# **EXTENSION ATTACHED**

For	Form <b>990</b>							OMB No. 1545	-0047				
	v. January						xempt Fre					2019	
Dep: Inter		the Treasury nue Service		Go to www	irs.gov/Form.	990 for instr	on this form as it uctions and th	ne latest ir	nformatio			Open to Public Inspection	
<u>A</u>		e 2019 calend		ix year begin	ning 7/	01	, 2019, 1	and endin	<b>ng</b> 6/			, 2020	
В		applicable.	C									tification number	
			One To W 307 7th 1							E Telepho	3179	-	
			New York							·			
		al return return/terminated		,						(21)	Z) 4	31-1195	
		ended return								<b>G</b> Gross r	eceints	\$ 1 0/	2,304.
			F Name and ad	dress of principa	l officer: Too	nnifer (	1 a mir a		H(a) Is this	a group retur			$\mathbb{Z}_{1,504}$
			Same As (		Jei	miller (	лагке		H(b) Are all	subordinates " attach a list	include		es No
Ι	Tax-ex	empt status:	X 501(c)(3)	501(c) (	)  (	insert no.)	4947(a)(1) or	527	It "No,"	" attach a list	. (see ir	istructions)	
J	Webs	site: ► www	ww.onetov		а а				H(c) Group	exemption nu	umber 🖡	•	
Κ	Form of	of organization:	X Corporation	Trust	Association	Other ►	LY	'ear of format	ion: 197	7 <b>M</b> s	State of	legal domicile: 🚺	JΥ
Pa	art I	Summary								÷			
							activities:To						
e	<u> </u>						<u>ng by cre</u>						<u>s</u>
an	<u>.</u>	among loc	cal commu	<u>inities,</u>	interna	ational	students	and Fi	<u>ilbrigi</u>	nt scho	lar	<u>s.</u>	
Governance	2	Check this box	v ▶ if the	organizatio	n discontinu	ind its oper	ations or dispo	nsed of m	ore than 2	5% of its			
ŝ	3						e 1a)				3	55015.	16
~ర స							(Part VI, line				4		16
itie							°art V, line 2a)				5		18
Activities &				•							6		80
Ă							ne 12				7a 7b		0.
			DUSINESS Lax			990-1, III e .	39		1	Prior Year	70	Current	<u>0.</u>
	8 0	Contributions	and grants (F	Part VIII. line	1h)					799,6	97		5,666.
Revenue					•					219,7			4,595.
ver		-			÷.						245.		2,043.
Å							and 11e)						
				-			column (A), lir			L,023,7	17.	1,04	2,304.
							3)						
				-									<u> </u>
ses				ompensation, employee benefits (Part IX, column (A), lines 5-10) Iraising fees (Part IX, column (A), line 11e)						65	8,880.		
ense	16a ⊦		0										
Expens	b⊺	otal fundraisi	0 1	•				3,157.					
						-				355,0			0,629.
				Add lines 13-17 (must equal Part IX, column (A), line 25)         xpenses. Subtract line 18 from line 12			_	1,218,837			9,509.		
. "		Revenue less	expenses. Si	ubtract line I	8 from line	12				-195,1			<u>2,795.</u>
ts or Inces	<b>20</b> ⊺	otal assets (	Part X line 1	6)						ng of Currer		End of	
Assets Balanc	20 ⊺ 21 ⊺									421,4			<u>6,791.</u> 8,995.
Net / Fund			•							365,0			
_	art II	Signature		S. Subtract II		1116 20			•	365,0	01.	30	7,796.
				examined this retu	irn including a	companying sc	hedules and statem	nents and to	the hest of m	ny knowledae	and he	lief it is true corr	ect and
com	plete. Dec	laration of prepar	er (other than offi	cer) is based on	all information	of which prepare	hedules and statem er has any knowled	lge.		ny natomougo			
			* * *							04/27/	/2021		
Sig	gn	Signature	e of officer						Da	ate			
He	re		.ghton Co						Chai	r			
			print name and tit	le	Due			Det		<b>г</b> г		DTIN	
			eparer's name		Preparer's sig	-			021	Check	if	PTIN	
Pa			1 Schall			l Schall	L	4/7/20		self-employ	ed	P0202418	4
	eparer e Only			LL & ASHI								40000000	
05	e oni	Firm's addres		oth Ave,	15th F	LOOT						-4036703	000
Ma	v tha ID	S discuss the		YORK, NY		V02 (000 in	structions)			Phone no.	(21	2) 268-23 X Yes	
	-	Paperwork Re							EA0101L 01/				No 990 (2019)
ЪА		aper work rit	Succion Act		ane separate	e manucuul			_rouul UI/	L1/20			, <b>JU</b> (2013)

Form <b>8868</b>	
(Rev. January 2020)	

Department of the Treasury Internal Revenue Service

# Application for Automatic Extension of Time To File an Exempt Organization Return

OMB No. 1545-0047

01

► File a separate application for each return.

#### Go to www.irs.gov/Form8868 for the latest information.

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

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

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

Type or print		
print	One To World, Inc.	13-3179151
File by the	Number, street, and room or suite number. If a P.O. box, see instructions.	
due date for filing your	307 7th Ave #2003	
return. See instructions.	City, town or post office, state, and ZIP code. For a foreign address, see instructions.	
	New York, NY 10001	

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

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

٠	The books are in the care of <b>&gt;</b>	Jennifer Clarke

Telephone No. 🕨	(212)	431-1195	Fax No. ►	(212)	941-6291

•	If the organization does not have an office or place of business in the United States, check this box	
•	If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) . If this is for the whole group,	-
	check this box	rs
	the extension is for.	

1	I request an automatic 6-month extension of time until	5/15	, 20 <u>21</u> ,	to file the exempt organization return
	for the organization named above. The extension is	for the organiz	ation's return	for:

calendar year 20	or
------------------	----

Change in accounting period

	► X tax year beginning	_ <u>7/01</u> , 20	<u>19</u> , and ending	<u>   6/30    </u>	, 20 <u>20</u>		
2	If the tax year entered in line	e 1 is for less than 12	2 months, check reas	son: Initia	al return	Final return	

3a If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions	3a	\$ 0.
<b>b</b> If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit	3b	\$ 0.
<b>c Balance due.</b> Subtract line 3b from line 3a. Include your payment with this form, if required, by using		

 EFTPS (Electronic Federal Tax Payment System). See instructions.
 3c \$ 0.

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

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

Form 8868 (Rev. 1-2020)

Form	n 990 (2019) One To World, Inc.	13-317915	1 Page <b>2</b>
	rt III Statement of Program Service Accomplishments		
	Check if Schedule O contains a response or note to any line in this Part III		Χ
1	Briefly describe the organization's mission:		
	To advance global cooperation, One To World fosters intercultura	<u>l understan</u>	ding by
	creating face-to-face experiences among local communities, inter	<u>national st</u>	udents and
	Fulbright scholars.		
2	Did the organization undertake any significant program services during the year which were not listed on the pri	or	
	Form 990 or 990-EZ?		Yes 🐰 No
	If "Yes," describe these new services on Schedule O.		
3	Did the organization cease conducting, or make significant changes in how it conducts, any program se	rvices?	Yes X No
	If "Yes," describe these changes on Schedule O.		
4	Describe the organization's program service accomplishments for each of its three largest program service section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocation and revenue, if any, for each program service reported.	is to others, the t	otal expenses,
4 a	a (Code:) (Expenses \$ 379,024. including grants of \$) (F		55,444.)
	See Schedule 0		
4 t	<b>b</b> (Code:) (Expenses \$ 248,294. including grants of \$) (F		79,151.)
	The Global Classroom program exemplifies One To World's unique a		
	international_students_are_trained_to_visit_K-12_New_York_City_c		
	their countries and culture, opening young American eyes to the		
	interactive workshops and seminars led by international students engage in meaningful face-to-face intercultural exchange that end		
	critical thinkers and leaders, locally and globally.		
	critical chinkers and readers, rocarry and grobarry.		
	Whether Global Classroom helps students grapple with culture-base	ed violence	, or
	inspires first generation college-goers to plan for their future		
	is an essential intervention for New York City's public schools		
	programs		
10	c (Code: ) (Expenses \$ including grants of \$ ) (F		)
-1			/
4 0	d Other program services (Describe on Schedule O.)		
	(Expenses \$ including grants of \$ ) (Revenue \$		)
4 e BAA	e Total program service expenses ► 627, 318.		Form 990 (2019)
DAA	TEEA0102L 07/31/19		2019)

Form 990 (2019) One To World, Inc.

