С	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from						
	line 6.)						
Secti	on B. Total Support						_
Calen	dar 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						
С	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 or	rganization's fi	rst second thi	rd fourth or fi	fth tax vear as	a section 501 <i>(c</i>	2)(3)
•	organization, check this box and stop her	•			····	•	~ .
Secti	on C. Computation of Public Suppor						
15	Public support percentage for 2023 (line 8			13 column (f))		15	%
16	Public support percentage from 2022 Scho					16	
	on D. Computation of Investment Inc	•	-			10	
17	Investment income percentage for 2023 (I			v line 13 colu	mn (f))	17	%
18	Investment income percentage from 2022			-		18	
19a	33 1/3% support tests - 2023. If the orga						
134							
L	17 is not more than 33 1/3%, check this be	-	_	=		• • •	
b	33 1/3% support tests - 2022. If the organizati						
20	line 18 is not more than 33 1/3%, check this bo.	-	_			-	
_20	Private foundation. If the organization did	u not cneck a	box on line 14,	19a, or 19b, o	rieck this box a	ına see instruc	tions

EEA Schedule A (Form 990) 2023

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	Section	A. All	Supporting	Organizations
---	---------	--------	------------	----------------------

Secti	on A. All Supporting Organizations		Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing		163	NO
-	documents? If "No," describe in Part VI how the supported organizations are designated. If designated by			
	class or purpose, describe the designation. If historic and continuing relationship, explain.	1		
2	Did the organization have any supported organization that does not have an IRS determination of status			
	under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported			
	organization was described in section 509(a)(1) or (2).	2		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer			
	lines 3b and 3c below.	3a		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and			
	satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the			
	organization made the determination.	3b		
С	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B)			
	purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.	3c		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If	_		
	"Yes," and if you checked 12a or 12b in Part I, answer lines 4b and 4c below.	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign			
	supported organization? If "Yes," describe in Part VI how the organization had such control and discretion	4.		
_	despite being controlled or supervised by or in connection with its supported organizations.	4b		
С	Did the organization support any foreign supported organization that does not have an IRS determination			
	under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in 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.	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes,"			
Ju	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).	5a		
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?	5b		
С	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5с		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to			
	anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited			
	by one or more of its supported organizations, or (iii) other supporting organizations that also support or			
	benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor			
	(as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity	_		
_	with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line			
00	7? If "Yes," complete Part I of Schedule L (Form 990).	8		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations			
	described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI .	9a		
b	Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which	Ja		
D	the supporting organization had an interest? If "Yes," provide detail in Part VI .	9b		
С	Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit	30		
Ü	from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI .	9с		
10a	Was the organization subject to the excess business holdings rules of section 4943 because of section			
	4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated			
	supporting organizations)? If "Yes," answer line 10b below.	10a		

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

determine whether the organization had excess business holdings.)

