

TAX RETURN FILING INSTRUCTIONS

** FORM 990 PUBLIC DISCLOSURE COPY **

FOR THE YEAR ENDING

DECEMBER 31, 2018

Prepared for	CENTER FOR GLOBAL DEVELOPMENT 2055 L STREET NW NO. 5TH FL WASHINGTON, DC 20036
Prepared by	GELMAN, ROSENBERG & FREEDMAN 4550 MONTGOMERY AVE SUITE 800N BETHESDA, MD 20814-2930
Amount due or refund	NOT APPLICABLE
Make check payable to	NOT APPLICABLE
Mail tax return and check (if applicable) to	NOT APPLICABLE
Return must be mailed on or before	NOT APPLICABLE
Special Instructions	THIS RETURN HAS QUALIFIED FOR ELECTRONIC FILING. THE RETURN HAS BEEN TRANSMITTED ELECTRONICALLY TO THE IRS AND NO FURTHER ACTION IS REQUIRED.

** PUBLIC DISCLOSURE COPY **

Return of Organization Exempt From Income Tax
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

OMB No. 1545-0047

Inspection

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.

Open to Public

Α	For th	e 2018 calendar year, or tax year beginning and o	ending	_	
В	Check if applicab	C Name of organization		D Employer identifi	cation number
	Addr	SE CENTER FOR GLOBAL DEVELOPMENT			
	Name chan			52-2	351337
	Initial returr Final returr		Room/suite 5TH FL	E Telephone numbe 202-	r 416-4000
	termi ated	City or town, state or province, country, and ZIP or foreign postal code		G Gross receipts \$	32,279,349.
	Amer returr	ded MACHINGHON DC 20026		H(a) Is this a group re	eturn
	Appli tion	F Name and address of principal officer:MASOOD AHMED		for subordinates	? Yes X No
	pend	SAME AS C ABOVE		H(b) Are all subordinates in	ncluded? Yes No
		empt status: $X = 501(c)(3) = 501(c)(1)$ (insert no.) 4947(a)(1) c	or 527	If "No," attach a	list. (see instructions)
		te: ► WWW.CGDEV.ORG		H(c) Group exemptio	
		forganization: X Corporation Trust Association Other	L Year	of formation: 2001 $_{ m N}$	1 State of legal domicile: DC
P	art I	Summary			
ø	1	Briefly describe the organization's mission or most significant activities: SEE I	PART I	II, LINE 1.	
and					
Governance	2	Check this box if the organization discontinued its operations or dispos			
Š	3	Number of voting members of the governing body (Part VI, line 1a)			21
<u>«</u>	4	Number of independent voting members of the governing body (Part VI, line 1b) ${}_{\cdot}$			20
ies	5	Total number of individuals employed in calendar year 2018 (Part V, line 2a)			90
Activities &	6	Total number of volunteers (estimate if necessary)			20
Ac		Total unrelated business revenue from Part VIII, column (C), line 12			0.
	b	Net unrelated business taxable income from Form 990-T, line 38	······		39,062.
		0	-	Prior Year 12,139,829.	Current Year 29,853,740.
ne	8	Contributions and grants (Part VIII, line 1h)	·····	962,381.	980,044.
Revenue	9	Program service revenue (Part VIII, line 2g)	· -	670,273.	795,305.
Be	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		070,273.	795,305.
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		13,772,483.	31,629,089.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		898,891.	968,450.
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		0,00,001.	700, 430.
	14	Benefits paid to or for members (Part IX, column (A), line 4)		8,627,521.	9,865,996.
Expenses	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) . Professional fundraising fees (Part IX, column (A), line 11e)		0,027,321.	0.
ben	l loa	Total fundraising expenses (Part IX, column (A), line 25) 766, 91	11.	<u> </u>	.
$\overline{\mathbf{x}}$	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		5,499,389.	6,065,720.
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		15,025,801.	16,900,166.
	19	Revenue less expenses. Subtract line 18 from line 12		-1,253,318.	
Or Sec	1.5		Be	ginning of Current Year	End of Year
ets	20	Total assets (Part X, line 16)		58,957,213.	68,755,458.
ASS	21	Total liabilities (Part X, line 26)		12,020,483.	11,596,480.
Net Assets or Find Balances	22	Net assets or fund balances. Subtract line 21 from line 20		46,936,730.	57,158,978.
P	art II	Signature Block			
Unc	ler pen	alties of perjury, I declare that I have examined this return, including accompanying schedules	s and statem	ents, and to the best of m	y knowledge and belief, it is
true	, corre	ct, and complete. Declaration of preparer (other than officer) is based on all information of wh	nich preparer	has any knowledge.	
Sig	ın	Signature of officer		Date	
He	re	MASOOD AHMED, PRESIDENT			
		Type or print name and title			
		Print/Type preparer's name Preparer's signature		Date Check	PTIN
Pai		RICHARD J. LOCASTRO, CPA Rubard J. Locas	llo	09/26/19 self-employ	P00288314
	parer	Firm's name GELMAN, ROSENBERG & FREEDMAN		Firm's EIN ▶	52-1392008
Use	Only	Firm's address 4550 MONTGOMERY AVE SUITE 800N		, ,	04 \ 054 0000
		BETHESDA, MD 20814-2930		Phone no. (3	
Ma	v the I	RS discuss this return with the preparer shown above? (see instructions)			X Yes No

Га	Check if Schedule O contains a response or note to any line in this Part III	X
1	Briefly describe the organization's mission:	
	THE CENTER FOR GLOBAL DEVELOPMENT IS AN INDEPENDENT, NONPROFIT	
	RESEARCH ORGANIZATION THAT IS DEDICATED TO REDUCING GLOBAL POV	
	INEQUALITY AND MAKING GLOBALIZATION WORK FOR THE POOR. THROUGH	
	COMBINATION OF RESEARCH AND STRATEGIC OUTREACH, THE CENTER ACT	;TARPA
2	Did the organization undertake any significant program services during the year which were not listed on the	Yes X No
	prior Form 990 or 990-EZ? If "Yes," describe these new services on Schedule O.	Yes _21_NO
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 b	y expenses.
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total	•
	revenue, if any, for each program service reported.	
4a	(Code:) (Expenses \$ 13,809,574 · including grants of \$ 968,450 ·) (Revenue \$	980,044.
	PROVIDED NEW RESEARCH, DATA, CONSULTATION, PUBLIC EVENTS AND STATE OF THE PROPERTY OF THE PROP	
	PUBLICATIONS, AND POLICY PROPOSALS TO HELP ADDRESS GLOBAL ISSU	JES ON ALD
	EFFECTIVENESS, GLOBAL HEALTH, MIGRATION, EDUCATION AND OTHER DEVELOPMENT ISSUES.	
	DEVELOPMENT ISSUES:	
4b	(Code:) (Expenses \$)
4c	(Code:) (Expenses \$)
A :1	Other pregram continue (Deceribe in Schedule C.)	
4d	Other program services (Describe in Schedule O.)	1
4e	(Expenses \$\text{including grants of \$}\tag{Revenue \$}\tag{Revenue \$}\tag{Total program service expenses} \tag{13,809,574}\tag{.}	
	. State program on the experience p	Form 990 (2018)

Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
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		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect		Х	
_	during the tax year? If "Yes," complete Schedule C, Part II	4	Λ	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or	_		x
6	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to	5		
6	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		x
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	0		
′	the any irrepresent historic land areas or historic structures? If "Voc " complete Schoolule D. Bort II	7		x
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
Ū	Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for	_		
Ŭ	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	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.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	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? If "Yes," complete Schedule D, Part VII	11b		X
С	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	11c		X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		Х
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses		37	
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			,
	Schedule D, Parts XI and XII	12a		X
b	Was the organization included in consolidated, independent audited financial statements for the tax year?	401	Х	
40	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	Λ	Х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E Did the organization maintain an office, employees, or agents outside of the United States?	13 14a		X
14a		144		
b	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? If "Yes," complete Schedule F, Parts II and IV	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? If "Yes," complete Schedule F, Parts III and IV	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? If "Yes," complete Schedule G, Part I	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		X
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? If "Yes," complete Schedule H	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			<u></u>
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	L	X