Par	t IV Checklist of Required Schedules			
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Schedule A	1	Yes X	No
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I.	3		Х
4	<b>Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If 'Yes,' complete Schedule C, Part II	4		Х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? <i>If 'Yes,' complete Schedule C, Part III.</i>	5		Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If 'Yes,' complete Schedule D, Part I</i>	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If 'Yes,' complete Schedule D, Part II</i>	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If 'Yes,' complete Schedule D, Part III</i> .	8		Х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If 'Yes,' complete Schedule D, Part IV</i>	9		Х
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? <i>If 'Yes,' complete Schedule D, Part V</i>	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,' complete Schedule D, Part VI.	11 a	Х	
b	Did the organization report an amount for investments – other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? <i>If 'Yes,' complete Schedule D, Part VII.</i>	11 b		Х
c	Did the organization report an amount for investments – program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VIII.	11 c		Х
c	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part IX.	11 d		Х
e	Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X	11 e	Х	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If 'Yes,' complete Schedule D, Part X	11 f	Х	
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI and XII	12a	Х	
Ł	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		Х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13		Х
14 a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
t	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If 'Yes,' complete Schedule F, Parts I and IV	14b		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? <i>If 'Yes,' complete Schedule F, Parts II and IV</i>	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If 'Yes,' complete Schedule F, Parts III and IV</i>	16		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If 'Yes,' complete Schedule G, Part I</i> (see instructions)	17		Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II.	18		х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part III.	19		Х
20a	Did the organization operate one or more hospital facilities? <i>If 'Yes,' complete Schedule H</i>	20a		Х
b	If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? <i>If 'Yes,' complete Schedule I, Parts I and II.</i>	21		Х
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Form 990 (2019)One To World, Inc.Part IVChecklist of Required Schedules (continued)

			V	NI.
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	Yes	No X
23	Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If 'Yes,' complete Schedule J</i> .	23		Х
24 a	a 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.	23 24a		X
I	<b>b</b> Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
(	c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
(	d Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	24d		
25 a	a 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		Х
I	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		Х
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? <i>If 'Yes,' complete Schedule L, Part II</i>	26		Х
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? <i>If 'Yes,' complete Schedule L, Part III.</i>	27		Х
	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions, for applicable filing thresholds, conditions, and exceptions):			
	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If</i> 'Yes,' complete Schedule L, Part IV	28a		Х
I	<b>b</b> A family member of any individual described in line 28a? <i>If 'Yes,' complete Schedule L, Part IV</i>	28b		Х
	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If Yes,' complete Schedule L, Part IV.	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If 'Yes,' complete Schedule M</i>	30		X X
31		31		A
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If 'Yes,' complete Schedule R, Part L	33		Х
34	Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Part II, III, or IV, and Part V, line 1	34		Х
35 a	a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
I	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		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If 'Yes,' complete Schedule R, Part V, line 2	36		Х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If 'Yes,' complete Schedule R, Part VI</i>	37		Х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O.	38	Х	
Pa	rt V Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
	a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable1 a10b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable1 b0			-
	c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1 c	Х	
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Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)		-	
		Yes	No
<b>2.a</b> Enter the number of employees reported on Form W-3. Transmittal of Wage and Tax State-			
<ul><li>2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return</li><li>2a</li></ul>	18		
b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х	
Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3 a Did the organization have unrelated business gross income of \$1,000 or more during the year?			Х
<b>b</b> If 'Yes,' has it filed a Form 990-T for this year? If 'No' to line 3b, provide an explanation on Schedule 0			
4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a	2		х
financial account in a foreign country (such as a bank account, securities account, or other financial account)	? <b>4</b> a		^
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).			
<b>5a</b> Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			Х
<b>b</b> Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?			X
c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?			
-			
<b>6 a</b> Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organi solicit any contributions that were not tax deductible as charitable contributions?	<b>6a</b>		Х
<b>b</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).			
a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods a	nd		37
services provided to the payor?			Х
<b>b</b> If 'Yes,' did the organization notify the donor of the value of the goods or services provided?			
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?			Х
d If 'Yes,' indicate the number of Forms 8282 filed during the year			
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?			Х
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?			Х
<b>q</b> If the organization received a contribution of qualified intellectual property, did the organization file Form 8899			
as required?	<b>7</b> g		
<b>h</b> If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file Form 1098-C?	a <b>7h</b>		
<ul> <li>8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring</li> </ul>			
organization have excess business holdings at any time during the year?			
9 Sponsoring organizations maintaining donor advised funds.			
a Did the sponsoring organization make any taxable distributions under section 4966?			
<b>b</b> Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?			
10 Section 501(c)(7) organizations. Enter:			
a Initiation fees and capital contributions included on Part VIII, line 12 10a			
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
11 Section 501(c)(12) organizations. Enter:			
a Gross income from members or shareholders 11 a			
<b>b</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>b</b> If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year <b>12b</b>			
13 Section 501(c)(29) qualified nonprofit health insurance issuers.			
a Is the organization licensed to issue qualified health plans in more than one state?	13a		
Note: See the instructions for additional information the organization must report on Schedule O.			
<b>b</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			
c Enter the amount of reserves on hand			
<b>14a</b> Did the organization receive any payments for indoor tanning services during the tax year?	14a	1	Х
<b>b</b> If 'Yes,' has it filed a Form 720 to report these payments? <i>If 'No,' provide an explanation on Schedule O</i>		1	
<b>15</b> Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration o		1	
excess parachute payment(s) during the year?	4 -		Х
If 'Yes,' see instructions and file Form 4720, Schedule N.			
16 Is the organization an educational institution subject to the section 4968 excise tax on net investment income	? 16		Х
If 'Yes,' complete Form 4720, Schedule O.			

