

Return of Organization Exempt From Income Tax

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

Department of the Treasury
Internal Revenue Service

▶ Do not enter social security numbers on this form as it may be made public.
▶ Go to www.irs.gov/Form990 for instructions and the latest information.

A For the 2021 calendar year, or tax year beginning and ending																
B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td colspan="2">C Name of organization AVAAZ FOUNDATION</td> <td rowspan="2">D Employer identification number 20-5050267</td> </tr> <tr> <td colspan="2">Doing business as</td> </tr> <tr> <td>Number and street (or P.O. box if mail is not delivered to street address)</td> <td>Room/suite</td> <td rowspan="2">E Telephone number 917-388-3988</td> </tr> <tr> <td>27 UNION SQUARE WEST #500</td> <td></td> </tr> <tr> <td colspan="2">City or town, state or province, country, and ZIP or foreign postal code NEW YORK, NY 10003</td> <td rowspan="2">G Gross receipts \$ 27,441,594.</td> </tr> <tr> <td colspan="2">F Name and address of principal officer: ANDREW WANDER SAME AS C ABOVE</td> </tr> </table>	C Name of organization AVAAZ FOUNDATION		D Employer identification number 20-5050267	Doing business as		Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	E Telephone number 917-388-3988	27 UNION SQUARE WEST #500		City or town, state or province, country, and ZIP or foreign postal code NEW YORK, NY 10003		G Gross receipts \$ 27,441,594.	F Name and address of principal officer: ANDREW WANDER SAME AS C ABOVE	
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F Name and address of principal officer: ANDREW WANDER SAME AS C ABOVE																
I Tax-exempt status: <input type="checkbox"/> 501(c)(3) <input checked="" type="checkbox"/> 501(c) (4) (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527																
J Website: WWW.AVAAZ.ORG																
K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other																
L Year of formation: 2006	M State of legal domicile: DE															

Part I Summary		Prior Year	Current Year
Activities & Governance	1 Briefly describe the organization's mission or most significant activities: TO CLOSE THE GAP BETWEEN THE WORLD WE HAVE AND THE WORLD MOST PEOPLE EVERYWHERE WANT.		
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3 Number of voting members of the governing body (Part VI, line 1a)	3	3
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	3
	5 Total number of individuals employed in calendar year 2021 (Part V, line 2a)	5	43
	6 Total number of volunteers (estimate if necessary)	6	100
	7 a Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.
b Net unrelated business taxable income from Form 990-T, Part I, line 11	7b	0.	
Revenue	8 Contributions and grants (Part VIII, line 1h)	31,583,505.	27,122,311.
	9 Program service revenue (Part VIII, line 2g)	0.	0.
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	1,361.	-1,568.
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	1,026,949.	-177,044.
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	32,611,815.	26,943,699.
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	10,006,465.	11,345,348.
	14 Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	6,326,399.	7,391,141.
	16a Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
	b Total fundraising expenses (Part IX, column (D), line 25)	1,397,771.	
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	8,685,873.	11,053,788.
	18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	25,018,737.	29,790,277.
19 Revenue less expenses. Subtract line 18 from line 12	7,593,078.	-2,846,578.	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	25,556,020.	22,570,338.
	21 Total liabilities (Part X, line 26)	1,219,052.	1,596,848.
	22 Net assets or fund balances. Subtract line 21 from line 20	24,336,968.	20,973,490.

Part II Signature Block																
Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.																
Sign Here	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 70%;">Signature of officer</td> <td>Date</td> </tr> <tr> <td>ANDREW WANDER, ACTING CEO</td> <td></td> </tr> <tr> <td>Type or print name and title</td> <td></td> </tr> </table>	Signature of officer	Date	ANDREW WANDER, ACTING CEO		Type or print name and title										
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Paid Preparer Use Only	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td>Print/Type preparer's name SCOTT THOMPSETT</td> <td>Preparer's signature <i>Scott Thompsett</i></td> <td>Date 11/1/2022</td> <td>Check if self-employed <input type="checkbox"/></td> <td>PTIN P00741490</td> </tr> <tr> <td>Firm's name GRANT THORNTON LLP</td> <td>Firm's EIN 36-6055558</td> <td>Phone no. (212) 599-0100</td> <td colspan="2"></td> </tr> <tr> <td>Firm's address 757 THIRD AVENUE, 3RD FLOOR NEW YORK, NY 10017-2013</td> <td colspan="4"></td> </tr> </table>	Print/Type preparer's name SCOTT THOMPSETT	Preparer's signature <i>Scott Thompsett</i>	Date 11/1/2022	Check if self-employed <input type="checkbox"/>	PTIN P00741490	Firm's name GRANT THORNTON LLP	Firm's EIN 36-6055558	Phone no. (212) 599-0100			Firm's address 757 THIRD AVENUE, 3RD FLOOR NEW YORK, NY 10017-2013				
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May the IRS discuss this return with the preparer shown above? See instructions Yes No

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response or note to any line in this Part III [X]

1 Briefly describe the organization's mission: OUR DEMOCRATIC MISSION: TO CLOSE THE GAP BETWEEN THE WORLD WE HAVE AND THE WORLD MOST PEOPLE EVERYWHERE WANT. BY SIGNING UP TO RECEIVE AVAAZ EMAILS, MEMBERS ARE RAPIDLY ALERTED TO URGENT GLOBAL ISSUES AND OPPORTUNITIES TO ACHIEVE CHANGE.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? [] Yes [X] No If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? [] Yes [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 services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses \$ 23,835,248. including grants of \$ 11,345,348.) (Revenue \$ 0.) SEE SCHEDULE O

4b (Code:) (Expenses \$ including grants of \$) (Revenue \$)

4c (Code:) (Expenses \$ including grants of \$) (Revenue \$)

4d Other program services (Describe on Schedule O.) (Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses 23,835,248.

Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i>		X
2 Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> ? See instructions	X	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>		X
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>		
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Rev. Proc. 98-19? <i>If "Yes," complete Schedule C, Part III</i>		X
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>		X
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>		X
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>		X
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>		X
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>		X
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? <i>If "Yes," complete Schedule D, Part VI</i>	X	
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>		X
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? <i>If "Yes," complete Schedule D, Part VIII</i>		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 reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX</i>		X
e Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>	X	
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)? <i>If "Yes," complete Schedule D, Part X</i>	X	
12a Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i>	X	
b Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional</i>		X
13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>		X
14a Did the organization maintain an office, employees, or agents outside of the United States?	X	
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? <i>If "Yes," complete Schedule F, Parts I and IV</i>	X	
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>	X	
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>	X	
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		X
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>		X
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>		X
20a Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>		X
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		
21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>	X	

Part IV Checklist of Required Schedules (continued)

Table with 3 columns: Question ID, Question Text, Yes, No. Rows include questions 22 through 38 regarding organizational reporting, compensation, bond issues, and transactions.