raiti	Supporting Organizations (continued)		Yes	No			
44	Healtha arganization accounted a gift or contribution from any of the following paragray		res	INO			
11	Has the organization accepted a gift or contribution from any of the following persons? A person who directly or indirectly controls, either alone or together with persons described on lines 11b and						
а	11c below, the governing body of a supported organization?						
	A family member of a person described on line 11a above?						
С							
Section	on B. Type I Supporting Organizations	11c					
Secur	on B. Type I Supporting Organizations		Yes	No			
4	Did the representation hady, members of the representation hady afficers esting in their afficial conseits, as membership of one as		162	INO			
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.	1					
2	Did the organization operate for the benefit of any supported organization other than the supported						
2	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.	2					
Section	on C. Type II Supporting Organizations						
Section	on c. Type it 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		163	140			
•	or trustees of each of the organization's supported organization(s)? <i>If "No," describe in Part VI how control</i>						
	or management of the supporting organization was vested in the same persons that controlled or managed						
	the supported organization(s).	1					
Section	on D. All Type III Supporting Organizations						
	5.7 2.7 m Type in Cupper in g C. gameanone		Yes	No			
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the						
-	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax						
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the						
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1					
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported	_					
_	organization(s) or (ii) serving on the governing body of a supported organization? <i>If "No," explain in Part VI</i>						
	how the organization maintained a close and continuous working relationship with the supported organization(s).	2					
3	By reason of the relationship described in line 2, above, did the organization's supported organizations have						
	a significant voice in the organization's investment policies and in directing the use of the organization's						
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's						
	supported organizations played in this regard.	3					
Section	on E. Type III Functionally Integrated Supporting Organizations						
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see	e inst	ructio	ns).			
а	☐ The organization satisfied the Activities Test. Complete line 2 below.			•			
b	The organization is the parent of each of its supported organizations. <i>Complete line 3 below.</i>						
С	☐ The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instruc	ctions)					
2	Activities Test. Answer lines 2a and 2b below.		Yes	No			
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of						
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify						
	those supported organizations and explain how these activities directly furthered their exempt purposes,						
	how the organization was responsive to those supported organizations, and how the organization determined						
	that these activities constituted substantially all of its activities.	2a					
b	Did the activities described on line 2a, above, constitute activities that, but for the organization's						
	involvement, one or more of the organization's supported organization(s) would have been engaged in? If						
	"Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would						
	have engaged in these activities but for the organization's involvement.	2b					
3	Parent of Supported Organizations. Answer lines 3a and 3b below.						
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or						
	trustees of each of the supported organizations? If "Yes" or "No," provide details in Part VI.	3a					
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.	3b					

61-1578303

Scriedu	GIRLS EDUCATION COLLABORATIVE INC		61-13/6	303	raye o
Part	7				
1	$\hfill \square$ Check here if the organization satisfied the Integral Part Test as a qualifying				•
	instructions. All other Type III non-functionally integrated supporting organi	izati	ons must complete Section	ns A throug	h E.
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Curre	
1	Net short-term capital gain	1		(0)	<u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>
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) Curre	
1	Aggregate fair market value of all non-exempt-use assets (see				
	instructions for short tax year or assets held for part of year):				
а	Average monthly value of securities	1a			
b	Average monthly cash balances	1b			
C	Fair market value of other non-exempt-use assets	1c			
	Total (add lines 1a, 1b, and 1c)	1d			
е	Discount claimed for blockage or other factors				
	(explain in detail in Part VI):				
2	Acquisition indebtedness applicable to non-exempt-use assets	2			
3	Subtract line 2 from line 1d.	3			
4	Cash deemed held for exempt use. Enter 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			
Sect	ion C - Distributable Amount			Curren	t 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				

EEA Schedule A (Form 990) 2023

☐ Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization

6

emergency temporary reduction (see instructions).

(see instructions).

Schedu	ule A (Form 990) 2023 GIRLS EDUCATION COLLABORA	TIVE INC	61-1	57	8303	Page 7
Part	Type III Non-Functionally Integrated 509(a)(3	3) Supporting Organ	izations (continue	ed)		
Sect	ion D - Distributions				Curren	t Year
1	Amounts paid to supported organizations to accomplish e	xempt purposes		1		
2	Amounts paid to perform activity that directly furthers exer	mpt purposes of support	ed			
	organizations, in excess of income from activity			2		
3	3 Administrative expenses paid to accomplish exempt purposes of supported organizations					
4	4 Amounts paid to acquire exempt-use assets					
5	Qualified set-aside amounts (prior IRS approval required)	- provide details in Part	· VI)	5		
6	Other distributions (describe in Part VI). See instructions.			6		
7	Total annual distributions. Add lines 1 through 6.			7		
8	Distributions to attentive supported organizations to which	the organization is resp	onsive			
	(provide details in Part VI). See instructions.					
9	Distributable amount for 2023 from Section C, line 6			9		
10	Line 8 amount divided by line 9 amount			10		
			(ii)		/ii	i۱