Pa	rt VI Governance, Management, and Disclosure For each 'Yes' response to lines 2 through 7b be a 'No' response to line 8a, 8b, or 10b below, describe the circumstances, processes, or chan Schedule O. See instructions.	low, ges d	and on	for
	Check if Schedule O contains a response or note to any line in this Part VI.			. Х
See	ction A. Governing Body and Management			
			Yes	No
1	a Enter the number of voting members of the governing body at the end of the tax year       1 a       16         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.       1 a       16			
	<b>b</b> Enter the number of voting members included on line 1a, above, who are independent <b>1b</b>			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		X
3		3		x
4		-		
	since the prior Form 990 was filed?	4		Х
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		Х
6	Did the organization have members or stockholders?See.Schedule.Q	6	Х	
7	a 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?SeeSchedule. O	7 a	Х	
-	<b>b</b> Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7 b	Х	
8	the following:			
	a The governing body?	8 a	Х	
	<b>b</b> Each committee with authority to act on behalf of the governing body?	8 b	Х	
9	organization's mailing address? If 'Yes,' provide the names and addresses on Schedule Q	9		Х
See	ction B. Policies (This Section B requests information about policies not required by the Internal Re	eveni	ie Co	ode.)
			Yes	No
	a Did the organization have local chapters, branches, or affiliates?	10 a		Х
	<b>b</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?	10 b		
	a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11 a	Х	
	<b>b</b> Describe in Schedule O the process, if any, used by the organization to review this Form 990. See Schedule O			
	a Did the organization have a written conflict of interest policy? If 'No,' go to line 13	12a	Х	
	<b>b</b> Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Х	
	c Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this was done See. Schedule .Q	12 c	Х	
13	5	13	Х	
14	Did the organization have a written document retention and destruction policy?	14	Х	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
	a The organization's CEO, Executive Director, or top management official. See Schedule. 0	15 a	Х	
	<b>b</b> Other officers or key employees of the organization	15 b		Х
	If 'Yes' to line 15a or 15b, describe the process in Schedule O (see instructions).			
16	a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16 a		X
	<b>b</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?	16 b		
	ction C. Disclosure			
17				
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (Section 50 available for public inspection. Indicate how you made these available. Check all that apply.         Own website       Another's website         X       Upon request         Other (explain on Schedule O)	01(c)(	3)s or	ıly)
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements availathe public during the tax year. See Schedule O	ble to		
20	State the name, address, and telephone number of the person who possesses the organization's books and records ►			
	Jennifer Clarke 307 7th Ave New York NY 10001 (212) 431-1195			

Form 990 (2019) One To World, Inc.

13-3179151

Form 990 (2019) One To World, Inc.	13-3179151	Page 7
Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Independent Contractors	t Compensated Employe	es, and
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 Compensa	ted Employees	
1 a Complete this table for all persons required to be listed. Report compensation for the calendar year ending organization's tax year.	with or within the	
• List all of the organization's <b>current</b> officers, directors, trustees (whether individuals or organizat compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.	ions), regardless of amount of	

• List all of the organization's current key employees, if any. See instructions for definition of 'key employee.'

• List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.

• List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

• List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

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

			(C)						
(A) Name and title	<b>(B)</b> Average hours	Pos thar is	s both a	lo not ox, u an off ctor/tr	ficer : ruste	e)	Reportable compensation from	<b>(E)</b> Reportable compensation from	<b>(F)</b> Estimated amount of other
	per week (list any hours for related organiza- tions below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated	the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) Jennifer Clarke	40								
Executive Dir.	0		2	Х			114,922.	0.	12,185.
(2) Sue Henderson	4								
Chair	0	Х	2	Х			0.	0.	0.
(3) Creighton Condon	0.5								_
Vice Chair	0	Х	2	X			0.	0.	0.
(4) Robert Lapiner	0.25								_
Secretary	0	Х	2	Х			0.	0.	0.
_(5)_Terrence_Martell	3								0
Treasurer	0	Х	2	Х			0.	0.	0.
<u>(6) Andrea Moo-Young Bermudez</u> Trustee	0.25	Х					0.	0.	0.
(7) Bradlee Benn	0.25								
Trustee	0	Х					0.	0.	0.
(8) Claudette Mayer	0.25								
Trustee	0	Х					0.	0.	0.
(9) Danielle Li, J.D.	0.25								
Trustee	0	Х					0.	0.	0.
(10) Elise van Oss	0.25								
Trustee	0	Х					0.	0.	0.
(11) John Allegrante	0.25								
Trustee	0	Х					0.	0.	0.
(12) Kaori Uchisaka	0.25								
Trustee	0	Х					0.	0.	0.
(13) Lin Reynolds (thru 5/19/20)	0.25								
Trustee	0	Х					0.	0.	0.
(14) Mariam Assefa	0.25								
Trustee	0	Х					0.	0.	0.
BAA	TEEA0	107L	07/31/	19					Form <b>990</b> (2019)

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Par	t VII	Section A. Officers, Directors, Tru	istees, l	Key	Em	ıplo	bye	es, a	and	d Highest Com	pensated Emp	loyees (contin	nued)
			(B)			(0	•						
		(A) Name and title	Average hours per week	box offic	, unle cer ar	ess pe	erson direct	e than is both or/trus	h an tee)	<b>(D)</b> Reportable compensation from	<b>(E)</b> Reportable compensation from	<b>(F)</b> Estimated amo of other	ount
			(list any hours for related	Individual or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	compensation f the organizati and related organization	on
			organiza - tions below dotted	tor	inal trus		ployee	compen:				-	
			line)	ö	lee			sated					
	Tru	hael B. Sperling stee	<u>0.25</u> 0	х						0.	0.		0.
	Tru	hael_Cherensonstee	<u>0.25</u> 0	х						0.	0.		0.
(17)		é_Kalonjistee	0.25	x						0.	0.		0.
(18)		ke B. Thoman Sterns stee	0.25	x						0.	0.		0.
(19)													
(20)													
(21)													
(22)													
(23)													
(24)													
(25)													
1 b	Subto	otal							►	114,922.	0.	12,1	85.
С	Total	from continuation sheets to Part VII, Section	on A							0.	0.		0.
		(add lines 1b and 1c)								114,922.	0.	12,1	
		number of individuals (including but not limited the organization $\blacktriangleright$ 1	to those I	isted	abov	ve) v	who	receiv	ved	more than \$100,00	0 of reportable comp	pensation	
3	Did th	ne organization list any <b>former</b> officer, direc	tor, truste	e, ke	ev er	mple	ovee	e, or	high	nest compensated	employee	Yes	No
		e 1a? If 'Yes,' complete Schedule J for suc ny individual listed on line 1a, is the sum of										. 3	X
	the or	ganization and related organizations greate	r than \$1	50,00	00'?	<i>lf</i> '}	∕es,	' com	nple	te Schedule J for		. 4	Х
-	for se	ny person listed on line 1a receive or accrue rvices rendered to the organization? If 'Yes	e compen ,' <i>comple</i>	isatio te So	on fro chea	om Iule	any <i>J fo</i>	unre r suc	late ch p	ed organization or erson	individual	. 5	Х
	Comp	B. Independent Contractors of the stable for your five highest compensions from the organization. Report compensions from the organization.											
		(A) Name and business addr	ress				<u>,</u>		5	<b>(B)</b> Description of	of services	<b>(C)</b> Compensatio	n
	<u> </u>												
2		number of independent contractors (including b 000 of compensation from the organization		ited to	o tha	ose l	isteo	d abo	ve)	who received more	than		