Part 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

Table with 3 columns: Question ID, Question Text, Yes, No. Rows include questions 1a, 1b, and 1c regarding Form 1096, Forms W-2G, and backup withholding rules.

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

Table with columns for question number, question text, and Yes/No response boxes. Includes questions 2a through 17 regarding employee counts, tax returns, unrelated business income, foreign accounts, prohibited transactions, and charitable contributions.

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

Check if Schedule O contains a response or note to any line in this Part VI [X]

Section A. Governing Body and Management

Table with 3 columns: Question, Yes, No. Rows include: 1a Enter the number of voting members... 1b Enter the number of voting members included... 2 Did any officer, director, trustee, or key employee have a family relationship... 3 Did the organization delegate control over management duties... 4 Did the organization make any significant changes to its governing documents... 5 Did the organization become aware during the year of a significant diversion of the organization's assets... 6 Did the organization have members or stockholders... 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... 7b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body... 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: 8a The governing body? 8b Each committee with authority to act on behalf of the governing body? 9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

Table with 3 columns: Question, Yes, No. Rows include: 10a Did the organization have local chapters, branches, or affiliates? 10b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11b 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 12b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done 13 Did the organization have a written whistleblower policy? 14 Did the organization have a written document retention and destruction policy? 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? 15a The organization's CEO, Executive Director, or top management official 15b Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions. 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? 16b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed NY, DE
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.
[X] Own website [X] Another's website [X] Upon request [] Other (explain on Schedule O)
19 Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and 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
ANDREA CORON - 917-388-3988
27 UNION SQUARE WEST #500, NEW YORK, NY 10003

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

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

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

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

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) RICKEN PATEL CEO (THRU 02/2021)	40.00 0.00			X				256,170.	0.	59,997.
(2) HEATHER REDDICK COO/SECRETARY (NON-VOTING)	40.00 0.00	X		X				202,250.	0.	19,445.
(3) NELL GREENBERG ACTING DEPUTY DIRECTOR	40.00 0.00				X			183,500.	0.	15,713.
(4) BENJAMIN MARGETTS CAMPAIGN DIRECTOR	40.00 0.00					X		174,648.	0.	14,690.
(5) ANDREW WANDER ACTING CEO	40.00 0.00			X				185,903.	0.	0.
(6) NOEMIA LIBUSE*** LEGAL DIRECTOR	40.00 0.00					X		149,008.	0.	4,950.
(7) RICHARD LELAND TECHNOLOGY DIRECTOR	40.00 0.00					X		130,939.	0.	18,759.
(8) NICK FLYNN LEGAL DIRECTOR	40.00 0.00					X		133,321.	0.	0.
(9) SARAH ANDREW LEGAL DIRECTOR	40.00 0.00					X		128,817.	0.	0.
(10) MWIKALI MUTHIANI OMBUDSPERSON (NON-VOTING)	1.00 0.00	X						30,970.	0.	0.
(11) IAN JOSEPH COORDINATOR	1.00 0.00	X		X				19,837.	0.	0.
(12) NORMAN BLISSETT DIRECTOR	1.00 0.00	X						19,818.	0.	0.
(13) VAN LY PRESIDENT	1.00 0.00	X		X				19,200.	0.	0.

Part VIII Statement of Revenue

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

			(A)	(B)	(C)	(D)
			Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512 - 514
Contributions, Gifts, Grants and Other Similar Amounts	1 a	Federated campaigns	1a			
	b	Membership dues	1b			
	c	Fundraising events	1c			
	d	Related organizations	1d			
	e	Government grants (contributions)	1e			
	f	All other contributions, gifts, grants, and similar amounts not included above	1f	27,122,311.		
	g	Noncash contributions included in lines 1a-1f	1g	\$		
	h	Total. Add lines 1a-1f		27,122,311.		
Program Service Revenue	2 a		Business Code			
	b					
	c					
	d					
	e					
	f	All other program service revenue				
	g	Total. Add lines 2a-2f				
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts)		586.		586.
	4	Income from investment of tax-exempt bond proceeds				
	5	Royalties				
	6 a	Gross rents	(i) Real	487,227.		
			(ii) Personal			
			6a	487,227.		
	b	Less: rental expenses	6b	495,741.		
	c	Rental income or (loss)	6c	-8,514.		
	d	Net rental income or (loss)		-8,514.		-8,514.
	7 a	Gross amount from sales of assets other than inventory	(i) Securities			
			(ii) Other			
			7a			
			b	Less: cost or other basis and sales expenses	7b	2,154.
	c	Gain or (loss)	7c	-2,154.		
d	Net gain or (loss)		-2,154.		-2,154.	
8 a	Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18	8a				
		b	Less: direct expenses	8b		
c	Net income or (loss) from fundraising events					
9 a	Gross income from gaming activities. See Part IV, line 19	9a				
		b	Less: direct expenses	9b		
c	Net income or (loss) from gaming activities					
10 a	Gross sales of inventory, less returns and allowances	10a				
		b	Less: cost of goods sold	10b		
		c	Net income or (loss) from sales of inventory			
Miscellaneous Revenue	11 a	REIMBURSED EMPL. COSTS	900099	21,803.		21,803.
	b	FOREIGN CURRENCY LOSS	900099	-190,333.		-190,333.
	c					
	d	All other revenue				
	e	Total. Add lines 11a-11d		-168,530.		
12	Total revenue. See instructions		26,943,699.	0.	0.	-178,612.