Part IV	Checklist of Required Schedules (continued
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			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on		100	
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		Х
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete		Х	
24.5	Schedule J Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the	23	Λ	
270	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No," go to line 25a	24a	Х	
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		Х
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		X
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		X
25 a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	25a		x
h	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
	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, 6, or 22 for receivables from or payables to any current or			
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes,"			
	complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member	07		x
28	of any of these persons? If "Yes," complete Schedule L, Part III Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV	27		25
20	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		Х
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		Х
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			
	director, trustee, or direct or indirect owner? 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		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			x
31	contributions? If "Yes," complete Schedule M	30		
31	If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	<u> </u>		
	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 I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and		х	
2F.c	Part V, line 1 Did the organization have a controlled entity within the meaning of section 512(b)(13)?	34 35a	X	
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	SSA	-22	
J	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		х
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	20	Х	
Pai	Note. All Form 990 filers are required to complete Schedule 0 It V Statements Regarding Other IRS Filings and Tax Compliance	38	71	Ь
	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			
b				
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming		7.7	
	(gambling) winnings to prize winners?	1c	Х	<u> </u>

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

			Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
	filed for the calendar year ending with or within the year covered by this return 2a 90			
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)			
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	За	Х	
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b	Х	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	Х	
b	If "Yes," enter the name of the foreign country: VINITED KINGDOM			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			Х
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a 5b		X
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5c		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit	30		
va	any contributions that were not tax deductible as charitable contributions?	6a		х
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
-	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		Х
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			
	to file Form 8282?	7с		X
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year? N/A	8		
9	sponsoring organization have excess business holdings at any time during the year? Sponsoring organizations maintaining donor advised funds.	۴		
	Did the sponsoring organization make any taxable distributions under section 4966? N/A	9a		
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? N/A	9b		
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12 N/A 10a			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter:			
	Gross income from members or shareholders N/A 11a			
b	Gross income from other sources (Do not net amounts due or paid to other sources against			
40:	amounts due or received from them.) [11b] Section 4047(AV4) per account described trusts to the accomplishing filling Form 900 in liquid Form 10410.	10		
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
ъ 13	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
	Is the organization licensed to issue qualified health plans in more than one state? N/A	13a		
-	Note. See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which the			
	organization is licensed to issue qualified health plans			
	Enter the amount of reserves on hand			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			37
	excess parachute payment(s) during the year?	15		X
40	If "Yes," see instructions and file Form 4720, Schedule N.	4.0		v
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		X
	If "Yes," complete Form 4720, Schedule O.	Form	990	(2010)

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 in Schedule O. See instructions.

	Check if Schedule O contains a response or note to any line in this Part VI			X
Sec	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year la			
	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 in Schedule O.			
b	Enter the number of voting members included in line 1a, above, who are independent 20			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			
	officer, director, trustee, or key employee?	2		Х
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors, or trustees, or key employees to a management company or other person?	3		Х
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4	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?	6		Х
7a				
	more members of the governing body?	7a		Х
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			
	persons other than the governing body?	7b		Х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	Х	
b	Each committee with authority to act on behalf of the governing body?	8b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		Х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		Х
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,			
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Х	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Х	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Х	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	in Schedule O how this was done	12c	X	
13	Did the organization have a written whistleblower policy?	13	Х	
14	Did the organization have a written document retention and destruction policy?	14	Х	
15	Did the process for determining compensation of the following persons include a review and approval by independent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	X	
	Other officers or key employees of the organization	15b		Х
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
	taxable entity during the year?	16a		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's			
	exempt status with respect to such arrangements?	16b		
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ► NONE			
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) availa	able
	for public inspection. Indicate how you made these available. Check all that apply.			
	Own website Another's website X Upon request Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and	d finan	cial	
	statements available to the public during the tax year.			
20	State the name, address, and telephone number of the person who possesses the organization's books and records			
	ELLEN MACKENZIE - 202-416-4062			
	2055 L STREET NW, NO. 5TH FL, WASHINGTON, DC 20036			

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

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See 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.

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

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

(A)	(B)				C)			(D)	(E)	(F)
Name and Title	Average		not c		more	than		Reportable	Reportable	Estimated amount of
	hours per week	offic	er an	ss pe d a d	rson irecto	is bot or/trus	n an tee)	compensation from	compensation from related	other
	(list any	ector						the	organizations	compensation
	hours for	Individual trustee or director	æ			ated		organization	(W-2/1099-MISC)	from the
	related organizations	ustee	truste		ee ee	ubeus		(W-2/1099-MISC)		organization and related
	below	dual tr	Institutional trustee	_	nploy	st con	<u></u>			organizations
	line)	Individ	Institu	Officer	Key employee	Highest compensated employee	Former			g
(1) LAWRENCE SUMMERS	0.50									
CHAIR		Х						0.	0.	0.
(2) EDWARD SCOTT	0.50									
CHAIR EMERITUS		Х						0.	0.	0.
(3) MASOOD AHMED	40.00									
PRESIDENT		Х		Х				431,275.	0.	45,080.
(4) TIMOTHY D. ADAMS	0.50							_	_	_
BOARD MEMBER		Х						0.	0.	0.
(5) Q. MUNIR ALAM	0.50								_	
BOARD MEMBER		Х						0.	0.	0.
(6) CAROLINE ATKINSON	0.50								_	
BOARD MEMBER		Х						0.	0.	0.
(7) TONY FRATTO	0.50									
BOARD MEMBER		Х						0.	0.	0.
(8) THOMAS GIBIAN	0.50	l								
BOARD MEMBER		Х						0.	0.	0.
(9) DAVID F. GORDON	0.50	l								
BOARD MEMBER		Х						0.	0.	0.
(10) BRAD HORWITZ	0.50	١							•	•
BOARD MEMBER	0.50	Х						0.	0.	0.
(11) STEPHEN T. ISAACS	0.50							_		•
BOARD MEMBER	0.50	Х						0.	0.	0.
(12) DONALD KABERUKA	0.50	,,						_	•	•
BOARD MEMBER	0 50	Х						0.	0.	0.
(13) JOHN LIPSKY	0.50	٠,,						_	0	0
BOARD MEMBER	0 50	Х						0.	0.	0.
(14) ROBERTY MCCARTHY	0.50	٠,,						_	0	0
BOARD MEMBER	0 50	Х						0.	0.	0.
(15) EDWARD E. MCNALLY	0.50	Ψ,						_	_	^
BOARD MEMBER	0 50	Х						0.	0.	0.
(16) ROBERT MOSBACHER, JR.	0.50	X						0.	0.	_
BOARD MEMBER	0.50	^	\vdash		<u> </u>	-	<u> </u>	0.	0.	0.
(17) BOBBY J. PITTMAN BOARD MEMBER	0.50	X						0.	0.	0.
832007 12-31-18	1	Δ.	L		<u> </u>			<u> </u>	0.	Form 990 (2018)

832007 12-31-18

Part VII Section A. Officers, Directors, True	stees, Key Em	ploy	ees	, an	d Hi	ghe	st C	Compensated Employe	es (continued)	<u> </u>
(A)	(B)				C)			(D)	(E)	(F)
Name and title	Average hours per week	box	not c , unle cer an	heck ss pe	rsoni	than is bot	h an	Reportable compensation from	Reportable compensation from related	Estimated amount of other
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(18) RACHEL PRITZKER	0.50									
BOARD MEMBER		Х						0.	0.	0.
(19) SMITA SINGH	0.50									
BOARD MEMBER		Х						0.	0.	0.
(20) TONI VERSTANDIG	0.50									
BOARD MEMBER		Х						0.	0.	0.
(21) MAUREEN WHITE	0.50									
BOARD MEMBER		Х						0.	0.	0.
(22) AMANDA GLASSMAN	40.00									
CHIEF OPERATING OFFICER				Х				298,980.	0.	42,702.
(23) ELLEN MACKENZIE	40.00									
CHIEF FINANCIAL OFFICER				Х				246,176.	0.	60,324.
(24) VIJAYA RAMACHANDRAN	40.00									
SENIOR FELLOW						Х		221,825.	0.	41,171.
(25) ALAN GELB	40.00									
SENIOR FELLOW						Х		223,073.	0.	33,658.
(26) LILIANA ROJAS-SUAREZ	40.00									
SENIOR FELLOW						Х		214,756.	0.	41,149.
1b Sub-total								1,636,085.		264,084.
c Total from continuation sheets to Part V	II, Section A						ightharpoons	403,142.		85,961.
d Total (add lines 1b and 1c)								2,039,227.	0.	350,045.
2 Total number of individuals (including but compensation from the organization	not limited to th	ose	liste	ed al	bove	e) wh	no re	eceived more than \$100	0,000 of reportable	18

compensation from the organization

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

Section B. Independent Contractors

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

the organization. Report compensation for the calendar year ending with or with	in the organization's tax year.	
(A)	(B)	(C)
Name and business address	Description of services	Compensation
SOCIAL INSIGHT, 15 CENTRE STREET, STE 4,	PROGRAM AND RESEARCH	
BATH, ME 04530-2559	CONSULTANT	228,000.
MAYRA BUVINIC	PROGRAM AND RESEARCH	
3409 QUEBEC ST NW, WASHINGTON, DC 20016	CONSULTANT	158,000.