# Form 990 (2019) One To World, Inc. Part VIII Statement of Revenue

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Par	t V	III Statement of Revenue Check if Schedule O contains a	resp	onse or note to any	/ line in this Part VI	11		
					<b>(A)</b> Total revenue	<b>(B)</b> Related or exempt function revenue	<b>(C)</b> Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
nts nts	1 a	a Federated campaigns	1 a					
Contributions, Gifts, Grants and Other Similar Amounts	k	Membership dues	1 b	74,640.				
s, G Ame	C	c Fundraising events	1 c					
aift Iar J	C	d Related organizations	1 d					
is, ( imil		e Government grants (contributions)	1 e	90,000.				
tion sr S	f	All other contributions, gifts, grants, and similar amounts not included above	1 f	741 000				
ibur ithe		<b>a</b> Noncash contributions included in		741,026.				
d C		lines 1a-1f	1 g					
	ł	<b>n Total.</b> Add lines 1a-1f			905,666.			
Program Service Revenue	_		_	Business Code				
eve	28	Program Income		900099	116,240.	116,240.		
еR		Publication		900099	18,355.	18,355.		
vic	C	°	·					
l Se	C		· -					
ran	e a	All other program service revenue						
rog		g Total. Add lines 2a-2f		•	124 505			
α.					134,595.			
	3	Investment income (including divider other similar amounts)	nas, ir 		2,043.			2,043.
	4	Income from investment of tax-ex			2,045.			2,043
	5	Royalties	•	· ·				
		(i) Rea	al	(ii) Personal				
	6 a	a Gross rents 6a						
	Ŀ	b Less: rental expenses 6b						
	C	c Rental income or (loss) 6c						
	C	d Net rental income or (loss)						
	7 a	a Gross amount from (i) Securi	ities	(ii) Other				
		sales of assets <b>7a</b>						
	k	b Less: cost or other basis						
		and sales expenses 7b						
		c Gain or (loss) 7c						
	C	<b>d</b> Net gain or (loss)		►				
ne	8 a	Gross income from fundraising events						
en		(not including \$ of contributions reported on line 1c).	_					
Other Revenue		See Part IV, line 18	88					
er F	ŀ	<b>b</b> Less: direct expenses	81	-				
th		Net income or (loss) from fundrais	-					
0								
	98	a Gross income from gaming activities. See Part IV, line 19.	9 8	a				
	k	Less: direct expenses	91					
		c Net income or (loss) from gaming	activ	ities ►				
		a Gross sales of inventory, less returns and allowances	10a	a				
	k	<b>b</b> Less: cost of goods sold	101	b				
	(	c Net income or (loss) from sales of	f inve	-				
3				Business Code				
S a	11 a	a						
en l	ł	。						
Revenue	0							
Revenue		All other revenue	··· [					
-		Total. Add lines 11a-11d						
	12	Total revenue. See instructions		• • • • • • • • • • • • • • • • • • • •	1,042,304.	134,595.	0.	2,043.

	tion 501(c)(3) and 501(c)(4) organizations must com Check if Schedule O contains a re				X
	not include amounts reported on lines 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	<b>(B)</b> Program service expenses	<b>(C)</b> Management and general expenses	<b>(D)</b> Fundraising 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 for- eign individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	100 410	06 275	10 040	22 100
6	Compensation not included above to	122,412.	86,375.	12,848.	23,189.
0	disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0.	0.	0.	0.
7		419,682.	280,125.	65,889.	73,668.
8	Pension plan accruals and contributions	415,002.	200,123.	05,005.	75,000.
0	(include section 401(k) and 403(b)	<b>_</b>	<b>-</b>		
-	employer contributions)	3,113.	2,073.	467.	573.
9	Other employee benefits	74,952.	49,911.	11,229.	13,812.
10	Payroll taxes	38,721.	25,785.	5,801.	7,135.
	Fees for services (nonemployees):				
	a Management				
	b Legal				
	c Accounting				
	d Lobbying				
	e Professional fundraising services. See Part IV, line 17				
	f Investment management fees				
	Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule 0. Sch. O Advertising and promotion	145,427.	35,809.	36,383.	73,235.
13	Office expenses	20,680.	5,610.	11,607.	3,463.
14	Information technology	.,	- ,	,	-,
15	Royalties				
16	Occupancy	115,059.	76,620.	17,236.	21,203.
17	Travel.	- /	-,	,	,
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	11,322.	1,651.	2,016.	7,655.
20	Interest	,	,	,	,
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	9,068.	6,037.	1,360.	1,671.
23		9,340.	6,220.	1,399.	1,721.
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
	a Enrichment activities	39,651.	39,651.		
	• Telephone	12,852.	8,341.	2,203.	2,308.
	• Postage and Shipping	12,648.	1,127.	9,448.	2,073.
	d Printing and Publications	3,260.	1,636.	278.	1,346.
	e All other expenses.	1,322.	347.	870.	105.
25	Total functional expenses. Add lines 1 through 24e	1,039,509.	627,318.	179,034.	233,157.
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ► if following				
RA/	SOP 98-2 (ASC 958-720)				Form <b>990</b> (2019)

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

# Form 990 (2019)One To World, Inc.Part IXStatement of Functional Expenses

#### BAA

# Form 990 (2019) One To World, Inc. Part X Balance Sheet

	-					
1	3-	21	7	<u>01</u>	E 1	
	<u> </u>	- S I		91	<u> </u>	

Page 11

		Check if Schedule O contains a response or note to any	line in this Part X			
				<b>(A)</b> Beginning of year		<b>(B)</b> End of year
	1	Cash - non-interest-bearing		97,397.	1	210,334.
	2	Savings and temporary cash investments		113,034.	2	134,244.
	3	Pledges and grants receivable, net		141,864.	3	64,951.
	4	Accounts receivable, net			4	
	5	Loans and other receivables from any current or former of trustee, key employee, creator or founder, substantial cont controlled entity or family member of any of these persons	ficer, director, tributor, or 35%		5	
	6	Loans and other receivables from other disqualified persor	ns (as defined under			
		section 4958(f)(1)), and persons described in section 4958			6	
	7	Notes and loans receivable, net	-		7	
ts	8	Inventories for sale or use	-		8	
Assets	9	Prepaid expenses and deferred charges	-	11,078.	9	153,960.
Å	10 a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	293,348.	,		
		Less: accumulated depreciation		26,248.	10 c	17,180.
	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		31,797.	15	16,122.
	16	Total assets. Add lines 1 through 15 (must equal line 33).		421,418.	16	596,791.
	17	Accounts payable and accrued expenses		29,417.	17	46,460.
	18	Grants payable			18	
	19	Deferred revenue	_		19	1,500.
<i>(</i> ),	20	Tax-exempt bond liabilities			20	
tie	21	Escrow or custodial account liability. Complete Part IV of			21	
Liabilities	22	Loans and other payables to any current or former officer, key employee, creator or founder, substantial contributor, controlled entity or family member of any of these persons	or 35%		22	
	23	Secured mortgages and notes payable to unrelated third p	arties		23	
	24	Unsecured notes and loans payable to unrelated third part			24	148,035.
	25	Other liabilities (including federal income tax, payables to and other liabilities not included on lines 17-24). Complete	related third parties, Part X of Schedule D.	27,000.	25	33,000.
	26	Total liabilities. Add lines 17 through 25		56,417.	26	228,995.
Balances		Organizations that follow FASB ASC 958, check here ► and complete lines 27, 28, 32, and 33.	Х	· ·		
añ	27	Net assets without donor restrictions	-	365,001.	27	267 706
Bal	28	Net assets with donor restrictions		303,001.	28	367,796.
	20	Organizations that do not follow FASB ASC 958, check he			20	
or Fund		and complete lines 29 through 33.				
5	29	Capital stock or trust principal, or current funds			29	
<u>8</u>	30	Paid-in or capital surplus, or land, building, or equipment			30	
Š	31	Retained earnings, endowment, accumulated income, or o			31	
Net Assets	32	Total net assets or fund balances		365,001.	32	367,796.
Ne	33	Total liabilities and net assets/fund balances		421,418.	33	596,791.