Part IX Statement of Functional Expenses

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 ...	3,596,798.	3,596,798.		
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	7,748,550.	7,748,550.		
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	952,806.	237,108.	706,141.	9,557.
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	5,323,603.	4,040,354.	1,144,961.	138,288.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	20,508.	14,068.	5,995.	445.
9 Other employee benefits	436,392.	310,898.	115,764.	9,730.
10 Payroll taxes	657,832.	479,866.	164,825.	13,141.
11 Fees for services (nonemployees):				
a Management				
b Legal	442,345.	249,505.	192,840.	
c Accounting	130,284.		130,284.	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Sch O.)	50,844.	9,170.	41,669.	5.
12 Advertising and promotion	894,271.	880,468.	5,833.	7,970.
13 Office expenses	200,272.	132,084.	67,791.	397.
14 Information technology	888,007.	694,387.	184,526.	9,094.
15 Royalties				
16 Occupancy	261,296.	199,954.	54,924.	6,418.
17 Travel	423,060.	411,402.	11,586.	72.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials ...				
19 Conferences, conventions, and meetings	7,326.	7,124.	201.	1.
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	80,827.	61,576.	17,217.	2,034.
23 Insurance	87,723.		87,723.	
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 FRGN STAFF & CONSULTING	5,748,635.	4,371,113.	1,316,993.	60,529.
b DONATION PROCESSING FEE	1,135,983.			1,135,983.
c STAFF SUPPORT/TRAINING	225,717.	2,898.	222,819.	
d TELEPHONE AND COMMS.	170,207.	130,034.	36,066.	4,107.
e All other expenses _____	306,991.	257,891.	49,100.	
25 Total functional expenses. Add lines 1 through 24e	29,790,277.	23,835,248.	4,557,258.	1,397,771.
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.				

Check here if following SOP 98-2 (ASC 958-720)

Part X Balance Sheet

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

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing	24,391,693.	1	21,502,976.
	2 Savings and temporary cash investments	340,007.	2	340,365.
	3 Pledges and grants receivable, net	389,992.	3	179,695.
	4 Accounts receivable, net	9,901.	4	44,190.
	5 Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	257,719.	9	327,822.
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 414,173.		
	b Less: accumulated depreciation	10b 274,440.	129,036.	10c 139,733.
	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	37,672.	15	35,557.
16 Total assets. Add lines 1 through 15 (must equal line 33)	25,556,020.	16	22,570,338.	
Liabilities	17 Accounts payable and accrued expenses	1,020,126.	17	1,381,521.
	18 Grants payable		18	
	19 Deferred revenue		19	
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D	198,926.	25	215,327.
	26 Total liabilities. Add lines 17 through 25	1,219,052.	26	1,596,848.
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 27, 28, 32, and 33.			
	27 Net assets without donor restrictions	22,960,630.	27	19,180,480.
	28 Net assets with donor restrictions	1,376,338.	28	1,793,010.
	Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 29 through 33.			
	29 Capital stock or trust principal, or current funds		29	
	30 Paid-in or capital surplus, or land, building, or equipment fund		30	
	31 Retained earnings, endowment, accumulated income, or other funds		31	
	32 Total net assets or fund balances	24,336,968.	32	20,973,490.
33 Total liabilities and net assets/fund balances	25,556,020.	33	22,570,338.	

Form **990** (2021)

Part 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	26,943,699.
2	Total expenses (must equal Part IX, column (A), line 25)	2	29,790,277.
3	Revenue less expenses. Subtract line 2 from line 1	3	-2,846,578.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	24,336,968.
5	Net unrealized gains (losses) on investments	5	-516,900.
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	20,973,490.

Part XII Financial Statements and Reporting

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

- 1** Accounting method used to prepare the Form 990: Cash Accrual Other _____
If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.
- 2a** Were the organization's financial statements compiled or reviewed by an independent accountant?
If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both:
 Separate basis Consolidated basis Both consolidated and separate basis
- b** Were the organization's financial statements audited by an independent accountant?
If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:
 Separate basis Consolidated basis Both consolidated and separate basis
- c** If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?
If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.
- 3a** As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?
- b** If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits

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

Form **990** (2021)

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

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

OMB No. 1545-0047

2021

Open to Public Inspection

Name of the organization AVAAZ FOUNDATION Employer identification number 20-5050267

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

Table with 3 columns: Question, (a) Donor advised funds, (b) Funds and other accounts. Rows include total number at end of year, aggregate value of contributions, grants, and end of year, and two Yes/No questions regarding donor property and grant fund usage.

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

Form with multiple sections: 1. Purpose(s) of conservation easements (checkboxes for land, habitat, open space, historic area, structure). 2. Conservation contribution details (2a-2d table). 3-7. Monitoring and enforcement details. 8-9. Reporting requirements.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

Form with sections 1a-1b and 2. 1a-1b: Reporting requirements for art collections. 2: Reporting requirements for art held for financial gain. Includes revenue and asset reporting lines.

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule D (Form 990) 2021

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

- 3 Using the organization's acquisition, accession, and other records, check any of the following that make significant use of its collection items (check all that apply):
- a Public exhibition
 - b Scholarly research
 - c Preservation for future generations
 - d Loan or exchange program
 - e Other _____
- 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.
- 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

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

- 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No
- b If "Yes," explain the arrangement in Part XIII and complete the following table:
- | | Amount |
|---------------------------------|--------|
| c Beginning balance | 1c |
| d Additions during the year | 1d |
| e Distributions during the year | 1e |
| f Ending balance | 1f |
- 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No
- b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII

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

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

- 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
- a Board designated or quasi-endowment _____ %
 - b Permanent endowment _____ %
 - c Term endowment _____ %
- The percentages on lines 2a, 2b, and 2c should equal 100%.
- 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:
- | | Yes | No |
|--|--------|----|
| (i) Unrelated organizations | 3a(i) | |
| (ii) Related organizations | 3a(ii) | |
| b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? | 3b | |
- 4 Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment.

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements				
d Equipment		414,173.	274,440.	139,733.
e Other				
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				139,733.

Part VII Investments - Other Securities.

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

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

Part VIII Investments - Program Related.

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

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

Part IX Other Assets.

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

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

Part X Other Liabilities.

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

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) DEFERRED RENT	215,327.
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶	215,327.

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

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

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

1	Total revenue, gains, and other support per audited financial statements	1	26,935,349.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains (losses) on investments	2a	-516,900.
b	Donated services and use of facilities	2b	12,809.
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII.)	2d	495,741.
e	Add lines 2a through 2d	2e	-8,350.
3	Subtract line 2e from line 1	3	26,943,699.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	
c	Add lines 4a and 4b	4c	0.
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12.)	5	26,943,699.

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

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

1	Total expenses and losses per audited financial statements	1	30,298,827.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	12,809.
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIII.)	2d	495,741.
e	Add lines 2a through 2d	2e	508,550.
3	Subtract line 2e from line 1	3	29,790,277.
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	4c	0.
5	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18.)	5	29,790,277.