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

SEE PART VII, SECTION A CONTINUATION SHEETS

Form 990 CENTER FO	N GLODE	<u>7Т</u>	וע	7 A T	المر	JPI	1C1	NI	52-235	1331
Part VII Section A. Officers, Directors, Tru	stees, Key Er	nplo	yee	s, a	nd F	ligh	est	Compensated Employ	ees (continued)	
(A) Name and title	(B) Average hours	(cl	neck	Posi all t	ition		ly)	(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of
	per week (list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organization
27) CHARLES KENNY ENIOR FELLOW	40.00					х		199,708.	0.	54,065
28) MICHAEL CLEMENS	40.00					Δ		199,700.	0.	34,00
ENIOR FELLOW	40.00					Х		203,434.	0.	31,89
otal to Part VII, Section A, line 1c		<u> </u>	ı		<u> </u>		<u> </u>	403,142.		85,96

Pa	rt VI	II Statement of Rever	nue					
		Check if Schedule O cont	ains a response	or note to any line	e in this Part VIII			
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	Revenue excluded from tax under sections 512 - 514
nts		Federated campaigns						
Contributions, Gifts, Grants and Other Similar Amounts		Membership dues						
ts,		Fundraising events						
iar		Related organizations						
ns,		Government grants (contribut		1,453,000.				
er S	f	All other contributions, gifts, gran		- 1				
변환		similar amounts not included above	ve 1f	28,400,740.				
ont od (9	Noncash contributions included in lines	1a-1f: \$					
<u>a</u> C	h	Total. Add lines 1a-1f			29,853,740.			
				Business Code	001 110	221 112		
Program Service Revenue	2 a			900099	921,148.	921,148.		
er ue	b			900099	58,896.	58,896.		
m S	C							
gra Re	C							
Pro	e							
_		All other program service reve			980,044.			
-	3	Total. Add lines 2a-2f			300,044.			
	3	other similar amounts)			597,994.			597,994.
	4	Income from investment of tax			,			,
	5	Royalties		·				
	Ū	rioyanioo	(i) Real	(ii) Personal				
	6 a	Gross rents	() 1100.	(1) (1)				
	b							
	c	5						
	d	Net rental income or (loss)						
		Gross amount from sales of	(i) Securities	(ii) Other				
		assets other than inventory	847,571					
	b	Less: cost or other basis						
		and sales expenses	650,260					
	c	Gain or (loss)	197,311					
	c	Net gain or (loss)			197,311.			197,311.
e e	8 a	Gross income from fundraising	g events (not					
ēn		including \$						
Other Revenue		contributions reported on line						
er		Part IV, line 18						
₽		Less: direct expenses						
		Net income or (loss) from fund		P				
	9 a	Gross income from gaming ac						
		Part IV, line 19						
		Less: direct expenses						
		 Net income or (loss) from gam Gross sales of inventory, less 						
	10 a	and allowances						
	h	Less: cost of goods sold						
		Net income or (loss) from sale						
		Miscellaneous Revenu		Business Code				
	11 a		· -	22232 22.00				
	b		-					
	C		-					
	d							
	е	Total. Add lines 11a-11d						
	12	Total revenue See instructions			31 629 089.	980 044.	0.	795 305.

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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).

-	ion 501(c)(3) and 501(c)(4) organizations must com Check if Schedule O contains a respor				X
Do	not include amounts reported on lines 6b,	(A)	(B)	(C)	(D)
	8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	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 foreign				
	individuals. See Part IV, lines 15 and 16	968,450.	968,450.		
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	1,124,537.	654,430.	388,304.	81,803
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	7,056,637.	6,490,080.	261,716.	304,841
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)	666,051.	626,462.	11,000.	28,589
9	Other employee benefits	545,331.	500,538.	18,211.	26,582
10	Payroll taxes	473,440.	416,933.	34,237.	22,270
11	Fees for services (non-employees):				
а	Management				
b	Legal	82,626.	8,362.	65,001.	9,263
С	Accounting	72,090.	7,296.	56,712.	8,082
d					
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees	32,900.		32,900.	
g	Other. (If line 11g amount exceeds 10% of line 25,				
	column (A) amount, list line 11g expenses on Sch 0.)	1,789,867.	1,635,226.	135,133.	19,508
12	Advertising and promotion				
13	Office expenses	403,825.	214,649.	165,310.	23,866
14	Information technology	55,573.	5,624.	43,719.	6,230
15	Royalties				
16	Occupancy	956,091.	7,398.	948,693.	
17	Travel	918,029.	846,865.	52,649.	18,515
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	177,126.	140,514.	4,098.	32,514
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	761,606.		761,606.	
23	Insurance	69,587.	4,105.	65,482.	
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line				
	24e amount exceeds 10% of line 25, column (A)				
_	amount, list line 24e expenses on Schedule 0.) OVERHEAD ALLOCATION	0.	709,408.	-891,548.	182,140
a b	FIELD STUDY	409,208.	409,208.	0,1,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	102,140
	FURN./EQUIP./SOFTWARE	221,370.	90,666.	128,861.	1,843
q	OUTREACH ACTIVITIES	70,352.	70,352.	120,001.	1,043
d		45,470.	3,008.	41,597.	865
	All other expenses Total functional expenses Add lines 1 through 24e	16,900,166.	13,809,574.	2,323,681.	766,911
25	Total functional expenses. Add lines 1 through 24e	±0,,000,±00•	13,003,314.	2,323,001.	100,911
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)				Form 990 (2018

Form 990 (2018) Part X Balance Sheet

Pai	πX	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
	1	Cook, non-interest hearing	762.	1	762.
	2	Cash - non-interest-bearing Savings and temporary cash investments	8,862,772.	2	9,614,343.
	3		13,125,165.	3	24,783,341.
	4	Pledges and grants receivable, net Accounts receivable, net	12,664.	4	0.
	5	Loans and other receivables from current and former officers, directors,	12,001	_	· ·
		trustees, key employees, and highest compensated employees. Complete			
		Part II of Schedule L		5	
	6	Loans and other receivables from other disqualified persons (as defined under		-	
	"	section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing			
		employers and sponsoring organizations of section 501(c)(9) voluntary			
w		employees' beneficiary organizations (see instr). Complete Part II of Sch L		6	
Assets	7	Notes and loans receivable, net		7	
As	8	Inventories for sale or use		8	
	9		82,565.	9	110,157.
	l	Prepaid expenses and deferred charges Land, buildings, and equipment: cost or other	02,000	3	220/23/1
	loa	basis. Complete Part VI of Schedule D			
	h	Less: accumulated depreciation 10b 3,859,436.	15,597,655.	10c	14,921,464.
	11	Investments - publicly traded securities	21,275,630.	11	19,325,391.
	12	Investments - other securities. See Part IV, line 11		12	23,023,0321
	13	Investments - program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11		15	
	16	Total assets. Add lines 1 through 15 (must equal line 34)	58,957,213.	16	68,755,458.
	17	Accounts payable and accrued expenses	408,314.	17	279,263.
	18	Grants payable		18	,
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities	11,612,169.	20	11,317,217.
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
S	22	Loans and other payables to current and former officers, directors, trustees,			
Liabilities		key employees, highest compensated employees, and disqualified persons.			
abi		Complete Part II of Schedule L		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		25	
	26	Total liabilities. Add lines 17 through 25	12,020,483.	26	11,596,480.
		Organizations that follow SFAS 117 (ASC 958), check here ▶ X and			
es		complete lines 27 through 29, and lines 33 and 34.			
auc	27	Unrestricted net assets	28,518,259.	27	26,397,626.
Fund Balances	28	Temporarily restricted net assets	18,418,471.	28	30,761,352.
БП	29	Permanently restricted net assets		29	
		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ☐			
p		and complete lines 30 through 34.			
ets	30	Capital stock or trust principal, or current funds		30	
Ass	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
Net Assets or	32	Retained earnings, endowment, accumulated income, or other funds	46 006 500	32	F7 150 050
~	33	Total net assets or fund balances	46,936,730.	33	57,158,978.
	34	Total liabilities and net assets/fund balances	58,957,213.	34	68,755,458.