BAA

Form 990 (2019)

Forn	n 990 (2	2019)	One To World, Inc. 1	3-31	79151		Pa	age <b>12</b>
Pa	t XI	Reco	onciliation of Net Assets					
			k if Schedule O contains a response or note to any line in this Part XI.					
1	Total	revenue	ie (must equal Part VIII, column (A), line 12)		1	1,0	42,3	304.
2	Total	expense	ses (must equal Part IX, column (A), line 25)		2	1,0	39,	509.
3	Rever	nue less	s expenses. Subtract line 2 from line 1		3			795.
4	Net as	ssets or	or fund balances at beginning of year (must equal Part X, line 32, column (A))		4	3	65,0	001.
5	Net u	nrealize	ed gains (losses) on investments		5			
6	Donat	ed serv	vices and use of facilities		6			
7			expenses		7			
8	Prior	period a	adjustments		8			
9	Other	change	es in net assets or fund balances (explain on Schedule O)		9			0.
10			fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,		_			
_			· · · · · · · · · · · · · · · · · · ·	1	0	3	67, <sup>·</sup>	796.
Pa	t XII	Finan	ncial Statements and Reporting					
		Check	k if Schedule O contains a response or note to any line in this Part XII					. 🗌
							Yes	No
1	Αссοι	inting m	method used to prepare the Form 990: Cash X Accrual Other					
	lf the in Scl	organiz 1edule (	zation changed its method of accounting from a prior year or checked 'Other,' explain O.					
28	Were	the orga	ganization's financial statements compiled or reviewed by an independent accountant?			2a		Х
	separ	ate bas	ck a box below to indicate whether the financial statements for the year were compiled or revi sis, consolidated basis, or both: ate basis Consolidated basis Both consolidated and separate basis	ewed	on a			
I	<b>y</b> Were	the orga	ganization's financial statements audited by an independent accountant?			2b	Х	
	basis,	consol	ck a box below to indicate whether the financial statements for the year were audited on a sep lidated basis, or both: ate basis Consolidated basis Both consolidated and separate basis	oarate				
(	If 'Yes reviev	' to line v, or co	e 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the au ompilation of its financial statements and selection of an independent accountant?	udit,		2 c	Х	
	on Sc	hedule						
	Audit	Act and	f a federal award, was the organization required to undergo an audit or audits as set forth in the Singl d OMB Circular A-133?			3a		Х
I			he organization undergo the required audit or audits? If the organization did not undergo the required plain why on Schedule O and describe any steps taken to undergo such audits			3 b		
BAA			TEEA0112L 01/21/20			Form	99 <b>0</b>	(2019)

SCHEDULE A (Form 990 or 990-EZ)

# **Public Charity Status and Public Support**

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust. ► Attach to Form 990 or Form 990-EZ.

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

Open to Public Inspection

OMB No. 1545-0047

2019

Department of the Treasury Internal Revenue Service
Name of the organization

v/Form990 for instructions and the latest informat	tion.
	Emplo

Name of the organization					Employer identifica	
One To World, Inc.					13-317915	
Part I Reason for Public Cha		•			1 1	ions.
The organization is not a private found				-	,	
1 A church, convention of church			••••	~~~~~	i).	
2 A school described in section 1		•		•		
<b>3</b> A hospital or a cooperative h						
4 A medical research organiza name, city, and state:	tion operated in conji	unction with a hospital of	describe	d in sec	tion 170(b)(1)(A)(iii). E	nter the hospital's
5 An organization operated for section 170(b)(1)(A)(iv). (Co	the benefit of a colle mplete Part II.)	ege or university owned	or opera	ated by	a governmental unit de	scribed in
6 A federal, state, or local gov	ernment or governme	ental unit described in <b>s</b>	ection 1	<b>70(b)(</b> 1)	(A)(v).	
7 X An organization that normally r in section 170(b)(1)(A)(vi).	eceives a substantial p Complete Part II.)	part of its support from a	governm	ental un	t or from the general put	lic described
8 A community trust described		A)(vi). (Complete Part I	l.)			
9 An agricultural research organi			-	oniunctio	on with a land-grant colle	ae
or university or a non-land-gramuniversity:					-	-
10 An organization that normally r from activities related to its e investment income and unre June 30, 1975. See section s	exempt functions—sul lated business taxabl	bject to certain exceptic e income (less section	ons, and	(2) no I	more than 33-1/3% of it	s support from gross
11 An organization organized ar	nd operated exclusive	ely to test for public safe	ety. See	sectior	n 509(a)(4).	
12 An organization organized ar or more publicly supported o lines 12a through 12d that de	rganizations describe	ed in section 509(a)(1) o	or <b>sectio</b>	n 509(a	)(2). See section 509(a)	It the purposes of one (3). Check the box in
a Type I. A supporting organization organization(s) the power to re complete Part IV, Sections A	on operated, supervise gularly appoint or elect	d. or controlled by its sur	o borted o	rganizat	ion(s), typically by giving	the supported on. <b>You must</b>
<ul> <li>b Type II. A supporting organiz management of the supporting must complete Part IV. Section</li> </ul>	ation supervised or	controlled in connection the same persons that c	with its ontrol or	support manage	ed organization(s), by the supported organization	naving control or on(s). <b>You</b>
c Type III functionally integrated organization(s) (see instructi	A supporting organizations). You must com	tion operated in connectio plete Part IV, Sections	n with, ar <b>A, D, an</b>	nd functio d E.	onally integrated with, its	supported
d Type III non-functionally integrated. The c functionally integrated. The c instructions). You must com	rated. A supporting org organization generally	anization operated in cor must satisfy a distribu mand D and Part V	nnection tion requ	with its s uiremen	supported organization(s) t and an attentiveness	that is not requirement (see
e Check this box if the organiz integrated, or Type III non-fu	ation received a writt	en determination from	the IRS t			
f Enter the number of supported of	organizations					
g Provide the following information		d organization(s).				
(i) Name of supported organization	<b>(ii)</b> EIN	(iii) Type of organization (described on lines 1-10 above (see instructions))	(iv) la organizat in your g docur	overning	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
			103			
(A)						
(B)						
(C)						
(D)						
(E)						
Total						

Sec	tion A. Public Support						
	ndar year (or fiscal year	(-) 0015	(1) 0010	(-) 0017	(-1) 0010	(-) 0010	
begiı	nning in) 🕨	<b>(a)</b> 2015	<b>(b)</b> 2016	(c) 2017	(d) 2018	<b>(e)</b> 2019	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any 'unusual grants.')	928,900.	789,515.	1,003,224.	799,697.	905,666.	4,427,002.
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0.
3	The value of services or facilities furnished by a governmental unit to the organization without charge						0.
	Total. Add lines 1 through 3	928,900.	789,515.	1,003,224.	799,697.	905,666.	4,427,002.
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)						220 025
6	Public support. Subtract line 5 from line 4.						<u>220,935.</u> 4,206,067.
Sec	tion B. Total Support						4,200,007.
Cale	ndar year (or fiscal year nning in) ►	<b>(a)</b> 2015	<b>(b)</b> 2016	<b>(c)</b> 2017	<b>(d)</b> 2018	<b>(e)</b> 2019	(f) Total
7	Amounts from line 4	928,900.	789,515.	1,003,224.	799,697.	905,666.	4,427,002.
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	981.	1,264.	1,127.	4,245.	2,043.	9,660.
9	Net income from unrelated business activities, whether or not the business is regularly carried on		_/_*				0.
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						0.
11	Total support. Add lines 7 through 10						4,436,662.
12	Gross receipts from related activ	ities, etc. (see ins	structions)			12	1,064,416.
13	First five years. If the Form 990 is organization, check this box and	for the organizatior stop here	's first, second, th	ird, fourth, or fifth t	ax year as a sectio	n 501(c)(3)	▶□
Sec	tion C. Computation of Pul	blic Support P	ercentage				
14	Public support percentage for 20 Public support percentage from 2	19 (line 6, column	n (f) divided by lir	ne 11, column (f)).		· · · · · · · · · 14 · · · · · · · · 15	94.80 %
							95.10 %
16a	<b>33-1/3% support test</b> — <b>2019.</b> If the and <b>stop here.</b> The organization	he organization di qualifies as a pub	d not check the b blicly supported of	rganization	d line 14 is 33-1/3	% or more, check	this box ·····► X
b	33-1/3% support test-2018. If th and stop here. The organization	e organization dic qualifies as a put	I not check a box olicly supported o	on line 13 or 16a	, and line 15 is 33	3-1/3% or more, c	heck this box
17a	<b>10%-facts-and-circumstances te</b> or more, and if the organization the organization meets the 'facts	meets the 'facts-a	nd-circumstances	s' test, check this	box and stop her	e. Explain in Part	VI how
	<b>10%-facts-and-circumstances te</b> or more, and if the organization organization meets the 'facts-and	meets the 'facts-a d-circumstances' t	ind-circumstances test. The organiza	s' test, check this ation qualifies as a	box and <b>stop her</b> a publicly support	e. Explain in Part ed organization	VI how the ►
18	Private foundation. If the organiz	zation did not che	ck a box on line	13, 16a, 16b, 17a,	or 17b, check thi	s box and see ins	structions 🕨 🗌

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.)