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, LINE 2:

THE ORGANIZATION FOLLOWS GUIDANCE THAT CLARIFIES THE ACCOUNTING FOR
 UNCERTAINTY IN TAX POSITIONS TAKEN OR EXPECTED TO BE TAKEN IN A TAX
 RETURN, INCLUDING ISSUES RELATING TO FINANCIAL STATEMENT RECOGNITION AND
 MEASUREMENT. THIS GUIDANCE PROVIDES THAT THE TAX EFFECTS FROM AN UNCERTAIN
 TAX POSITION CAN ONLY BE RECOGNIZED IN THE FINANCIAL STATEMENTS IF THE
 POSITION IS "MORE-LIKELY-THAN-NOT" TO BE SUSTAINED IF THE POSITION WERE TO
 BE CHALLENGED BY A TAXING AUTHORITY. THE ASSESSMENT OF THE TAX POSITION IS
 BASED SOLELY ON THE TECHNICAL MERITS OF THE POSITION, WITHOUT REGARD TO
 THE LIKELIHOOD THAT THE TAX POSITION MAY BE CHALLENGED.

THE ORGANIZATION IS AN ORGANIZATION EXEMPT FROM FEDERAL INCOME TAXATION

Part XIII Supplemental Information (continued)

UNDER 501(C)(4) OF THE IRC; ALTHOUGH, THE ORGANIZATION IS SUBJECT TO TAX
 ON INCOME UNRELATED TO ITS EXEMPT PURPOSE, UNLESS THAT INCOME IS OTHERWISE
 EXCLUDED BY THE IRC. THE ORGANIZATION HAS PROCESSES PRESENTLY IN PLACE TO
 ENSURE THE MAINTENANCE OF ITS TAX-EXEMPT STATUS; TO IDENTIFY AND REPORT
 UNRELATED INCOME; TO DETERMINE ITS FILING AND TAX OBLIGATIONS IN
 JURISDICTIONS FOR IT HAS NEXUS; AND TO IDENTIFY AND EVALUATE OTHER MATTERS
 THAT MAY BE CONSIDERED TAX POSITIONS. THE ORGANIZATION HAS DETERMINED THAT
 THERE ARE NO MATERIAL UNCERTAIN TAX POSITIONS THAT REQUIRE RECOGNITION OR
 DISCLOSURE IN THE FINANCIAL STATEMENTS. IN ADDITION, THE ORGANIZATION HAS
 DETERMINED THAT IT HAS NOT GENERATED MATERIAL UNRELATED BUSINESS INCOME
 AND, THEREFORE, NO INCOME TAX PROVISION IS REQUIRED.

PART XI, LINE 2D - OTHER ADJUSTMENTS:

RECLASS OF RENTAL EXPENSES REPORTED ON PART VIII, LINE 6B	495,741.
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PART XII, LINE 2D - OTHER ADJUSTMENTS:

RECLASS OF RENTAL EXPENSES REPORTED ON PART VIII, LINE 6B	495,741.
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**SCHEDULE F
(Form 990)**

Department of the Treasury
Internal Revenue Service

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

2021

Open to Public
Inspection

Name of the organization AVAAZ FOUNDATION	Employer identification number 20-5050267
---	---

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

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

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

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

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in the region	(d) Activities conducted in the region (by type) (such as, fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in the region	(f) Total expenditures for and investments in the region
EAST ASIA AND THE PACIFIC	0	7	PROGRAM SERVICES	CAMPAIGN & CONSULTING	323,314.
EUROPE (INCLUDING ICELAND & GREENLAND)	0	0	GRANTMAKING		4,762,533.
EUROPE (INCLUDING ICELAND & GREENLAND)	1	68	PROGRAM SERVICES	CAMPAIGN & CONSULTING	6,081,538.
MIDDLE EAST AND NORTH AFRICA	0	0	GRANTMAKING		569,805.
MIDDLE EAST AND NORTH AFRICA	0	6	PROGRAM SERVICES	CAMPAIGN & CONSULTING	335,907.
NORTH AMERICA	0	0	GRANTMAKING		15,000.
NORTH AMERICA	2	8	PROGRAM SERVICES	CAMPAIGN & CONSULTING	582,529.
RUSSIA AND NEIGHBORING STATES	0	2	PROGRAM SERVICES	TRANSLATE & CONSULTING	63,959.
3 a Subtotal	3	91			12,734,585.
b Total from continuation sheets to Part I	0	19			3,712,045.
c Totals (add lines 3a and 3b)	3	110			16,446,630.

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

Schedule F (Form 990) 2021

Part I Continuation of Activities per Region. (Schedule F (Form 990), Part I, line 3)

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
SOUTH AMERICA	0	0	GRANTMAKING		656,198.
SOUTH AMERICA	0	16	PROGRAM SERVICES	CAMPAIGN & CONSULTING	1,116,722.
SOUTH ASIA	0	0	GRANTMAKING		364,000.
SOUTH ASIA	0	0	PROGRAM SERVICES	CAMPAIGN & CONSULTING	62,516.
SUB-SAHARAN AFRICA	0	0	GRANTMAKING		1,381,014.
SUB-SAHARAN AFRICA	0	3	PROGRAM SERVICES	CAMPAIGN & CONSULTING	131,595.
Totals		19			3,712,045.

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

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	COVID-19 HUMANITARIAN AID & COVID-19 SUPPORT	635,869.	WIRE TRANSFER	0.		
		SUB-SAHARAN AFRICA	COVID-19 SUPPORT	225,000.	WIRE TRANSFER	0.		
		EUROPE (INCLUDING ICELAND & GREENLAND)	AFGHANISTAN HUMANITARIAN AID	200,000.	WIRE TRANSFER	0.		
		SUB-SAHARAN AFRICA	ANTI-OIL PIPELINE	27,135.	WIRE TRANSFER	0.		
		EUROPE (INCLUDING ICELAND & GREENLAND)	CLIMATE	29,479.	WIRE TRANSFER	0.		
		SUB-SAHARAN AFRICA	ANTI-OIL PIPELINE	30,000.	WIRE TRANSFER	0.		
		SUB-SAHARAN AFRICA	HUMAN RIGHTS & ANTI-OIL PIPELINE	108,718.	WIRE TRANSFER	0.		
		EUROPE (INCLUDING ICELAND & GREENLAND)	AFGHANISTAN HUMANITARIAN AID	60,000.	WIRE TRANSFER	0.		