10	Line 8 amount divided by line 9 amount		10	
Secti	on 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 - explain in Part VI). See			
	instructions.			
3	Excess distributions carryover, if any, to 2023			
а	From 2018			
b	From 2019			
С	From 2020			
d	From 2021			
е	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: \$			
а	Applied to underdistributions of prior years			
b	Applied to 2023 distributable amount			
С	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, explain in Part VI. See instructions.			
6	Remaining underdistributions for 2023. Subtract lines 3h			
	and 4b from line 1. For result greater than zero, explain in			
	Part VI. See instructions.			
7	Excess distributions carryover to 2024. Add lines 3j			
	and 4c.			
8	Breakdown of line 7:			
а	Excess from 2019			
b	Excess from 2020			
С	Excess from 2021			
d	Excess from 2022			
е	Excess from 2023			

EEA Schedule A (Form 990) 2023 Schedule A (Form 990) 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 B (Form 990)

Schedule of Contributors

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Attach to Form 990, 990-EZ, or Form 990-PF.

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

2023

Name of the organization **Employer identification number** GIRLS EDUCATION COLLABORATIVE INC 61-1578303 Organization type (check one): Filers of: Section: Form 990 or 990-EZ **X** 501(c)(**3**) (enter number) organization 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation 527 political organization Form 990-PF 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation 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

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).

SCHEDULE D (Form 990)

Supplemental Financial Statements

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

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

Name o	f the or	ganization			Employer identification number
GIRL	S EDU	CATION COLLABORATIVE INC			61-1578303
Pa	rt I	Organizations Maintaining Donor Advised	Funds or Other S	Similar Funds or Ac	counts
		Complete if the organization answered "Yes" of	on Form 990, Part	: IV, line 6.	
		· · · · · · · · · · · · · · · · · · ·		r advised funds	(b) Funds and other accounts
1	Total	number at end of year			
2		egate value of contributions to (during year)			
3		egate value of grants from (during year)			
4		egate value at end of year			
5		e organization inform all donors and donor advisors in	writing that the asse	ets held in donor advised	
		are the organization's property, subject to the organization	_		
6		e organization inform all grantees, donors, and donor a			
		or charitable purposes and not for the benefit of the do	_	-	
		rring impermissible private benefit?			
Par		Conservation Easements			11111111111111 100 110
ı uı	•	Complete if the organization answered "Yes" of	on Form 990 Part	· IV line 7	
1	Pumo	se(s) of conservation easements held by the organization			
•		eservation of land for public use (for example, recreation			historically important land area
		otection of natural habitat	on or education)		certified historic structure
	=			Fleservation of a	certified historic structure
•		eservation of open space	fied concentration oc	ntribution in the form of	a concervation
2		lete lines 2a through 2d if the organization held a quali	neu conservation co	nunbulion in the form of	
_		nent on the last day of the tax year.			Held at the End of the Tax Year
a		number of conservation easements			2a
b		acreage restricted by conservation easements			2b
C		per of conservation easements on a certified historic str			2c
d		per of conservation easements included on line 2c, acq	•		
_		nistoric structure listed in the National Register			
3		per of conservation easements modified, transferred, re	eleased, extinguishe	d, or terminated by the o	organization during the
_	tax ye				
4		per of states where property subject to conservation ea	_		
5		the organization have a written policy regarding the pe	=	-	
		ons, and enforcement of the conservation easements i			
6	Staff a	and volunteer hours devoted to monitoring, inspecting, l	handling of violation	s, and enforcing conserv	ation easements during the year
7	Amou	nt of expenses incurred in monitoring, inspecting, hand	dling of violations, ar	d enforcing conservatio	n easements during the year
8		each conservation easement reported on line 2d abov			
		ection 170(h)(4)(B)(ii)?			_
9		rt XIII, describe how the organization reports conserva-			
	sheet,	and include, if applicable, the text of the footnote to the	e organization's fina	ncial statements that des	scribes the
		ization's accounting for conservation easements			
Par	t III	Organizations Maintaining Collections			Other Similar Assets
		Complete if the organization answered "Yes" of	•	*	
1a		organization elected, as permitted under FASB ASC 9			
	of art,	historical treasures, or other similar assets held for pu	ıblic exhibition, educ	ation, or research in furt	herance of public
	servic	e, provide in Part XIII the text of the footnote to its fina	ancial statements tha	t describes these items.	
b		organization elected, as permitted under FASB ASC 9			
	art, hi	storical treasures, or other similar assets held for public	c exhibition, education	on, or research in furthe	rance of public service,
	provid	de the following amounts relating to these items:			
	(i) R	evenue included on Form 990, Part VIII, line 1			 \$
	(ii) A	ssets included in Form 990, Part X			 \$
2	If the	organization received or held works of art, historical tre	easures, or other sim	nilar assets for financial	gain, provide the
	follow	ing amounts required to be reported under FASB ASC	0 958 relating to the	se items:	
а		nue included on Form 990, Part VIII, line 1			\$
b		s included in Form 990. Part X			