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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.) - I- I'

Sec	tion A. Public Support						
Calenc	lar year (or fiscal year beginning in) 🕨	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1	Gifts, grants, contributions,						
	and membership fees received. (Do not include						
•	any 'unusual grants.')						
2	Gross receipts from admissions, merchandise sold or services						
	performed, or facilities						
	furnished in any activity that is						
	related to the organization's tax-exempt purpose						
3	Gross receipts from activities						
	that are not an unrelated trade						
	or business under section 513. Tax revenues levied for the						
4	organization's benefit and						
	either paid to or expended on						
E	its behalf The value of services or						
5	facilities furnished by a						
	governmental unit to the						
-	organization without charge						
	<b>Total.</b> 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						
8	Public support. (Subtract line						
0	7c from line 6.)						
Sec	tion B. Total Support						
Calen	dar year (or fiscal year beginning in) 🕨	(a) 2015	<b>(b)</b> 2016	(c) 2017	(d) 2018	(e) 2019	<b>(f)</b> 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 in 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,						
14	10c, 11, and 12.)	is for the states :-	ation's first	ad third for the -	r fifth toy year	a contian E01(a) (	2\
14	organization, check this box and						
Sec	tion C. Computation of Pu	blic Support P	Percentage				
15	Public support percentage for 20	)19 (line 8, colum	n (f), divided by li	ne 13, column (f)	)	15	010
16	Public support percentage from	2018 Schedule A,	, Part III, line 15			16	010
Sec	tion D. Computation of Inv	estment Incor	me Percentage	9			
17	Investment income percentage f	or 2019 (line 10c,	, column (f), divide	ed by line 13, colu	umn (f))	17	0\0
18	Investment income percentage f	rom 2018 Schedu	ile A, Part III, line	17		18	00
19a	33-1/3% support tests-2019. If	the organization d	did not check the l	box on line 14, ar	nd line 15 is more	than 33-1/3%, and	d line 17 🚬
	is not more than 33-1/3%, check	<pre>&lt; this box and sto</pre>	p here. The organ	nization qualifies a	as a publicly supp	orted organization	トー・・・・・・ トー
b	<b>33-1/3% support tests—2018.</b> If the line 18 is not more than 33-1/3%						
20	Private foundation. If the organi		-				
				, 150, 01150, 0			

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## Part IV Supporting Organizations

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

# Section A. All Supporting Organizations

No Yes Are all of the organization's supported organizations listed by name in the organization's governing documents? 1 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 2 described in section 509(a)(1) or (2). 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If 'Yes,' answer (b) and (c) 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 c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If 'Yes,' explain in **Part VI** what controls the organization put in place to ensure such use. 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 (b) and (c) 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 despite being controlled or supervised by or in connection with its supported organizations. Δh **c** Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If 'Yes,' explain in **Part VI** what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes. 4c 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If 'Yes.' answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by 5a amendment to the organizing document). b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document? 5b c Substitutions only. Was the substitution the result of an event beyond the organization's control? 5c 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 6 or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of 6 the filing organization's supported organizations? If 'Yes,' provide detail in Part VI. 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If 'Yes,' complete Part I of Schedule L (Form 990 or 990-EZ). 7 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If 'Yes,' 8 complete Part I of Schedule L (Form 990 or 990-EZ). 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 in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? *If 'Yes,' provide detail in Part VI.* 9b c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? *If 'Yes,' provide detail in Part VI*. 9c 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If 'Yes,' answer 10b below. 10a **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine

10b

whether the organization had excess business holdings.)

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

	Has the organization accepted a gift or contribution from any of the following persons?
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the
	governing body of a supported organization?

**b** A family member of a person described in (a) above?

c A 35% controlled entity of a person described in (a) or (b) above? If 'Yes' to a, b, or c, provide detail in Part VI.

# Section B. Type I Supporting Organizations

11

- Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint 1 or elect at least a majority of the organization's 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 directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.
- 2 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If 'Yes,' explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.

## Section C. Type II Supporting Organizations

			105	110
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If 'No,' describe in <b>Part VI</b> how control or management of the			
	supporting organization was vested in the same persons that controlled or managed the supported organization(s).	1		

# Section D. All Type III Supporting Organizations

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 1 organization's governing documents in effect on the date of notification, to the extent not previously provided? Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported 2 organization(s) or (ii) serving on the governing body of a supported organization? If 'No,' explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s). 2 By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If 'Yes,' describe in Part VI the role the organization's supported organizations played 3 in this regard.

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

#### 2 Activities Test. Answer (a) and (b) below.

- a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If 'Yes,' then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.
- b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If 'Yes,' explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.
- 3 Parent of Supported Organizations. Answer (a) and (b) below.
- a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in Part VI.
- **b** Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its

No

Yes

2a

2b

3a

3h

Yes No

Page 5

No

No

Yes

Yes

11a

11b 11c

1

2

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Page	6

	dule A (Form 990 or 990-EZ) 2019 One To World, Inc.		13-31	79151	Pa
<b>′ar</b> 1	t V Type III Non-Functionally Integrated 509(a)(3) Supporting Orga				
I	Check here if the organization satisfied the Integral Part Test as a qualifying trust instructions. All other Type III non-functionally integrated supporting organization	t on No ns mus	t complete Sections A	through E.	
ec	tion A – Adjusted Net Income		(A) Prior Year	(B) Currer (optior	
1	Net short-term capital gain	1			
2	Recoveries of prior-year distributions	2			
3	Other gross income (see instructions)	3			
4	Add lines 1 through 3.	4			
5	Depreciation and depletion	5			
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6			
7	Other expenses (see instructions)	7			
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8			
ec	tion B – Minimum Asset Amount		(A) Prior Year	(B) Currer (optior	
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			
С	Fair market value of other non-exempt-use assets	1c			
d	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 1-1/2% 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 .035.	6			
7	Recoveries of prior-year distributions	7			
8	Minimum Asset Amount (add line 7 to line 6)	8			
ec	tion C – Distributable Amount			Current	Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1			
2	Enter 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	<b>Distributable Amount.</b> Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6			
7	Check here if the current year is the organization's first as a non-functionally inte	aratad	Type III supporting or	anization	

7 Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).