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as a tax exempt 501(c)(3) organization by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter **34**

3 Enter total number of other organizations or entities **0**

Part II Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1)								
1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SOUTH AMERICA	AMAZON COVID-19 HUMANITARIAN AID	20,000.	WIRE TRANSFER	0.		
		SOUTH AMERICA	SAVE THE AMAZON & AMAZON COVID-19 HUMANITARIAN AID	295,955.	WIRE TRANSFER	0.		
		SOUTH AMERICA	AMAZON COVID-19 HUMANITARIAN AID	251,243.	WIRE TRANSFER	0.		
		SOUTH AMERICA	SAVE THE AMAZON	11,000.	WIRE TRANSFER	0.		
		EUROPE (INCLUDING ICELAND & GREENLAND)	REFUGEES AND MIGRANTS	801,675.	WIRE TRANSFER	0.		
		EUROPE (INCLUDING ICELAND & GREENLAND)	CLIMATE	450,404.	WIRE TRANSFER	0.		
		SOUTH ASIA	COVID-19 HUMANITARIAN AID	10,000.	WIRE TRANSFER	0.		
		SOUTH AMERICA	SAVE THE AMAZON	63,000.	WIRE TRANSFER	0.		
		EUROPE (INCLUDING ICELAND & GREENLAND)	YEMEN HUMANITARIAN AID	200,000.	WIRE TRANSFER	0.		

Part II Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1)								
1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	CLIMATE	32,092.	WIRE TRANSFER	0.		
		EUROPE (INCLUDING ICELAND & GREENLAND)	COVID-19 HUMANITARIAN AID	815,108.	WIRE TRANSFER	0.		
		SUB-SAHARAN AFRICA	COVID-19 SUPPORT	300,000.	WIRE TRANSFER	0.		
		EUROPE (INCLUDING ICELAND & GREENLAND)	YEMEN HUMANITARIAN AID, COVID-19 HUMANITARIAN AID, & AFGHAN. HUMAN. AID	1,366,265.	WIRE TRANSFER	0.		
		MIDDLE EAST AND NORTH AFRICA	YEMEN HUMANITARIAN AID	309,805.	WIRE TRANSFER	0.		
		EUROPE (INCLUDING ICELAND & GREENLAND)	CLIMATE	40,996.	WIRE TRANSFER	0.		
		SOUTH ASIA	COVID-19 HUMANITARIAN AID	154,000.	WIRE TRANSFER	0.		
		SOUTH AMERICA	COVID-19 SUPPORT	7,500.	WIRE TRANSFER	0.		
		SUB-SAHARAN AFRICA	COVID-19 HUMANITARIAN AID	7,200.	WIRE TRANSFER	0.		

Part II Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1)								
1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		MIDDLE EAST AND NORTH AFRICA	BEIRUT HUMANITARIAN AID	10,000.	WIRE TRANSFER	0.		
		EUROPE (INCLUDING ICELAND & GREENLAND)	REFUGEES AND MIGRANTS	265,444.	WIRE TRANSFER	0.		
		SOUTH ASIA	COVID-19 HUMANITARIAN AID	200,000.	WIRE TRANSFER	0.		
		SUB-SAHARAN AFRICA	COVID-19 HUMANITARIAN AID	15,000.	WIRE TRANSFER	0.		
		EUROPE (INCLUDING ICELAND & GREENLAND)	REFUGEES AND MIGRANTS	441,424.	WIRE TRANSFER	0.		
		EUROPE (INCLUDING ICELAND & GREENLAND)	CLIMATE	35,108.	WIRE TRANSFER	0.		
		NORTH AMERICA	COVID-19 HUMANITARIAN AID	15,000.	WIRE TRANSFER	0.		
		MIDDLE EAST AND NORTH AFRICA	YEMEN HUMANITARIAN AID	250,000.	WIRE TRANSFER	0.		

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16.

Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of noncash assistance	(g) Description of noncash assistance	(h) Method of valuation (book, FMV, appraisal, other)
COVID-19 SUPPORT	SOUTH AMERICA	1	7,500.	WIRE TRANSFER	0.		
CLIMATE	EUROPE (INCLUDING ICELAND & GREENLAND)	1	56,630.	WIRE TRANSFER	0.		

Part IV Foreign Forms

- 1 Was the organization a U.S. transferor of property to a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)* Yes No

- 2 Did the organization have an interest in a foreign trust during the tax year? *If "Yes," the organization may be required to separately file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; don't file with Form 990)* Yes No

- 3 Did the organization have an ownership interest in a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect to Certain Foreign Corporations (see Instructions for Form 5471)* Yes No

- 4 Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? *If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)* Yes No

- 5 Did the organization have an ownership interest in a foreign partnership during the tax year? *If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships (see Instructions for Form 8865)* Yes No

- 6 Did the organization have any operations in or related to any boycotting countries during the tax year? *If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713; don't file with Form 990)* Yes No

Part V Supplemental Information

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

PART I, LINE 2:

AVAAZ REQUESTS PERIODIC NARRATIVE AND FINANCIAL REPORTING OF GRANT-FUNDED

ACTIVITIES FROM GRANTEES. GRANTS ARE ACCOUNTED FOR UNDER THE ACCRUAL

BASIS METHOD OF ACCOUNTING.

Multiple horizontal lines for supplemental information input.

**SCHEDULE I
(Form 990)**

Department of the Treasury
Internal Revenue Service

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

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

▶ Attach to Form 990.

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

OMB No. 1545-0047

2021

**Open to Public
Inspection**

Name of the organization **AVAAZ FOUNDATION** Employer identification number **20-5050267**

Part I General Information on Grants and Assistance

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? **Yes** **No**

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
ACTIONAID USA 1220 L STREET NW WASHINGTON, DC 20005	52-2277575	501(C)(3)	200,579.	0.			AFGHANISTAN HUMANITARIAN AID
ALLIANCE FOR OPEN SOCIETY INTERNATIONAL, INC. - 224 W 57TH STREET - NEW YORK, NY 10019	81-0623035	501(C)(3)	400,000.	0.			AFGHANISTAN HUMANITARIAN AID
AMBEDKAR ASSOCIATION OF NORTH AMERICA - 7080 FOXRIDGE DRIVE - CANTON, MI 48187	26-2793893	501(C)(3)	250,000.	0.			COVID-19 HUMANITARIAN AID
BAITULMAAL INC. 2300 VALLEY VIEW LANE, SUITE 385 IRVING, TX 75062	20-0942434	501(C)(3)	82,540.	0.			YEMEN HUMANITARIAN AID
CENTER FOR FOOD SAFETY 660 PENNSYLVANIA AVE. SE, SUITE 402 WASHINGTON, DC 20003	52-2165893	501(C)(3)	100,000.	0.			ANTI-PESTICIDE
DREAM CORPS P.O. BOX 210094 SAN FRANCISCO, NY 94121	26-1140201	501(C)(3)	15,000.	0.			COVID-19

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ▶ 20.