Par	t III Organizations Maintaining Coll	lections of Art, His	storical Treasures	, or Other Similar <i>I</i>	Assets (continued)					
3	Using the organization's acquisition, accession, a	nd other records, check	any of the following that r	make significant use of its	S					
	collection items (check all that apply):									
а	☐ Public exhibition	d	Loan or exchange p	rogram						
b	Scholarly research	е	Other							
С	Preservation for future generations									
4	Provide a description of the organization's collect	ions and explain how the	ey further the organization	n's exempt purpose in Pa	art					
	XIII.									
5	During the year, did the organization solicit or rece	eive donations of art, his	torical treasures, or other	r similar						
_	assets to be sold to raise funds rather than to be		e organization's collectio	n?	Yes No					
Par	t IV Escrow and Custodial Arrange			_	_					
	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 co	ontributions or other asse	ets not						
	included on Form 990, Part X?				🗌 Yes 🗌 No					
b	If "Yes," explain the arrangement in Part XIII and									
	ii 100, oxpaintile arrangement ii 1 art xiii ara	complete the following to		Δ	mount					
С	Beginning balance									
d	Additions during the year									
е	Distributions during the year									
f	Ending balance			. 1f						
2a	Did the organization include an amount on Form 9	990, Part X, line 21, for e	scrow or custodial accou	ınt liability?	Yes No					
b	If "Yes," explain the arrangement in Part XIII. Che	eck here if the explanatio	n has been provided on l	Part XIII						
Par										
	Complete if the organization answ	wered "Yes" on For	m 990, Part IV, line	10.						
	(a)	Current year (b) P	Prior year (c) Two years	s back (d) Three years back	ck (e) Four years back					
1a	Beginning of year balance									
b	Contributions									
С	Net investment earnings, gains, and									
	losses									
d	Grants or scholarships									
е	Other expenditures for facilities and									
	programs									
f	Administrative expenses									
g	End of year balance									
2	Provide the estimated percentage of the current y		ı, column (a)) held as:							
а	Board designated or quasi-endowment	%								
b	Permanent endowment%									
С	Term endowment%									
_	The percentages on lines 2a, 2b, and 2c should en			16 11						
3a	Are there endowment funds not in the possession	n of the organization that	are held and administere	ed for the	V N-					
	organization by:				Yes No					
	(i) Unrelated organizations?				3a(i)					
	(ii) Related organizations?				3a(ii)					
b	If "Yes" on line 3a(ii), are the related organization	•			3b					
4 Par	Describe in Part XIII the intended uses of the org		unas.							
Pai	Land, Buildings, and Equipment Complete if the organization answ		m 000 Part IV line	11a See Form 000	Dart V line 10					
	•									
	Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value					
	Land	(mivosumoni)	(50161)	doprodation						
1a h	Land	-								
b	Buildings									
q	Leasehold improvements		2 202	2 202						
d e	Equipment		3,202	3,202						
	Other	Form 990 Part X line	10c. column (B)							
. Juli.	(u) must equal	. Jim Joo, i ait A, iii C	,		i e					