Pa	rt XI Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI					X
1 2 3 4 5 6 7 8	Check if Schedule O contains a response or note to any line in this Part XI Total revenue (must equal Part VIII, column (A), line 12) Total expenses (must equal Part IX, column (A), line 25) Revenue less expenses. Subtract line 2 from line 1 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) Net unrealized gains (losses) on investments Donated services and use of facilities Investment expenses Prior period adjustments	1 2 3 4 5 6 7 8	31 16 14 46	,62 ,90 ,72 ,93	9,0 0,1 8,9 6,7	89. 66. 23.
9	Other changes in net assets or fund balances (explain in Schedule O)	9	-1	,84	1,5	47.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10		,15		
Pa	rt XII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII					Ш
1	Accounting method used to prepare the Form 990: Cash X Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	: O.	_		Yes	No
2a				2a		Х
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewer					
b	separate basis, consolidated basis, or both: Separate basis Consolidated basis Both consolidated and separate basis Were the organization's financial statements audited by an independent accountant?			2b	Х	
~	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate					
	consolidated basis, or both: Separate basis Consolidated basis Both consolidated and separate basis					
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audit,				
	review, or compilation of its financial statements and selection of an independent accountant?			2c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch					
3а	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si	ngle Audit				37
	Act and OMB Circular A-133?			3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ			_		
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits			3b	000	

SCHEDULE A

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

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

► Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047 **2018**

Open to Public Inspection

Employer identification number Name of the organization CENTER FOR GLOBAL DEVELOPMENT 52-2351337 Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 7 X An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: 10 An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) 11 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV. Sections A and C. its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type III, Type III functionally integrated, or Type III non-functionally integrated supporting organization. f Enter the number of supported organizations Provide the following information about the supported organization(s). (iv) Is the organization listed (i) Name of supported (ii) EIN (iii) Type of organization (v) Amount of monetary (vi) Amount of other in your governing document? (described on lines 1-10 organization support (see instructions) support (see instructions) Yes No above (see instructions))

Total

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.)

Calendar year (or fiscal year beginning in 1 Gifts, grants, contributions, and	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(4) Takal
1 Gifts, grants, contributions, and				(4,) = 0	(6) 2010	(f) Total
membership fees received. (Do n	ot					
include any "unusual grants.")	12,039,478.	10,324,922.	17,498,375.	12,139,829.	29,853,740.	81,856,344.
2 Tax revenues levied for the organ	۱-					_
ization's benefit and either paid t	o					
or expended on its behalf						
3 The value of services or facilities						
furnished by a governmental unit	t to					
the organization without charge						
4 Total. Add lines 1 through 3	12,039,478.	10,324,922.	17,498,375.	12,139,829.	29,853,740.	81,856,344.
5 The portion of total contributions						
by each person (other than a						
governmental unit or publicly						
supported organization) included	1					
on line 1 that exceeds 2% of the						
amount shown on line 11,						
column (f)						43,760,477.
6 Public support. Subtract line 5 from li						38,095,867.
Section B. Total Support					•	
Calendar year (or fiscal year beginning in	ı) ▶ (a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
7 Amounts from line 4	12,039,478.	10,324,922.	17,498,375.	12,139,829.	29,853,740.	81,856,344.
8 Gross income from interest,						_
dividends, payments received or	n					
securities loans, rents, royalties,						
and income from similar sources	416,164.	393,014.	485,659.	515,337.	597,994.	2,408,168.
9 Net income from unrelated busin						
activities, whether or not the						
business is regularly carried on						
10 Other income. Do not include gain	in					
or loss from the sale of capital						
assets (Explain in Part VI.)			258.			258.
11 Total support. Add lines 7 through	10					84,264,770.
12 Gross receipts from related activ	ities, etc. (see instruction	ons)			12 4	,990,535.
13 First five years. If the Form 990	is for the organization's	first, second, thir	d, fourth, or fifth ta	x year as a section	n 501(c)(3)	
organization, check this box and						<u></u>
Section C. Computation of P	Public Support Pe	rcentage				
14 Public support percentage for 20	018 (line 6, column (f) di	vided by line 11, c	olumn (f))		14	45.21 %
15 Public support percentage from	2017 Schedule A, Part	II, line 14			15	57.44 %
16a 33 1/3% support test - 2018. If	•		•		•	
stop here. The organization qual	lifies as a publicly supp	orted organization				►X
b 33 1/3% support test - 2017. If						is box
and stop here. The organization	qualifies as a publicly s	supported organiza	ation			▶□
17a 10% -facts-and-circumstances	s test - 2018. If the org	anization did not c	heck a box on line	: 13, 16a, or 16b, a	and line 14 is 10%	or more,
and if the organization meets the	"facts-and-circumstan	ces" test, check th	nis box and stop h	ere. Explain in Par	t VI how the organ	ization
meets the "facts-and-circumstan	ces" test. The organiza	tion qualifies as a	publicly supported	d organization		▶□
b 10% -facts-and-circumstances	s test - 2017. If the org	anization did not c	heck a box on line	e 13, 16a, 16b, or 1	17a, and line 15 is	10% or
more, and if the organization mee	ets the "facts-and-circu	mstances" test, ch	neck this box and	stop here. Explain	in Part VI how the	
organization meets the "facts-and	d-circumstances" test.	The organization o	qualifies as a public	cly supported orga	anization	▶□
18 Private foundation. If the organi	zation did not check a	box on line 13, 16a	a, 16b, 17a, or 17b	o, check this box a	nd see instructions	<u> </u>

Schedule A (Form 990 or 990-EZ) 2018

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.)

Sec	qualify under the tests listed be ction A. Public Support	elow, please com	plete Part II.)				
	endar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
	Gifts, grants, contributions, and	(a) 2014	(b) 2015	(6) 2010	(u) 2017	(e) 2016	(I) TOTAL
'	membership fees received. (Do not						
	include any "unusual grants.")						
2	Gross receipts from admissions,						
_	merchandise sold or services per-						
	formed, or facilities furnished in						
	any activity that is related to the organization's tax-exempt purpose						
2	Gross receipts from activities that						
3	are not an unrelated trade or bus-						
	inone under coetion 512						
4							
4	Tax revenues levied for the organ-						
	ization's benefit and either paid to or expended on its behalf						
-							
5	The value of services or facilities						
	furnished by a governmental unit to the organization without charge						
	· · · · ·						
	Total. Add lines 1 through 5						
78	Amounts included on lines 1, 2, and						
	3 received from disqualified persons 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						
	Add lines 7a and 7b						
	Public support. (Subtract line 7c from line 6.)						
			1 "	1 ,,,,,,,	(0.004=	() 00/0	(0
	endar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
	Amounts from line 6						
IU	Gross income from interest, dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources						
t	Unrelated business taxable income						
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						
	Add lines 10a and 10b Net income from unrelated business						
•••	activities not included in line 10b,						
	whether or not the business is						
40	regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital						
	assets (Explain in Part VI.)						
	Total support. (Add lines 9, 10c, 11, and 12.)						
14	First five years. If the Form 990 is for	the organization's	s first, second, thi	rd, fourth, or fifth t	ax year as a section	on 501(c)(3) organiz	zation,
-							<u></u>
	ction C. Computation of Publi					T .= 1	
	Public support percentage for 2018 (li					15	<u>%</u>
	Public support percentage from 2017					16	%
<u>Sec</u>	ction D. Computation of Inves					T .= 1	
17	. 6					17	%
18	Investment income percentage from 2					18	%
19a	33 1/3% support tests - 2018. If the						17 is not
	more than 33 1/3%, check this box ar						▶□
k	o 33 1/3% support tests - 2017. If the						
	line 18 is not more than 33 1/3%, che						
20	Private foundation. If the organization	n did not check a	box on line 14, 19	a, or 19b, check t	his box and see in	structions	▶└┴

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

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

	Yes	No
1		
2		
3a		
3b		
3с		
4a		
4b		
4c		
F-		
5a		
5b		
5c		
33		
6		
7		
8		
00		
9a		
9b		
00		
9c		
10a		
iva		
10b		