3 Enter total number of other organizations listed in the line 1 table ▶ 0.

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

Schedule I (Form 990) 2021

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
EARTH ISLAND INSTITUTE 2150 ALLSTON WAY, SUITE 460 BERKELEY, CA 94704	94-2889684	501(C)(3)	105,000.	0.			COVID-19 HUMANITARIAN AID
FRIENDS OF THE WORLD FOOD PROGRAM INC. - 1725 I STREET NW, SUITE 510 - WASHINGTON, DC 20006	13-3843435	501(C)(3)	1,000,000.	0.			YEMEN HUMANITARIAN AID
IF NOT US THEN WHO 1742 HAPPY TRAIL TOPANGA, CA 90290	81-4186787	501(C)(3)	10,315.	0.			SAVE THE AMAZON
INDIAN MUSLIM RELIEF AND CHARITIES 849 INDEPENDENCE AVE., STE A MOUNTAIN VIEW, CA 94043	27-0058132	501(C)(3)	125,000.	0.			COVID-19 HUMANITARIAN AID
ISALIAH 2356 UNIVERSITY AVE. W, SUITE 405 ST. PAUL, MN 55114	41-1957358	501(C)(3)	20,000.	0.			RACIAL JUSTICE
ISLAMIC RELIEF USA 3655 WHEELER AVE. ALEXANDRIA, VA 22304	95-4453134	501(C)(3)	350,000.	0.			YEMEN HUMANITARIAN AID
MADRE INC. 121 W 27TH STREET, SUITE 604 NEW YORK, NY 10001	13-3280194	501(C)(3)	200,000.	0.			AFGHANISTAN HUMANITARIAN AID
NORTHSIDE RESIDENTS REDEVELOPMENT COUNCIL INC. - 1303 GOLDEN VALLEY ROAD - MINNEAPOLIS, MN 55411	41-0975381	501(C)(3)	10,000.	0.			RACIAL JUSTICE
PARTNERS RELIEF & DEVELOPMENT 583 ADA DRIVE SE, STE. 101 ADA, MI 49301-9160	22-3786806	501(C)(3)	11,000.	0.			SYRIA HUMANITARIAN AID

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
RAINFOREST FOUNDATION INC. P.O. BOX 26908 BROOKLYN, NY 11202	95-1622945	501(C)(3)	24,980.	0.			SAVE THE AMAZON
RAINFOREST TRUST P.O. BOX 841 WARRENTON, VA 20188	13-3500609	501(C)(3)	342,000.	0.			BIODIVERSITY
TECH INTEGRITY INSTITUTE 103 HAVEMEYER ST., APT. 3A BROOKLYN, NY 11211	87-2867555	501(C)(3)	20,000.	0.			ANTI-DISINFORMATION
U.S. PUBLIC INTEREST RESEARCH GROUP EDUCATION FUND INC. - 294 WASHINGTON ST, SUITE 500 - BOSTON, CA 02108	52-1384240	501(C)(3)	100,000.	0.			ANTI MISUSE OF ANTIBIOTICS IN MEAT
US INDIA POLICY INSTITUTE 1717 PENNSYLVANIA AVENUE NW, SUITE WASHINGTON, DC 20006	45-3600137	501(C)(3)	230,000.	0.			COVID-19 HUMANITARIAN AID

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

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance

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

PART I, LINE 2:

AVAAZ REQUESTS PERIODIC NARRATIVE AND FINANCIAL REPORTING OF GRANT-FUNDED
ACTIVITIES FROM GRANTEEES. GRANTS GIVEN ARE ACCOUNTED FOR UNDER THE ACCRUAL
METHOD.

**SCHEDULE J
(Form 990)**

Compensation Information

OMB No. 1545-0047

2021

Open to Public Inspection

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees
 ▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23.
 ▶ Attach to Form 990.
 ▶ Go to www.irs.gov/Form990 for instructions and the latest information.

Department of the Treasury
Internal Revenue Service

Name of the organization: AVAAZ FOUNDATION
 Employer identification number: 20-5050267

Part I Questions Regarding Compensation

1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.

- | | |
|--|--|
| <input type="checkbox"/> First-class or charter travel | <input type="checkbox"/> Housing allowance or residence for personal use |
| <input type="checkbox"/> Travel for companions | <input type="checkbox"/> Payments for business use of personal residence |
| <input type="checkbox"/> Tax indemnification and gross-up payments | <input type="checkbox"/> Health or social club dues or initiation fees |
| <input type="checkbox"/> Discretionary spending account | <input type="checkbox"/> Personal services (such as maid, chauffeur, chef) |

b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain

2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?

3 Indicate which, if any, of the following the organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.

- | | |
|--|---|
| <input type="checkbox"/> Compensation committee | <input type="checkbox"/> Written employment contract |
| <input type="checkbox"/> Independent compensation consultant | <input checked="" type="checkbox"/> Compensation survey or study |
| <input type="checkbox"/> Form 990 of other organizations | <input checked="" type="checkbox"/> Approval by the board or compensation committee |

4 During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:

- a** Receive a severance payment or change-of-control payment?
- b** Participate in or receive payment from a supplemental nonqualified retirement plan?
- c** Participate in or receive payment from an equity-based compensation arrangement?
- If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.

Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.

5 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:

- a** The organization?
- b** Any related organization?
- If "Yes" on line 5a or 5b, describe in Part III.

6 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:

- a** The organization?
- b** Any related organization?
- If "Yes" on line 6a or 6b, describe in Part III.