Part VII	Investments - Other Securities Complete if the organization answered	d "Yes" on For	m 990 Part	IV line 11	b See Form	990 Part X line 12
	(a) Description of security or category	2 100 011101	(b) Book val			thod of valuation:
	(including name of security)				Cost or end	f-of-year market value
• ,	derivatives					
	eld equity interests					
(3) Other						
(A) (B)						
(C)						
(D)						
(E)						
(F)						
(G)						
(H)						
	n (b) must equal Form 990, Part X, line 12, col.(B)))				
Part VIII	Investments - Program Related					
	Complete if the organization answered	d "Yes" on For	m 990, Part	IV, line 11	c. See Form	990, Part X, line 13.
	(a) Description of investment		(b) Book val	ue		thod of valuation:
					Cost or end	l-of-year market value
(1)						
(2)						
(4)						
(5)						
(6)						
(7)						
(8)						
(9)						
Total. (Colum	n (b) must equal Form 990, Part X, line 13, col. (B	3))				
Part IX	Other Assets					
	Complete if the organization answered	d "Yes" on For	m 990, Part	IV, line 11	d. See Form	990, Part X, line 15.
		escription				(b) Book value
	TY DEPOSITS					4,64
(2)						
(3)						
(4) (5)						
(6)						
(7)						
(8)						
(9)						
	n (b) must equal Form 990, Part X, line 15 col. (B)))				4,64
Part X	Other Liabilities					
	Complete if the organization answered line 25.	d "Yes" on For	m 990, Part	IV, line 11	e or 11f. See	e Form 990, Part X,
1.	(a) Description of liability	(b) Book v	/alue			
(1) Federal i	ncome taxes					
(2)						
(3)						
(4)						
(5)						
(6)						
(7)						
(8)						
(9)						
Total. (Column)	(b) must equal Form 990, Part X, line 25 col. (B)) • •				statements that	

Part			Return
	Complete if the organization answered "Yes" on Form 990, Pa	rt IV, line 12a.	
1	Total revenue, gains, and other support per audited financial statements		1
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
а	Net unrealized gains (losses) on investments	2a	
b	Donated services and use of facilities	2b	
С	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII.)	2d	
е	Add lines 2a through 2d		2e
3	Subtract line 2e from line 1		3
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	
С	Add lines 4a and 4b		4c
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		5
Part			r Return
	Complete if the organization answered "Yes" on Form 990, Pa	rt IV, line 12a.	
1	Total expenses and losses per audited financial statements		1
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
а	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Other losses	2c	
d	` '	2d	
е	Add lines 2a through 2d		2e
3	Subtract line 2e from line 1		3
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
а	· · · · · · · · · · · · · · · · · · ·	4a	
b		4b	
С	Add lines 4a and 4b	· ·	4c
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)		5
Part			
	the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lin		art 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.	

EEA Schedule D (Form 990) 2023

SCHEDULE F (Form 990)