Par	t IV	Supporting Organizations (continued)			
				Yes	No
11	Has th	e organization accepted a gift or contribution from any of the following persons?			
а	A pers	on who directly or indirectly controls, either alone or together with persons described in (b) and (c)			
	below,	the governing body of a supported organization?	11a		
b	A famil	y member of a person described in (a) above?	11b		
		controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c		
Sec	tion B	. Type I Supporting Organizations			
		,		Yes	No
1		e directors, trustees, or membership of one or more supported organizations have the power to			
	-	ly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	-	ar? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or			
		lled the organization's activities. If the organization had more than one supported organization,			
		be how the powers to appoint and/or remove directors or trustees were allocated among the supported			
_		rations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2		e organization operate for the benefit of any supported organization other than the supported			
	U	zation(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
		how providing such benefit carried out the purposes of the supported organization(s) that operated,	_		
800		ised, or controlled the supporting organization.	2		
Sec	lion C	. Type II Supporting Organizations		V	Na
4	Mara	majority of the expanization's divestors by twistons during the toy year also a majority of the divestors		Yes	No
1		majority of the organization's directors or trustees during the tax year also a majority of the directors			
		tees of each of the organization's supported organization(s)? If "No," describe in Part VI how control agement of the supporting organization was vested in the same persons that controlled or managed			
		oported organization(s).	1		
Sec		. All Type III Supporting Organizations			
		· / · · · · · · · · · · · · · · · · · ·		Yes	No
1	Did the	e organization provide to each of its supported organizations, by the last day of the fifth month of the			110
		zation's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (i) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organiz	zation's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were a	iny of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organiz	zation(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the org	anization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By rea	son of the relationship described in (2), did the organization's supported organizations have a			
	signific	ant voice in the organization's investment policies and in directing the use of the organization's			
		e or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
		ted organizations played in this regard.	3		
-		. Type III Functionally Integrated Supporting Organizations			
1		the box next to the method that the organization used to satisfy the Integral Part Test during the yea(see instructions).	•		
a		The organization satisfied the Activities Test. Complete line 2 below.			
b		The organization is the parent of each of its supported organizations. Complete line 3 below.		-1	
с 2		Γhe organization supported a governmental entity. <i>Describe in Part VI how you supported a government entity (see inst</i> es Test. Answer (a) and (b) below.	ructions	Yes	No
a		ostantially all of the organization's activities during the tax year directly further the exempt purposes of		163	NO
а		opported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
		supported organizations and explain how these activities directly furthered their exempt purposes,			
		e organization was responsive to those supported organizations, and how the organization determined			
		ese activities constituted substantially all of its activities.	2a		
b		e activities described in (a) constitute activities that, but for the organization's involvement, one or more			
		organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the			
		s for the organization's position that its supported organization(s) would have engaged in these			
		es but for the organization's involvement.	2b		
3		of Supported Organizations. Answer (a) and (b) below.			
а	Did the	e organization have the power to regularly appoint or elect a majority of the officers, directors, or			
	trustee	s of each of the supported organizations? Provide details in Part VI.	За		
b	Did the	organization exercise a substantial degree of direction over the policies, programs, and activities of each			
	of its s	upported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b		

Pa	rt V Type III Non-Functionally Integrated 509(a)(3) Supportin	g Orgai	nizations	
1	Check here if the organization satisfied the Integral Part Test as a qualifyin	g trust on	Nov. 20, 1970 (explain in	Part VI.) See instructions. Al
	other Type III non-functionally integrated supporting organizations must co	mplete Se	ections A through E.	
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1 b		
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		
Sect	ion 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	Distributable Amount. 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-functional	ly integrat	ed Type III supporting org	ganization (see
	instructions).			

Schedule A (Form 990 or 990-EZ) 2018

Par	^ব V │ Type III Non-Functionally Integrated 509	(a)(3) Supporting Orga	anizations _(continued)	
Secti	ion D - Distributions		<u> </u>	Current Year
1	Amounts paid to supported organizations to accomplish exe			
2	Amounts paid to perform activity that directly furthers exem			
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purpos	es of supported organizatior	ns	
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 t	he organization is responsive	Э	
	(provide details in Part VI). See instructions.			
9	Distributable amount for 2018 from Section C, line 6			
10	Line 8 amount divided by line 9 amount			
Secti	ion E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2018	(iii) Distributable Amount for 2018
1	Distributable amount for 2018 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2018 (reason-			
	able cause required- explain in Part VI). See instructions.			
3	Excess distributions carryover, if any, to 2018			
а	From 2013			
b	From 2014			
С	From 2015			
d	From 2016			
е	From 2017			
f	Total of lines 3a through e			
g	Applied to underdistributions of prior years			
h	Applied to 2018 distributable amount			
i	Carryover from 2013 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2018 from Section D,			
	line 7: \$			
а	Applied to underdistributions of prior years			
b	Applied to 2018 distributable amount			
С	Remainder. Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2018, if			
	any. Subtract lines 3g and 4a from line 2. For result greater			
	than zero, explain in Part VI. See instructions.			
6	Remaining underdistributions for 2018. Subtract lines 3h			
	and 4b from line 1. For result greater than zero, explain in			
	Part VI. See instructions.			
7	Excess distributions carryover to 2019. Add lines 3j			
	and 4c.			
8	Breakdown of line 7:			
а	Excess from 2014			
b	Excess from 2015			
С	Excess from 2016			
d	Excess from 2017			
	Excess from 2018			

Schedule A (Form 990 or 990-EZ) 2018

Schedule A	Form 990 or 990-EZ) 2018 CENTER FOR GLOBAL DEVELOPMENT	52-235133/ Page 8
Part VI	Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 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 ine 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 D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any addition	and 2; Part IV, Section C, Section B, line 1e; Part V,
	(See instructions.)	

Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Schedule of Contributors

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

OMB No. 1545-0047

2018

52-2351337

Name of the organization Employer identification number

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Organization type (check one): Filers of: Section: X = 501(c)(3) (enter number) organization Form 990 or 990-EZ 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation 527 political organization Form 990-PF 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. General Rule For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions. Special Rules For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year ______ 🕨 \$ _ Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

 $\ \ \, \text{LHA} \ \ \, \text{For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.}$

Schedule B (Form 990, 990-EZ, or 990-PF) (2018)

Name of organization

CENTER FOR GLOBAL DEVELOPMENT

52-2351337

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	al space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		\$ <u>18,688,958</u> .	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2		\$1,000,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3		\$800,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4		\$600,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5		\$ 759,830.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
6		\$3,697,000.	Person X Payroll

Name of organization Employer identification number

CENTER FOR GLOBAL DEVELOPMENT

52-2351337

Part II	Noncash Property (see instructions). Use duplicate copies of Property	art II if additional space is needed.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		 \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
23453 11-08			990 990-F7 or 990-PF) (2

Employer identification number

Name of organization

CENTER	R FOR GLOBAL DEVELOPMEN	Т		52-2351337
Part III	Exclusively religious, charitable, etc., contribut from any one contributor. Complete columns (a			that total more than \$1,000 for the yea
	completing Part III, enter the total of exclusively religious,	charitable, etc., contributions of \$1,000 o	r less for the year. (Enter this info. onc	e.) ► \$
(-) N -	Use duplicate copies of Part III if additional	space is needed.		
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Desc	ription of how gift is held
		(e) Transfer of gi		
_	Transferee's name, address, a	nd ZIP + 4	Relationship of tra	nsferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Desc	ription of how gift is held
		(e) Transfer of gi	ft	
_	Transferee's name, address, a	nd ZIP + 4	Relationship of tra	nsferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Desc	ription of how gift is held
		(e) Transfer of gi		
	Transferee's name, address, a	nd ZIP + 4	Relationship of tra	nsferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Desc	ription of how gift is held
		(e) Transfer of gi	ft	
-	Transferee's name, address, a	nd ZIP + 4	Relationship of tra	nsferor to transferee

SCHEDULE C

(Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service For Organizations Exempt From Income Tax Under section 501(c) and section 527

Complete if the organization is described below. Attach to Form 990 or Form 990-EZ.

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

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

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

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

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

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

-	., (000 00)	24()(4) (5) (0)				
	Section 5	01(c)(4), (5), or (6) organiza	tions: Complete Part III.		Fm	ployer identification number
IVai	ne or orga		FOR GLOBAL DEVEL	ОРМЕМТ		52-2351337
Pá	art I-A		anization is exempt und		or is a section 527	
1	Provide	a description of the organiz	ation's direct and indirect politic	al campaign activities i	n Part IV.	
			ures			\$
3	Voluntee	er hours for political campai	gn activities			
			anization is exempt und			
1	Enter the	e amount of any excise tax	incurred by the organization und	ler section 4955	>	\$
2	Enter the	e amount of any excise tax	incurred by organization manage	ers under section 4955	 ▶	\$
3	If the org	ganization incurred a sectio	n 4955 tax, did it file Form 4720	for this year?		Yes No
48	a Was a c	orrection made?				Yes No
k	b If "Yes,"	describe in Part IV.				
Pa	art I-C	Complete if the org	janization is exempt und	er section 501(c),	except section 50	1(c)(3).
1	Enter the	e amount directly expended	by the filing organization for sec	ction 527 exempt funct	tion activities	\$
2	Enter the	e amount of the filing organ	ization's funds contributed to otl	ner organizations for se	ection 527	
	exempt	function activities			>	\$
3	Total exe	empt function expenditures	. Add lines 1 and 2. Enter here a	nd on Form 1120-POL,	ı	
	line 17b				>	\$
4			1120-POL for this year?			
5			nployer identification number (El			
	made pa	yments. For each organiza	tion listed, enter the amount paid	d from the filing organiz	ation's funds. Also enter	the amount of political
	contribu	tions received that were pr	omptly and directly delivered to	a separate political orga	anization, such as a sepa	rate segregated fund or a
	political	action committee (PAC). If	additional space is needed, prov	ide information in Part	IV.	
		(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0	contributions received and
	•					