7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III

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

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

	Yes	No
1b		
2	X	
4a	X	
4b		X
4c		X
5a		X
5b		X
6a		X
6b		X
7		X
8		X
9		

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

Schedule J (Form 990) 2021

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

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

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

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC and/or 1099-NEC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1) RICKEN PATEL CEO (THRU 02/2021)	(i)	66,874.	0.	189,296.	59,997.	0.	316,167.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) HEATHER REDDICK COO/SECRETARY (NON-VOTING)	(i)	202,250.	0.	0.	0.	19,445.	221,695.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(3) NELL GREENBERG ACTING DEPUTY DIRECTOR	(i)	183,500.	0.	0.	0.	15,713.	199,213.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(4) BENJAMIN MARGETTS CAMPAIGN DIRECTOR	(i)	174,648.	0.	0.	0.	14,690.	189,338.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(5) ANDREW WANDER ACTING CEO	(i)	184,086.	0.	1,817.	0.	0.	185,903.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(6) NOEMIA LIBUSE*** LEGAL DIRECTOR	(i)	149,008.	0.	0.	0.	4,950.	153,958.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

Part III Supplemental Information

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

PART I, LINE 4A:

RICKEN PATEL, CEO, RECEIVED A SEVERANCE PAYMENT OF \$189,296 DUE TO HIS

DEPARTURE FROM THE ORGANIZATION IN CALENDAR YEAR 2021 WHICH IS REFLECTED IN

SCHEDULE J, PART II, COLUMN (B)(III), AS WELL AS A DEFERRED SEVERANCE

PAYMENT OF \$59,997 TO BE PAID IN 2022 WHICH IS REFLECTED IN SCHEDULE J,

PART II, COLUMN (C).

**SCHEDULE O
(Form 990)**

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2021

Open to Public
Inspection

Name of the organization

AVAAZ FOUNDATION

Employer identification number

20-5050267

FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS:

GLOBAL COMMUNITY

AVAAZ EMPOWERED ITS WORLDWIDE MEMBERSHIP OF ALMOST 69 MILLION IN 2021,

SUPPORTING ACTIONS INCLUDING PETITION SIGNATURES, MESSAGES AND CALLS TO

POLITICAL LEADERS AND POLICYMAKERS, AND DONATIONS. IN ADDITION, AVAAZ

HELPED OVER ONE HUNDRED THOUSAND MEMBERS TO START THEIR OWN CAMPAIGNS

TO WIN PROGRESS ACROSS THE WORLD.

DEFEND DEMOCRACY AGAINST DISINFORMATION

IN THE EUROPEAN UNION, IN BRAZIL AND IN THE UNITED STATES, AVAAZ

PREPARED AND PUBLISHED RESEARCH, REPORTS, AND LEGISLATION PROPOSALS,

AND PARTNERED WITH OTHER INSTITUTIONS TO ADVOCATE FOR REGULATING SOCIAL

MEDIA PLATFORMS TO ENSURE THEY DID NOT AMPLIFY DISINFORMATION CONTENT.

AVAAZ HELD TRAINING SESSIONS ON DISINFORMATION RESEARCH FOR PARTNER

ORGANIZATIONS, SHARED STORIES OF DISINFORMATION VICTIMS, AND MET WITH

EMPLOYEES OF SOCIAL MEDIA PLATFORMS TO SPREAD AWARENESS OF THE HARMS

CAUSED BY DISINFORMATION.

CLIMATE AND BIODIVERSITY

THROUGH A SERIES OF MEMBER ENGAGEMENT CAMPAIGNS THAT INCLUDED TARGETED

MEDIA ACTIONS AND HUNDREDS OF PERSONAL MESSAGES TO THE CEO OF THE

INTERNATIONAL ENERGY AGENCY (IEA), AVAAZ CAMPAIGNED FOR THE IEA'S

ANNUAL REPORT TO CONSIDER THE LATEST CLIMATE SCIENCE AND TAKE A STRONG

STANCE ON CLIMATE GOALS. THE IEA ULTIMATELY EMBRACED THE PARIS CLIMATE

AGREEMENT GOALS AND CALLED FOR A STOP TO NEW OIL, GAS, AND COAL

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

Schedule O (Form 990) 2021

132211 11-11-21

Name of the organization AVAAZ FOUNDATION	Employer identification number 20-5050267
--	--

EXPLORATION, AND FOR AN END TO THE DOMINANCE OF HYDROCARBONS.

WHEN A GROUP OF CHILDREN AND YOUNG PEOPLE FILED A LAWSUIT AGAINST 33

EUROPEAN GOVERNMENTS FOR INACTION AGAINST CLIMATE CHANGE, AVAAZ RAISED

MORE THAN \$1 MILLION TO SUPPORT THEIR CASE AND FUNDED THE LARGEST AND

MOST INTERNATIONAL SCIENTIFIC STUDY IN CLIMATE ANXIETY IN YOUNG

GENERATIONS. THE STUDY WAS PUBLISHED IN THE LANCET PLANETARY HEALTH AND

THE FINDINGS WERE INCLUDED IN THE OPENING SPEECH OF THE UNGA BY THE UN

SECRETARY-GENERAL.

WHEN WORLD GOVERNMENTS CAME TOGETHER IN GLASGOW FOR THE UN CLIMATE

CHANGE CONFERENCE (COP26), AVAAZ LAUNCHED CAMPAIGNS AND ADVOCACY

MEETINGS, CALLING FOR A RATCHET MECHANISM TO CONTINUALLY UPGRADE

GOVERNMENTS' COMMITMENTS ON CLIMATE, AS WELL AS CALLING ON COUNTRIES TO

COMMIT \$100 BILLION PER YEAR IN CLIMATE FINANCE TO HELP LESS WEALTHY

NATIONS ADAPT TO CLIMATE CHANGE AND MITIGATE FURTHER RISES IN

TEMPERATURE.

AHEAD OF KEY MEETINGS AT THE INTERNATIONAL UNION FOR CONSERVATION OF

NATURE (IUCN) AND CONVENTION ON BIOLOGICAL DIVERSITY (CBD), AVAAZ

COLLECTED MILLIONS OF SIGNATURES IN FAVOR OF RECOGNIZING INDIGENOUS

CULTURAL AND LAND RIGHTS, AND CONSERVING HALF OF THE PLANET UNDER THEIR

LEADERSHIP, AND ENGAGED IN ADVOCACY TO PURSUE THIS GOAL.