Department of the Treasury

Internal Revenue Service
Name of the organization

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

Open to Public Inspection

GIRLS EDUCATION COLLABORATIVE INC

Employer identification number 61–1578303

Part			ties Outside the	United States. Complete	if the organization answered "	Yes" on			
	Form 990, Pa								
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? X Yes No								
2	For grantmakers Da	posibo in Port V the	organization's prod	aduras for monitoring the use	of its grants and other assistance				
2	-		organization's prod	edures 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) Num	ber (c) Number of	(d) Activities conducted in the	(e) If activity listed in (d) is	(f) Total			
		of offices the regi		region (by type) (such as, fundraising, program services,	a program service, describe specific type of	expenditures for and investments			
			independent contractors	investments, grants to recipients located in the region)	service(s) in the region	in the region			
			in the region	located in the region)					
(1) SU	B-SAHARAN AFRIC	CA		PROGRAM SERVICES	DINING HALL	110,000			
(2) SU	B-SAHARAN AFRIC	CA		PROGRAM SERVICES	ALLY FUNDER ALLIANCE	40,000			
(0) ===					L				
(3) SU	B-SAHARAN AFRIC	CA		PROGRAM SERVICES	KITENGA	35,566			
(4) CT	D CAMADAN ABDIC			DDOGDAN CEDUTCEC	CENEDAL	00 221			
(4) 50	B-SAHARAN AFRIC	JA .		PROGRAM SERVICES	GENERAL	99,331			
(5) STI	B-SAHARAN AFRIC	-a		PROGRAM SERVICES	GIRLS RISE SCHOLARSH	28,962			
(0) 50	Diminum in Kit			TROCKET BERVICES	OTRED RIDE BONOBINGS	20,7502			
(6)									
,									
(7)									
(8)									
(9)									
(10)									
(10)									
(11)									
. ,									
(12)									
(13)									
(4.4)									
(14)									
(15)									
/									
(16)									
(17)									
3a	Subtotal					313,859			
b	Total from continuation	n							
	sheets to Part I								
•	Totale (add lines 3a a	and 3h)				212 050			

Part								tion answered "Yes"	on Form 990,
	Part IV, line	e 15, for any re	cipient who rece	ived more than \$5,0	00. Part II can b	e duplicated if addit	ional space is nee	eded.	
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)
			SUB-SAHARAN						
(1)			AFRICA	PROGRAM SUPPORT	313,859	WIRE			BOOK
(2)									
(3)									
(4)									
(5)									
(6)									
(7)									
(8)									
(9)									
(10)									
(11)									
(12)									
(13)									
(14)									
(15)									
(16)									
2	exempt 501(c)(3) or	ganization by the II	RS, or for which the g	at are recognized as cha grantee or counsel has pro	ovided a section 501	(c)(3) equivalency letter			
3	Enter total number o	of other organizatio	ns or entities					• • • • •	

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

(18)EEA

(17)

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	X	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	X	No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect To Certain Foreign Corporations (see the Instructions for Form 5471)	Yes	X	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	X	No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships (see the Instructions for Form 8865)	Yes	X	No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see the instructions for Form 5713; don't file with Form 990)	Yes	X	No

Schedule F (Form 990) 2023 EEA

Scriedule F (FC	· · · · · · · · · · · · · · · · · · ·	01-13/6303	rage J
Part V	Supplemental Information		
	Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, colum	nn (f) (accounting metho	od;
	amounts of investments vs. expenditures per region); Part II, line 1 (accounting method);		
	and Part III, column (c) (estimated number of recipients), as applicable. Also complete this		
	information. See instructions.	s part to provide arry ad-	uitioriai
	Illiottiation. See Ilistructions.		
	of containing the classic containing (Book E. 11).		
01. Use	of grant monitoring procedures (Part I, line 2)		
GRANT RI	CIPIENTS ARE REQUIRED TO SUBMIT ANNUAL BUDGET, END OF YEAR ACTUALS	; IF GRANT WAS	
FOR A SI	PECIFIC PROJECT, THEN FINANCIAL REPORT ON SUCH PROJECT IS REQUIRED.	FOR	
UNRESTR:	CTED FUNDS, A SUMMARY OF HOW FUNDS WERE ALLOCATED IS REQUIRED.		

EEA Schedule F (Form 990) 2023

SCHEDULE O (Form 990)

Supplemental Information to Form 990 or 990-EZ

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

OMB No. 1545-0047

Open to Public

Inspection

Department of the Treasury Internal Revenue Service Attach to Form 990 or Form 990-EZ.