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Schedule A (Form 990 or 990-EZ) 2019

Part V Type III Non-Functionally Integrated 509(a)(3) Su	pporting Organiza	ations (continued)	5101 5
Section D – Distributions			Current Year
1 Amounts paid to supported organizations to accomplish exempt pur	rposes		
2 Amounts paid to perform activity that directly furthers exempt purposes of in excess of income from activity	of supported organization	IS,	
3 Administrative expenses paid to accomplish exempt purposes of su	pported organizations		
4 Amounts paid to acquire exempt-use assets			
5 Qualified set-aside amounts (prior IRS approval required)			
6 Other distributions (describe in Part VI). See instructions.			
7 Total annual distributions. Add lines 1 through 6.			
8 Distributions to attentive supported organizations to which the organization in <b>Part VI</b> ). See instructions.	on is responsive (provide	e details	
9 Distributable amount for 2019 from Section C, line 6			
10 Line 8 amount divided by line 9 amount			
Section E – Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2019	(iii) Distributable Amount for 2019
1 Distributable amount for 2019 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2019 (reasonable cause required – explain in Part VI). See instructions.			
3 Excess distributions carryover, if any, to 2019			
<b>a</b> From 2014			
<b>b</b> From 2015			
<b>c</b> From 2016			
<b>d</b> From 2017			
e From 2018			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2019 distributable amount			
i Carryover from 2014 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4 Distributions for 2019 from Section D, line 7: \$			
<b>a</b> Applied to underdistributions of prior years			
<b>b</b> Applied to 2019 distributable amount			
c Remainder. Subtract lines 4a and 4b from 4.			
5 Remaining underdistributions for years prior to 2019, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions.			
<b>6</b> Remaining underdistributions for 2019. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.			
7 Excess distributions carryover to 2020. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2015			
<b>b</b> Excess from 2016			
c Excess from 2017			
d Excess from 2018			
e Excess from 2019			

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Schedule A (Form 990 or 990-EZ) 2019

Page 8

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.) Part VI

	SCHEDULE D (Form 990) Complete if the organization answered 'Yes' on Form 990, 2019						
•	Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ► Attach to Form 990.						to Public
Intern	tment of the Treasury al Revenue Service	► Go to <i>www.irs</i>	.gov/Form990 for instructions and the la	test information.		Inspec	tion
Name	of the organization				Employer i	dentification n	number
		arld Inc			12_21	0151	
Par		orld, Inc. tions Maintaining Dong	or Advised Funds or Other Simila	r Funds or Ac	13-317 counts.	9151	
1 01	Complete	if the organization ans	wered 'Yes' on Form 990, Part IV	, line 6.			
			(a) Donor advised funds	(b)	unds and	other acco	unts
1		end of year					
2		ntributions to (during year)					
3		ants from (during year)					
4		at end of year					
5	are the organizati	ion's property, subject to the	nor advisors in writing that the assets hele organization's exclusive legal control?		· · · · · · · · · L	Yes	No
6	for charitable pur	poses and not for the benefi	ors, and donor advisors in writing that grain t of the donor or donor advisor, or for any	other purpose co	nferring _	Yes	No
Par		tion Easements.		1 <b>7</b>			
1			wered 'Yes' on Form 990, Part IV y the organization (check all that apply).	, line 7.			
1		of land for public use (for exam		servation of a hist	orically imr	ortant land	1 area
		natural habitat		servation of a cert	5 1		
		of open space					
2			held a qualified conservation contribution in t	the form of a conse	rvation ease	ement on th	е
	last day of the tax	x year.			Uold ot the	End of the	
,	Total number of a	conservation easements					
			ments				
			fied historic structure included in (a)				
C	Number of consel structure listed in	rvation easements included i the National Register	n (c) acquired after 7/25/06, and not on a	historic 2d			
3	Number of conserv tax year ►	vation easements modified, tran	nsferred, released, extinguished, or terminate	ed by the organizati	on during th	ne	
4	Number of states w	where property subject to conse	ervation easement is located ►				
5			garding the periodic monitoring, inspectio		lations,		No
6			nts it holds? inspecting, handling of violations, and enforc		asements d	Yes uring the ye	
7	Amount of expense ►\$	es incurred in monitoring, inspe	ecting, handling of violations, and enforcing o	conservation easem	ients during	the year	
8	Does each conse	rvation easement reported o	n line 2(d) above satisfy the requirements	of section 170(h)	(4)(B)(i)	Yes	No
9	In Part XIII, desci include, if applica	ribe how the organization rep able, the text of the footnote	ports conservation easements in its reven to the organization's financial statements	ue and expense s	tatement a	ש nd balance ion's accou	e sheet, and unting for
Der	conservation ease		ections of Art, Historical Treasure	s or Other Si	nilar Acc	etc	
Par	t III Organizat Complete	if the organization ans	wered 'Yes' on Form 990, Part IV	, line 8.	illiar AS:	Sels.	
1 a	historical treasure	es, or other similar assets he	r FASB ASC 958, not to report in its reve Id for public exhibition, education, or rese al statements that describes these items.	nue statement an earch in furtherand	d balance s te of public	sheet works service, p	s of art, rovide in
ł	following amounts	s relating to these items:	r FASB ASC 958, to report in its revenue or public exhibition, education, or research ir			et works of provide the	art,
	(i) Revenue inclu	uded on Form 990, Part VIII,	line 1				
2			nistorical treasures, or other similar assets for ASC 958 relating to these items:			lowing	
			. 1				
		ΠΙ ΟΠΠ 330, Fait Λ			····· - 9		

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

Schedule D (Form 990) 2019

TEEA3301L 8/22/19

Schedule D (Form 990) 2019 One D Part III Organizations Mainta			storical Trea	asures, or C	<u>13-317</u> Ither Similar Ass		Page 2
3 Using the organization's acquisition	•					•	
items (check all that apply):	, accession, a	_	-	-			
a Public exhibition			in or exchange	e program			
<b>b</b> Scholarly research <b>c</b> Preservation for future gener	ations	e Oth	ier				
<ul> <li>c Preservation for future gener</li> <li>4 Provide a description of the organiz Part XIII.</li> </ul>		ons and explain how t	ney further the	organization's e	exempt purpose in		
	tion solicit or	receive donations of	art. historical	treasures, or o	other similar assets		
5 During the year, did the organiza to be sold to raise funds rather th						Yes	No
Part IV Escrow and Custodia line 9, or reported an	I Arranger amount on	<b>ients.</b> Complete i Form 990, Part 2	f the organi K, line 21.	zation answ	vered 'Yes' on Fo	rm 990, Par	t IV,
<b>1 a</b> Is the organization an agent, trus on Form 990, Part X?	stee, custodia	n or other intermedia	ry for contribu	tions or other	assets not included	Yes	No
<b>b</b> If 'Yes,' explain the arrangement							
						Amount	
<b>c</b> Beginning balance					1 c		
<b>d</b> Additions during the year					. 1 d		
e Distributions during the year							
f Ending balance							
2 a Did the organization include an a					-		No
<b>b</b> If 'Yes,' explain the arrangement	in Part XIII. (	Check here if the exp	lanation has b	een provided o	on Part XIII	· · · · · · · · · · · L	
Part V Endowment Funds. C	amalata if	the examination	anawarad 1	laal an Earm	m 000 Dort IV/ lin	10	
Part V Endowment Funds. C	(a) Current			r <u>es on Forn</u> Two years back	(d) Three years back	(e) Four years	e back
<b>1 a</b> Beginning of year balance				Two years back	(u) Three years back		5 Dack
<b>b</b> Contributions							
-						-	
c Net investment earnings, gains, and losses							
<b>d</b> Grants or scholarships							
e Other expenditures for facilities							
and programs f Administrative expenses							
<b>g</b> End of year balance							
2 Provide the estimated percentage	e of the curre	nt vear end balance	(line 1a. colum	n (a)) held as	:		
<b>a</b> Board designated or guasi-endowm		%	(				
<b>b</b> Permanent endowment	00						
c Term endowment ►	010						
The percentages on lines 2a, 2b, and	nd 2c should e	qual 100%.					
<b>3 a</b> Are there endowment funds not in t	he nossession	of the organization th	at are held and	administered fo	or the		
organization by:						Yes	No
(i) Unrelated organizations						. 3a(i)	
(ii) Related organizations							
<b>b</b> If 'Yes' on line 3a(ii), are the rela				e R?		. <b>3b</b>	
4 Describe in Part XIII the intended		÷	ment funds.				
Part VI Land, Buildings, and Complete if the organi			orm 990 Pa	art IV line 1	1a See Form 99	0 Part X lii	ne 10
Description of property						(d) Book va	
		(a) Cost or other bas (investment)	is <b>(b)</b> Cost basis	(other)	(c) Accumulated depreciation	<b>(U)</b> DOUK VA	lue
<b>1 a</b> Land							
<b>b</b> Buildings							
c Leasehold improvements		122,522			110,116.		<u>,406.</u>
d Equipment	ŀ	78,625			73,851.	4	<u>,774.</u>
e Other		92,201		line 10= >	92,201.		0.
Total. Add lines 1a through 1e. (Colum BAA	iii (a) must ea	juai Form 990, Part /	к, coiumn (В),	IIIIe IUC.)			<u>,180.</u>
					Scheu		1 2013