HUMAN RIGHTS AND HUMANITARIAN ISSUES

WHEN THE TALIBAN'S REGIME WAS RE-ESTABLISHED IN AFGHANISTAN, AVAAZ RAN

AN EMERGENCY FUNDRAISER AND GRANTED OVER \$1.35 MILLION TO ORGANIZATIONS

PROVIDING FOOD AND LIFE-SAVING MEDICAL SUPPLIES TO THE MOST VULNERABLE,

Name of the organization AVAAZ FOUNDATION	Employer identification number 20-5050267
--	--

AND TO GROUPS HELPING THOSE MOST AT RISK REACH SAFETY. AVAAZ ALSO PARTNERED WITH THE MALALA FUND TO SEND A GLOBAL PLEA TO ALLOW ALL AFGHAN GIRLS TO GO TO SCHOOL, COLLECTING MORE THAN 1.2 MILLION SIGNATURES.

AVAAZ RAISED MORE THAN \$4 MILLION TO SUPPORT ORGANIZATIONS PROVIDING THE MOST VULNERABLE FAMILIES IN YEMEN WITH BASIC FOOD AND HEALTH CARE NEEDS.

AHEAD OF THE GENERATION EQUALITY FORUM IN JUNE 2021, AVAAZ RAN A PETITION TARGETING SUPPORTIVE COUNTRIES INCLUDING ARGENTINA, ECUADOR AND SPAIN, AS WELL AS ALL NATIONS AROUND THE WORLD, TO RATIFY THE CONVENTION ON VIOLENCE AND HARASSMENT TO PROTECT WOMEN IN THE WORKPLACE. THE PETITION GATHERED MORE THAN 600,000 SIGNATURES.

FORM 990, PART VI, SECTION A, LINE 6:
THE FOUNDATION HAS ONE CLASS OF VOTING MEMBERS OR TRUSTEES AS SPECIFIED IN ITS BYLAWS.

FORM 990, PART VI, SECTION A, LINE 7A:
PURSUANT TO THE FOUNDATION'S BYLAWS, THE MEMBERS MAY REMOVE OR APPOINT A DIRECTOR TO THE BOARD OF DIRECTORS BY UNANIMOUS VOTE. MEMBERS MAY UNANIMOUSLY VETO THE BOARD OF DIRECTORS' APPOINTMENT OR REMOVAL OF A DIRECTOR.

FORM 990, PART VI, SECTION A, LINE 7B:
PURSUANT TO THE FOUNDATION'S BYLAWS, ANY AMENDMENT TO THE CERTIFICATE OF INCORPORATION REQUIRES APPROVAL OF ALL MEMBERS. ONLY THE MEMBERS MAY ADOPT,

Name of the organization AVAAZ FOUNDATION	Employer identification number 20-5050267
--	--

AMEND, OR REPEAL THE BYLAWS.

FORM 990, PART VI, SECTION A, LINE 8B:

THE BOARD DOES NOT HAVE ANY COMMITTEES, AS SUCH, THERE ARE NO COMMITTEE

MEETINGS TO DOCUMENT.

FORM 990, PART VI, SECTION B, LINE 11B:

THE FORM 990 IS REVIEWED BY CEO AND COO. AVAAZ PRESENTS A COPY OF THE 990

TO ALL BOARD MEMBERS FOR THEIR REVIEW AND APPROVAL PRIOR TO ELECTRONICALLY

FILING FORM 990 WITH THE IRS.

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

THE ORGANIZATION'S CONFLICT OF INTEREST POLICY REQUIRES ALL BOARD OF

DIRECTORS MEMBERS AND EMPLOYEES HOLDING OFFICER (AND/OR KEY EMPLOYEE)

POSITIONS TO CERTIFY THAT THEY HAVE NO CONFLICTS OF INTEREST. THE

ORGANIZATION REQUIRES PERIODIC UPDATES TO CONFIRM THAT EACH INDIVIDUAL'S

INDEPENDENCE IS NOT IMPAIRED.

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

COMPENSATION FOR THE CEO WAS DETERMINED BY THE INDEPENDENT VOTING MEMBERS

OF THE BOARD BASED ON A COMPREHENSIVE STUDY OF COMPARABLE ORGANIZATIONS'

REMUNERATION FOR THEIR CEO-EQUIVALENT LEADERSHIP POSITION, AND A POLL OF

AVAAZ MEMBERS AND DONORS ON WHAT THEY CONSIDER APPROPRIATE CEO

COMPENSATION. THE ACTING CHIEF EXECUTIVE OFFICER IS COMPENSATED BASED ON

THE PRIOR POSITION HE HELD WITH THE ORGANIZATION; HIS COMPENSATION WAS

ADJUSTED IN 2021 BASED ON A NEW COMPENSATION STUDY CONDUCTED BY THE BOARD

OF DIRECTORS.

Name of the organization AVAAZ FOUNDATION	Employer identification number 20-5050267
--	--

FORM 990, PART VI, SECTION C, LINE 19:

AVAAZ FOUNDATION'S FORM 990 AND FINANCIAL STATEMENTS ARE POSTED ON THE ORGANIZATION'S WEBSITE. AVAAZ FOUNDATION'S FORM 990 IS ALSO POSTED ON THE INTERNET AT WWW.GUIDESTAR.ORG. THE GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND FINANCIAL STATEMENTS ARE AVAILABLE UPON REQUEST AND AT MANAGEMENT'S DISCRETION.

FORM 990, PART VII, SECTION A: BOARD COMPOSITION IN 2021

*** DUE TO CONCERN FOR THE PERSONAL SAFETY OF ONE INDIVIDUAL, THE FOUNDATION HAS ELECTED TO USE A PSEUDONYM TO OBSCURE THE INDIVIDUAL'S TRUE IDENTITY. THE NAME OF THIS INDIVIDUAL IS AVAILABLE UPON REQUEST BY THE INTERNAL REVENUE SERVICE.

FORM 990, SCHEDULE B, PART I:

IN 2021, 25 DONORS FROM 16 COUNTRIES EACH MADE AGGREGATE CONTRIBUTIONS TOTALING THE USD EQUIVALENT OF \$5,000 OR MORE. THE MAXIMUM CONTRIBUTED BY A SINGLE DONOR WAS \$22,865 USD. THE TOTAL CONTRIBUTED FROM THESE 25 DONORS WAS \$234,922 USD, REPRESENTING 0.87% OF TOTAL CONTRIBUTIONS IN 2021.

AVAAZ DOES NOT ALLOW SINGLE DONATIONS OF MORE THAN 5,000 USD/EUR/GBP.