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

Schedule C (Form 990 or 990-EZ) 2018

LHA

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Part II-A Complete if the org section 501(h)).	ganization is exer	npt under sectio	n 501(c)(3) and fil	led Form 5768 (el	ection under
A Check ▶ ☐ if the filing organiza	ation belongs to an affil	iated group (and list ir	n Part IV each affiliated	group member's nam	e, address, EIN,
	re of excess lobbying	- · ·			, , ,
B Check ► if the filing organiza	ation checked box A ar	nd "limited control" pro	ovisions apply.		
	its on Lobbying Exper ditures" means amou)	(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditures to infl	uence public opinion (grass roots lobbying)			
b Total lobbying expenditures to infl					
c Total lobbying expenditures (add l	ines 1a and 1b)				
d Other exempt purpose expenditur				16,900,166.	
e Total exempt purpose expenditure				16,900,166.	
f Lobbying nontaxable amount. Ent	er the amount from the	following table in bot	h columns.	995,008.	
If the amount on line 1e, column (a)	or (b) is: The lob	bying nontaxable am	ount is:		
Not over \$500,000	20% of	the amount on line 1e.			
Over \$500,000 but not over \$1,00	0,000 \$100,00	0 plus 15% of the exc	ess over \$500,000.		
Over \$1,000,000 but not over \$1,5	500,000 \$175,00	0 plus 10% of the exc	ess over \$1,000,000.		
Over \$1,500,000 but not over \$17	,000,000 \$225,00	0 plus 5% of the exce	ss over \$1,500,000.		
Over \$17,000,000	\$1,000,0	000.			
				0.40 550	
g Grassroots nontaxable amount (er	nter 25% of line 1f)			248,752.	
h Subtract line 1g from line 1a. If zer	ro or less, enter -0			0.	
i Subtract line 1f from line 1c. If zero				0.	
j If there is an amount other than ze	ero on either line 1h or	line 1i, did the organiz	ation file Form 4720	_	
reporting section 4911 tax for this	·			L	Yes No
(Some organizations t	hat made a section 5	raging Period Under 01(h) election do not ate instructions for li	have to complete all	of the five columns b	elow.
	Lobbying Exper	ditures During 4-Yea	ar Averaging Period		
Calendar year (or fiscal year beginning in)	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) Total
2a Lobbying nontaxable amount	918,155.	834,605.	901,290.	995,008.	3,649,058.
b Lobbying ceiling amount					
(150% of line 2a, column(e))					5,473,587.
c Total lobbying expenditures					
d Grassroots nontaxable amount	229,539.	208,651.	225,323.	248,752.	912,265.
e Grassroots ceiling amount (150% of line 2d, column (e))					1,368,398.
	į l		I	I	I

Schedule C (Form 990 or 990-EZ) 2018

f Grassroots lobbying expenditures

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

For e	ach "Yes," response on lines 1a through 1i below, provide in Part IV a detailed description	(a)	(b)
of the	e lobbying activity.	Yes	No	Amo	ount
1 a	During the year, did the filing organization attempt to influence foreign, national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of: Volunteers?				
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? Media advertisements?				
d	Mailings to members, legislators, or the public? Publications, or published or broadcast statements?				
f	Grants to other organizations for lobbying purposes?				
h	Direct contact with legislators, their staffs, government officials, or a legislative body? Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? Other activities?				
	Total. Add lines 1c through 1i				
b	If "Yes," enter the amount of any tax incurred under section 4912 If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?	F01(a)	(E) av ac		
Par	t III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(6).	on 501(c)	(5), or se	etion	
1	Were substantially all (90% or more) dues received nondeductible by members?		1	Yes	No
2 3	Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the organization agree.		2		
	t III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."	"No," OF	R (b) Par		ne 3, is
1 2	Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politi expenses for which the section 527(f) tax was paid).		1		
а	Current year		2a		
	Carryover from last year				
	Total				
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3		
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceeds the organization agree to carryover to the reasonable estimate of nondeductible lobbying and expenditure next year?		4		
5	Taxable amount of lobbying and political expenditures (see instructions)		5		
Par			5		
	de the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group actions); and Part II-B, line 1. Also, complete this part for any additional information.	o list); Part II	-A, lines 1 a	and 2 (see	

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 Open to Public Inspection

Name of the organization

CENTER FOR GLOBAL DEVELOPMENT

Employer identification number 52-2351337

Pai	t I Organizations Maintaining Donor Advise		or Accounts. Complete if the
	organization answered "Yes" on Form 990, Part IV, lin		
	, ,	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in	writing that the assets held in donor advise	ed funds
	are the organization's property, subject to the organization's	_	
6	Did the organization inform all grantees, donors, and donor a		
	for charitable purposes and not for the benefit of the donor of		
	impermissible private benefit?		Yes No
Pai			
1	Purpose(s) of conservation easements held by the organizati	on (check all that apply).	
	Preservation of land for public use (e.g., recreation or e	education) Preservation of a histo	orically important land area
	Protection of natural habitat	Preservation of a certif	fied historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualit	fied conservation contribution in the form of	of a conservation easement on the last
	day of the tax year.		Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
С	Number of conservation easements on a certified historic str	ucture included in (a)	2c
d	Number of conservation easements included in (c) acquired	after 7/25/06, and not on a historic structu	ıre
	listed in the National Register		2d
3	Number of conservation easements modified, transferred, re		
	year ▶		
4	Number of states where property subject to conservation ea	sement is located >	
5	Does the organization have a written policy regarding the per	riodic monitoring, inspection, handling of	
	violations, and enforcement of the conservation easements it		
6	Staff and volunteer hours devoted to monitoring, inspecting,	handling of violations, and enforcing cons	ervation easements during the year
			
7	Amount of expenses incurred in monitoring, inspecting, hand	dling of violations, and enforcing conservat	ion easements during the year
	> \$		
8	Does each conservation easement reported on line 2(d) above		
	and section 170(h)(4)(B)(ii)?		
9	In Part XIII, describe how the organization reports conservati	•	
	include, if applicable, the text of the footnote to the organization	tion's financial statements that describes t	he organization's accounting for
Pai	conservation easements. t III Organizations Maintaining Collections or	f Art Historical Transuras or Ot	thor Similar Assats
Fai	Complete if the organization answered "Yes" on Form		iller Sillillar Assets.
			pont and balance about ways of art
ıa	If the organization elected, as permitted under SFAS 116 (AS		
	historical treasures, or other similar assets held for public ext	· · · · · · · · · · · · · · · · · · ·	ice of public service, provide, in Part Alli,
h	the text of the footnote to its financial statements that describes a parallel the arganization placed as parallel under SEAS 116 (AS		and halance shoot works of art, historical
D	If the organization elected, as permitted under SFAS 116 (AS		
	treasures, or other similar assets held for public exhibition, ed relating to these items:	ducation, or research in furtherance of pub	one service, provide the following amounts
	•		L ¢
	(i) Revenue included on Form 990, Part VIII, line 1		
2	(ii) Assets included in Form 990, Part X		
_	the following amounts required to be reported under SFAS 1	·	gairi, provide
а	Revenue included on Form 990, Part VIII, line 1		> \$
	Assets included in Form 990, Part X		
	, leaded a long document of the court with the contraction of the court with the		F Y