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Schedule L	) (Form 990) 2019	One To World, Inc.		13-3	3179151 Page <b>3</b>
	Investments -	- Other Securities.		N/A NA Dort IV line 11b See Form	m 000 Dort V line 12
		eqory (including name of security)	(b) Book value	), Part IV, line 11b. See Forr (c) Method of valuation: Cost or e	
•••			(b) Dook value		The of-year market value
		sts			
(2) Olosely (3) Other					
(A)					
<u>(B)</u>					
(C)					
(D)					
(E)					
(F)					
(G)					
(H)					
( )					
		990, Part X, column (B) line 12.) 🕨			
Part VIII	Investments -	- Program Related.		N/A	
	(a) Description of	e organization answered	(b) Book value	), Part IV, line 11c. See Form (c) Method of valuation: Cost or (	
(1)	(a) Description of	Investment		(c) Method of Valuation. Cost of a	shu-or-year market value
(1)					<u> </u>
(2) (3)					
(3)					
(5)					
(6)					
(7)					
(8)					
(9)					
(10)					
		990, Part X, column (B) line 13.) 🕨			
Part IX	Other Assets.		N/A		000 Davit V line 15
	Complete if the		scription	), Part IV, line 11d. See Forr	(b) Book value
(1)		(a) Des			
(2)					
(3)					
(4)					
(5)					
(6)					
(7) (8)					
(8)					
(10)					
	lumn (b) must eaua	al Form 990, Part X, column (E	B) line 15.)		. ►
Part X	Other Liabiliti		,,		l
	Complete if the or	ganization answered 'Yes' on F	orm 990, Part IV, line 11	le or 11f. See Form 990, Part X, line	25.

1.	(a) Description of liability	(b) Book value
(1) Federal income taxes		
<sup>(2)</sup> Deferred Rent		33,000.
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		
(11)		
Total. (Column (b) must equal Form 990, Part X, c	olumn (B) line 25.)	▶ 33,000.

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII.

Schedule D (Form 990) 2019 One To World, Inc.	3-3179151	Page 4
Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per R	eturn.	
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.		
1 Total revenue, gains, and other support per audited financial statements	1	1,156,523.
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a Net unrealized gains (losses) on investments 2a		
<b>b</b> Donated services and use of facilities		
c Recoveries of prior year grants		
d Other (Describe in Part XIII.)		
e Add lines 2a through 2d.	2 e	114,219.
3 Subtract line 2e from line 1.	3	1,042,304.
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b Other (Describe in Part XIII.)		
c Add lines 4a and 4b.	4 c	
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	1,042,304.
Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per		
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.		
1 Total expenses and losses per audited financial statements	1	1,153,728.
2 Amounts included on line 1 but not on Form 990, Part IX, line 25:		· · · ·
a Donated services and use of facilities		
b Prior year adjustments		
c Other losses	-	
d Other (Describe in Part XIII.)	-	
e Add lines 2a through 2d.	2 e	114,219.
3 Subtract line 2e from line 1.	3	1,039,509.
4 Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b Other (Describe in Part XIII.) 4b		
c Add lines 4a and 4b		
5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	1,039,509.
Part XIII Supplemental Information.		

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

# Part X - FASB ASC 740 Footnote

One to World does not believe its financial statements include any material,

uncertain tax positions. Tax filings for periods ending June 30, 2017 and later are

subject to examination by applicable taxing authorities.

Schedule D (Form 990) 2019

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

OMB No. 1545-0047 2019 Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

One To World, Inc.

Employer identification number 13-3179151

#### Form 990. Part III. Line 4a - Program Service Accomplishments

One To World programs bring together Americans, Fulbright grantees and other international students to experience each other's lives in profound ways, creating a constant stream of face-to-face personal interactions among people from around the world. One To World is designated by the U.S. Department of State as the official coordinator of enrichment programs for visiting Fulbright grantees in the greater New Through One To World, international students and Fulbright grantees York area. interact with people in the New York area, explore American institutions "behind the scenes," visit local neighborhoods, and learn about facets of U.S. culture and society they might not otherwise encounter.

One To World activities are designed to create frameworks for reciprocal understanding and enduring relationships between future leaders from around the world and their American counterparts. Our programs enable all participants--whether American or the hundreds of nationalities represented in the U.S. government sponsored Fulbright program---to have a more complete and nuanced appreciation for the values and aspirations that we share and the challenges that we can overcome together.

Among our most popular programs for visiting international students are our "Community Visits" that enable international students to experience American home hospitality in diverse urban, suburban, and rural settings through weekend and holiday visits arranged by One to World. One to World also organizes delegations of international students to attend "Foreign Affairs Conferences" at U.S. military academies including West Point and the Naval Academy where they contribute unique

#### Form 990, Part VI, Line 6 - Explanation of Classes of Members or Shareholder

Membership in One To World is open to all persons, educational institutions and other agencies or legal entities interested in furthering the purposes of the Corporation. Members must pay the prescribed dues.

Each member has 1 vote and is invited to attend the Annual meeting and vote on the Director's slate.

Members' privileges are reduced rates on One To World's publication and the right to attend network meetings where current topics are discussed.

#### Form 990, Part VI, Line 7a - How Members or Shareholders Elect Governing Body

Each member has 1 vote and is invited to attend the Annual meeting and vote on the Director slate.

#### Form 990, Part VI, Line 7b - Decisions of Governing Body Approval by Members or Shareholders

Each member is invited to attend the Annual meeting and has 1 vote.

#### Form 990, Part VI, Line 11b - Form 990 Review Process

The form 990 was sent to the full Board of Directors via email prior to being filed with the IRS. All Directors were afforded the opportunuity to ask questions and offer edits. The decision of whether to make edits was made by the staff in charge of finances for the organization in consutlation with our tax preparer.

## Form 990, Part VI, Line 12c - Explanation of Monitoring and Enforcement of Conflicts

The organization has a board approved Conflict of Interest Policy. Each Board member must fill out an annual declaration stating they had no conflicts or identifying the nature of their interested party transactions.

#### Form 990, Part VI, Line 15a - Compensation Review & Approval Process - CEO & Top Management

The organization reviewed Form 990's of comparable organizations (NYC based, similar size, comparable scope of programming) as well as the Non Profit New York salary

Schedule O (Form 990 or 990-EZ) (2019)	Page 2
Name of the organization	Employer identification number
One To World, Inc.	13-3179151

# Form 990, Part VI, Line 15a - Compensation Review & Approval Process - CEO & Top Management (continued)

survey. The Executive Committee conducted the annual review of the Executive

Director's performance and made recommendations to the Board of Directors.

# Form 990, Part VI, Line 19 - Other Organization Documents Publicly Available

Financial statements are available upon request.

## Form 990, Part IX, Line 11g Other Fees For Services

		(A)	(B) Program	(C) Management	(D) Fund-
		Total	Services	& General	raising
Other professional fees	Total <u>\$</u>	145,427. 145,427.	35,809. \$35,809.	<u>36,383.</u> \$ <u>36,383.</u>	73,235. \$ 73,235.