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

Name of the organization **Employer identification number** GIRLS EDUCATION COLLABORATIVE INC 61-1578303 01. Form 990 governing body review (Part VI, line 11) THE EXECUTIVE DIRECTOR, BOARD CHAIR AND TREASURER ARE RESPONSIBLE FOR THE DETAILED REVIEW OF THE FORM 990 AND REQUIRED SCHEDULES. 02. Conflict of interest policy compliance (Part VI, line 12c) THE BOARD MEMBERS AND OFFICERS ARE REQUIRED TO COMPLETE A CONFLICT OF INTEREST STATEMENT AT LEAST ANNUALLY. IF A POTENTIAL CONFLICT EXISTS, THE BOARD MEMBER AND/OR OFFICER WILL RECUSE THEMSELVES FROM DELIBERATIONS AND VOTING ON THE ISSUE. 03. CEO, executive director, top management comp (Part VI, line 15a) THE BOARD OF DIRECTORS ARE RESPONSIBLE FOR DETERMINING THE COMPENSATION OF THE EXECUTIVE DIRECTOR AND OTHER KEY EMPLOYEES. 04. Other officer or key employee compensation (Part VI, line 15b THE BOARD OF DIRECTOR REVIEWS COMPENSATION OF EMPLOYEES AND OFFICER AND COMPARE COMPENSATION INFORMATION WITH BUDGETS AND OTHER PUBLIC DATA IN SAME INDUSTRIES. 05. Governing documents, etc, available to public (Part VI, line 19) GOVERNING DOCUMENTS AND TAX RETURNS ARE AVAILABLE AT OUR OWN WEBSITE (HTTPS://GEC.NGO/) AND UPON REQUEST 06. Part III, response or note to any other line in Part III EXPENSES: 40,000 GRANTS: 40,000 VIA OUR ALLY FUNDER ALLIANCE INITIATIVE, FUNDED AND GAVE TECHNICAL AND CAPACITY BUILDING

Schedule O (Form 990) 2023 Page **2**

Name of the organization	Employer identification number
GIRLS EDUCATION COLLABORATIVE INC	61-1578303
SUPPORT TO FOUR LOCALLY-LED ORGANIZATIONS IN TANZANIA DOING GIRL-CENTERED	WORK IN THEIR
COMMUNITIES.	
EXPENSES: 22,640 GRANTS 10,625	
GEC CO-DESIGNED, FUNDED AND PROJECT-MANAGED A REGENERATIVE AGRICULTURE PRO	DJECT BASED AT
THE KITENGA GIRLS SECONDARY SCHOOL (TANZANIA) BASED ON THE PRINCIPALS OF F	PERMACULTURE. THE
OBJECTIVE IS TO DELIBERATELY BRING TOGETHER CLIMATE-MITIGATION AGRICULTURA	AL PRACTICES TO
THE INTERSECTION OF GIRLS EDUCATION, AS WOMEN PLAY A SIGNIFICANT ROLE IN T	CANZANIA'S FOOD
PRODUCTION ECONOMY.	
EXPENSES: 49169 GRANTS: 22,720	
OTHER DIRECT PROGRAM ACTIVITIES IN SERVICE OF OUR MISSION INCLUDING OPERAT	TIONAL SUPPORT
AND CAPITAL MAINTENANCE AT THE KITENGA GIRLS SECONDARY SCHOOL.	

EEA Schedule O (Form 990) 2023

Statement of Program Service Accomplishments 2023 PG01 Your Social Security Number GIRLS EDUCATION COLLABORATIVE INC 61-1578303

FORM 990-PART III(A)

Statement #4

Statement of Service Accomplishment

PROGRAM SERVICE CODE

PROGRAM SERVICE EXPENSES \$111809

GRANTS AND ALLOCATIONS INCLUDED IN ABOVE EXPENSE \$73345

PROGRAM SERVICES REVENUE \$0

EXPLANATION