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Schedule D (Form 990) 2018

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

3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (checks all that apply): a Public exhibition d Loan or exchange programs b Scholarly research e Other c Preservation for future generations d 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's solicitors and explain how they further the organization's exempt purpose in Part XIII. 6 Part IV Excrow and Custodial Arrangements. Complete if the organization's collection? Yes No Part IV Excrow and Custodial Arrangements. Complete if the organization answerd Yes' on Form 990, Part X, line 21. 1 Is the organization an agent, included an or other intermediary for contributions or other assets not included on Form 990, Part X, line 21. 2 Both in Yes, explain the arrangement in Part XIII and complete the following table: Amount 2 Both in Yes, explain the arrangement in Part XIII and complete the following table: Amount 2 Both in Yes, explain the arrangement in Part XIII and complete the following table: Amount 2 Both in Yes, explain the arrangement in Part XIII and complete the following table: Amount 2 Both in Yes, explain the arrangement in Part XIII Amount 3 Both in Yes, explain the arrangement in Part XIII Amount 4 Both in Yes, explain the arrangement in Part XIII Amount 5 Complete in the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No 8 If Yes No 9 If Yes Yes No 1 Administrative explains the organization answered Yes' on Form 990, Part IV, line 10. 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or q	Par	t III Organizations Maintaining C	ollections of A	rt, His	torical Tr	easures,	or Othe	r Similar A	ssets(co	ntinue	ed)
a Public exhibition d Loan or exchange programs b Scholarly research e Other chery for the preservation for future generations collections and explain how they further the organization's exempt purpose in Part XIII. 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 is collections 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? Ves No Part IV, line 9, or reported an amount on Form 990, Part X, line 21. 1 Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X, line 21. 1 Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X, line 21. 1 If Yes, explain the arrangement in Part XIII and complete the following table: Amount 1 It collections during the year 1 It d 2 Distributions during the year 1 It d 2 Distributions during the year 1 It d 2 Distributions during the year 1 It d 3 Diff 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. 1 Beginning of year balance (a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years back (e)	3	Using the organization's acquisition, accession	on, and other record	ds, chec	k any of the	following that	at are a siç	gnificant use	of its collec	tion it	ems
b Scholarly research c □ 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's solicit or receive donations of air, historical treasures, or other similar assests to be sold to raise funds rather than to be maintained as part of the organization collection? □ Yes □ No Part W 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 XZ □ No b If "Yes," explain the arrangement in Part XIII and complete the following table: □ Beginning balance □ Beginning balance □ Beding balance □ Beding balance □ Beding balance □ Beding bala		(check all that apply):									
c	а	Public exhibition	d	· 🖳	Loan or exc	hange progr	ams				
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? Part VI 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, 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, 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, line 21. 1b If "Yes," explain the arrangement in Part XIII and complete the following table: Comparison of the part of the part XIII and complete the following table: Comparison of the part XIII Arrow Part XIII Arrow Part XIII Arrow Part XIII Par	b	Scholarly research	е	,	Other						
5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be seld to traise funds rather than to be maintained as part of the organization's collection? 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 IV, line 9, or reported an amount on Form 990, Part IV, line 9, or reported an amount on Form 990, Part IV, line 9, or reported an amount on Form 990, Part IV, line 9, or reported on Form 990, Part IV, line 9, or reported on Form 990, Part IV, line 9, or reported on Form 990, Part IV, line 9, or reported on Form 990, Part IV, line 9, or reported on Form 990, Part IV, line 9, or reported on Part IVII	С	Preservation for future generations									
to be sold to raise funds rather than to be minitalined as part of the organization in collection?	4	Provide a description of the organization's co	llections and explai	n how tl	hey further t	he organizat	ion's exen	npt purpose ii	n Part XIII.		
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	5	During the year, did the organization solicit or	receive donations	of art, h	istorical trea	sures, or oth	ner similar	assets			
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? b If "Yes," explain the arrangement in Part XIII and complete the following table: C Beginning balance d Additions during the year f Ending balance 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. 1a Beginning of year balance (a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years back (e) Four years back (e) Four years back (e) Four years back (f) Three years back (e) Four years back (e) Four years back (f) Three years back (g) Current year end balance (line 1g, column (a)) held as: a Beard designated or quasiendowment A doministrative 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 quasiendowment M to representage son 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 b): Yes No 3a(i) 1 Tyes on line 3a(i), are the related organizations isted as required on Schedule R? 4 Describe in Part XIII the intended uses of the organizations endowment funds. Complete if the organizations answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line											No_
1a is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?	Par			ete if the	e organizatio	n answered	"Yes" on	Form 990, Pa	rt IV, line 9	, or	
on Form 990, Part X? b If "Yes," explain the arrangement in Part XIII and complete the following table: C Beginning balance d Additions during the year e Distributions during the year f Ending balance 10		reported an amount on Form 990, Par	t X, line 21.								
b If "Yes," explain the arrangement in Part XIII and complete the following table: c Beginning balance d Additions during the year d Id	1a									r	
c Beginning balance d Additions during the year e Distributions during the year 1 to									L Yes	ا د	No
c Beginning balance d Additions during the year e Distributions during the year 1 Ending balance 2 Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Ves No 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. 1 Beginning of year balance (a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four y	b	If "Yes," explain the arrangement in Part XIII a	and complete the fo	llowing	table:						
d Additions during the year e Distributions during the year f Ending balance 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Ves No bit "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. Part V Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10. Part V Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10. Part V Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10. Part V Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10. Part V Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10. Part V Endowment Funds. Complete if the organization and programs Part V Endowment Funds. Part V Endowment Funds									Amo	unt	
e Distributions during the year f f Enling balance 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No b i*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. Ta Beginning of year balance (a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four ye											
f Ending balance											
2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?											
Part V Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10. 1a Beginning of year balance (a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years back b Contributions (a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years back c Rot investment earnings, gains, and losses (d) Three years back (e) Four years back c Rot investment earnings, gains, and losses (d) Three years back (e) Four years back c Rot investment earnings, gains, and losses (d) Three years back (e) Four years back c Rot investment earnings, gains, and losses (d) Three years back (e) Four years back c Rot investment earnings, gains, and losses (d) Three years back (e) Four years back c Rot investment earnings, gains, and losses (d) Three years back (e) Four years back c Rot investment earnings, gains, and losses (d) Three years back (e) Four years back (e) Four years back c Rot investment earnings, gains, and losses (e) Four years back (e) Four ye											
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 (d) Three years back (e) Four years back (d) Three years back (e) Four years (e) Fou		•						ty?	L Yes	; L	⊟ No
(a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years back (d) Three years back (d) Three years back (d) Three years back (e) Four years back (d) Three years back (e) Four years (e) Four year										L	
1a Beginning of year balance	Par	Endowment Funds. Complete if							h l		
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			(a) Current year	(b) ⊦	rior year	(c) Two yea	rs dack (d) Three years	раск (е) г	our yea	ars dack
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 ▶		\[\begin{align*} \text{T} \\									
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 ▶											
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											
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 ▶		Г									
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 ▶	е	•									
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 ▶	_										
Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment ▶											
a Board designated or quasi-endowment ▶		-									
b Permanent endowment ▶			•	-	g, column (a	a)) held as:					
Temporarily restricted 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: (i) unrelated organizations (ii) related organizations 3a(i)											
Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations (ii) related organizations b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? 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 Buildings 16,442,919. 2,127,559. 14,315,360. c Leasehold improvements d Equipment 210,489. 178,620. 31,869. e Other Other	С										
Ves No (i) unrelated organizations 3a(i)	2-			-4: 41-	مامامين الم		al & Al-		_		
(ii) unrelated organizations (iii) related organizations (ii) related organizations (ii) related organizations (iii) related organizations (ii	Sa		ssion of the organiz	ation th	at are rielu a	ına aamınısı	ered for th	le organization	1	V.	a Na
(ii) related organizations b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? 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 (other) (b) Cost or other basis (other) (c) Accumulated depreciation 1a Land b Buildings 16,442,919 2,127,559 14,315,360 c c Leasehold improvements d Equipment 210,489 178,620 31,869 c e Other									20		55 110
b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? 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 Buildings 16,442,919. 2,127,559. 14,315,360. c Leasehold improvements d Equipment 210,489. 178,620. 31,869. e Other										`	-
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 Buildings Leasehold improvements d Equipment e Other Other 1 Land 1 Land 2 Land 3 Land 4 Land 5 Leasehold improvements C Leasehold improvements	h									_	-
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 (other) 1a Land b Buildings c Leasehold improvements d Equipment e Other Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. (b) Cost or other basis (other) (c) Accumulated depreciation 1d A42, 919 · 2, 127, 559 · 14, 315, 360 · 2, 127, 559 · 14, 315, 360 · 31, 869 · 31, 86	<i>1</i>								<u> 31</u>		
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) basis (other) basis (other) (c) Accumulated depreciation 1a Land b Buildings c Leasehold improvements d Equipment e Other 210,489. 178,620. 31,869. 2,127,492. 574,235.	Par			WITIETT	iuiius.						
Description of property (a) Cost or other basis (investment) (b) Cost or other basis (other) (c) Accumulated depreciation (d) Book value) Part I	V line 11a S	See Form 99	0 Part X	line 10			
ta Land basis (investment) basis (other) depreciation b Buildings 16,442,919. 2,127,559. 14,315,360. c Leasehold improvements 210,489. 178,620. 31,869. e Other 2,127,492. 1,553,257. 574,235.	-		1						(d) B	ook v	alue
1a Land b Buildings 16,442,919. 2,127,559. 14,315,360. c Leasehold improvements 210,489. 178,620. 31,869. e Other 2,127,492. 1,553,257. 574,235.		2000 Iption of property	1 ' '						(3, 5	JON V	4.40
b Buildings 16,442,919. 2,127,559. 14,315,360. c Leasehold improvements 210,489. 178,620. 31,869. e Other 2,127,492. 1,553,257. 574,235.		Land	`	/		. ==/	2.56			-	
c Leasehold improvements 210,489. 178,620. 31,869. e Other 2,127,492. 1,553,257. 574,235.					16.44	2,919.	2.1	27,559	14.3	15	360.
d Equipment 210,489. 178,620. 31,869. e Other 2,127,492. 1,553,257. 574,235.					.,	,	- , -	,	 	,	
e Other 2,127,492. 1,553,257. 574,235.					21	0,489.	1	78,620		31.	869.
				X, colur				>	14,9	21,	464.

Schedule D (Form 990) 2018 CENTER FOR	GLOBAL DEVEL	ОРМЕМТ	5.1	2-2351337 Page 3
Part VII Investments - Other Securities.	CHODIN DHVH	OI HERT		2331337 Fage C
Complete if the organization answered "Yes"	on Form 990, Part IV, lir	ne 11b. See Form 990,	Part X, line 12.	
(a) Description of security or category (including name of security)	(b) Book value			nd-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.		- 11 - 0 5 000	Deat V. Brand O	
Complete if the organization answered "Yes" (a) Description of investment	(b) Book value			nd-of-year market value
	(b) Dook value	(c) Method of V	aldation. Oost of el	id-or-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, lir	ne 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) lin	ne 15.)		<u></u>	<u> </u>
Part X Other Liabilities.				
Complete if the organization answered "Yes"	on Form 990, Part IV, lir		n 990, Part X, line 2	25.
1. (a) Description of liability		(b) Book value	_	
(1) Federal income taxes			-	
(2)			-	
(3)	l			

Schedule D (Form 990) 2018

(4) (5) (6) (7) (8)

Schedule D (Form 990) 2018

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.

2018
Open to Public Inspection

Name of the organization

Employer identification number

CE:	NTER FOR GLOB	AL DEVEL	OPMENT			52-235133	37
				tside the United States. Comple	ete if the organ		
	Form 990, Part IV						
1				ds to substantiate the amount of its gra			
	the grantees' eligibility for	or the grants or a	assistance, and	the selection criteria used to award the	e grants or assi	stance? 🔼	Yes No
2	For grantmakers. Described States.	ribe in Part V the	e organization's	procedures for monitoring the use of it	s grants and of	ther assistance out	side the
3				an be duplicated if additional space is i			1
	(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, pro- gram services, investments, grants to recipients located in the region)	is a prog describe	vity listed in (d) gram service, e specific type (s) in the region	(f) Total expenditures for and investments in the region
				GRANTS TO RECIPIENTS IN THE			
EUR	OPE	1	12	REGION			968,450.
UB.	-SARAHAN AFRICA	0	1	PROGRAM ACTIVITES	SURVEYS IN	TANZANIA	219,263.
יטסי	TH ASIA	0	3	PROGRAM ACTIVITES	SURVEYS IN	INDIA	87,956.
3 a	Subtotal	1	16				1,275,669.
	Total from continuation sheets to Part I	0	0				0.
С	Totals (add lines 3a	1	16				1 275 669

832071 10-31-18

Schedule F (Form 990) 2018

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

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)
			EDUCATION AND					
		EUROPE	RESEARCH	177,344.	WIRE TRANSFER	0.		
			EDUCATION AND					
		EUROPE	RESEARCH	393 338.	WIRE TRANSFER	0.		
			EDUCATION AND					
		EUROPE	RESEARCH	80,681.	WIRE TRANSFER	0.		
			EDUCATION AND					
		EUROPE	RESEARCH	148,779.	WIRE TRANSFER	0.		
		EUDODE	EDUCATION AND	72 240	MIDE WOAMGEED			
		EUROPE	RESEARCH	73,349.	WIRE TRANSFER	0.		
			EDUCATION AND					
		EUROPE	RESEARCH	90,825.	WIRE TRANSFER	0.		

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

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16. Part III can be duplicated if additional space is needed. (h) Method of valuation (book, FMV, appraisal, other) (c) Number of (d) Amount of (e) Manner of (f) Amount of (g) Description of (a) Type of grant or assistance (b) Region recipients cash grant cash disbursement noncash noncash assistance assistance

Schedule F (Form 990) 2018 Part IV Foreign Forms

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

Schedule F (Form 990) 2018

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: CENTER FOR GLOBAL DEVELOPMENT (CGD) REQUIRES THAT ALL GRANT RECIPIENTS PROVIDE FINANCIAL STATEMENTS AND REPORTS. THIS ALLOWS CGD TO REMAIN CONSTANTLY UPDATED ON THE PROGRESS THE GRANTEES ARE MAKING IN THEIR RESPECTIVE REGIONS.

Schedule F (Form 990) 2018

SCHEDULE J (Form 990)

Compensation Information

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

Compensated Employees

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

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

Department of the Treasury

Internal Revenue Service

CENTER FOR GLOBAL DEVELOPMENT

Employer identification number 52-2351337

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

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

Schedule J (Form 990) 2018

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

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

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

	(B) Breakdown of	W-2 and/or 1099-MI	SC compensation	(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B)
(A) Name and Title	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation	Deficition	(6)(1)-(0)	reported as deferred on prior Form 990
(1) MASOOD AHMED (i	415,462.	15,813.	0.	43,843.	1,237.	476,355.	0.
PRESIDENT (ii	0.	0.	0.	0.	0.	0.	0.
(2) AMANDA GLASSMAN (i	298,980.	0.	0.	41,250.	1,452.	341,682.	0.
CHIEF OPERATING OFFICER (ii	0.	0.	0.	0.	0.	0.	0.
(3) ELLEN MACKENZIE (i	246,176.	0.	0.	37,524.	22,800.	306,500.	0.
CHIEF FINANCIAL OFFICER (ii	0.	0.	0.	0.	0.	0.	0.
(4) VIJAYA RAMACHANDRAN (i	216,825.	5,000.	0.	32,436.	8,735.	262,996.	0.
SENIOR FELLOW (ii	0.	0.	0.	0.	0.	0.	0.
(5) ALAN GELB (i	223,073.	0.	0.	32,582.	1,076.	256,731.	0.
SENIOR FELLOW (ii	0.	0.	0.	0.	0.	0.	0.
(6) LILIANA ROJAS-SUAREZ (i	212,256.	2,500.	0.	31,762.	9,387.	255,905.	0.
SENIOR FELLOW (ii	0.	0.	0.	0.	0.	0.	0.
(7) CHARLES KENNY (i	199,708.	0.	0.	30,465.	23,600.	253,773.	0.
SENIOR FELLOW (ii		0.	0.	0.	0.	0.	0.
(8) MICHAEL CLEMENS (i	203,434.	0.	0.	30,434.	1,462.	235,330.	0.
SENIOR FELLOW (ii	0.	0.	0.	0.	0.	0.	0.
(i)							
(ii							
(i)							
(ii							
(i)							
(ii							
(i)							
(ii							
(i)							
(ii							
(i)							
(ii							
(i)							
(ii							
(i)							
(ii							

Part III Supplemental Information	
Provide the information, explanation, or desc	criptions 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 7:	
THE FOLLOWING INDIVIDU	JALS REPORTED ON PART VII RECEIVED BONUSES:
MASOOD AHMED	\$15,813
VIJAYA RAMACHANDRAN	\$ 5,000
LILIANA ROJAS-SUAREZ	\$ 2,500

SCHEDULE K (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Information on Tax-Exempt Bonds

► Complete if the organization answered "Yes" on Form 990, Part IV, line 24a. Provide descriptions,

explanations, and any additional information in Part VI.

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

2018
Open to Public Inspection

Name of the organization

CENTER FOR GLOBAL DEVELOPMENT

Employer identification number 52-2351337

CENTER FO	R GLOBAL DEV.	FTOLMENT						_	4-4	22T	331		
Part I Bond Issues													
(a) Issuer name	(b) Issuer EIN	(c) CUSIP#	(d) Date issued	(e) Issu	ue price	(f) Descript	on of purpose	(g) Defeased (h) On beha		behalf	(i) Po	ool	
										of is:	suer	finan	ıciı
								Yes	No	Yes	No	Yes	N
)	PURCHASE	OF						
A DISTRICT OF COLUMBIA	53-6001131	NONE	06/03/13	13,	360,000 .	OFFICE E	UILDING		Х		Х		2
В													L
С													L
_													
D. Drace and a													L
Part II Proceeds											D		
1 Amount of bonds rating			1 70	7,411.		В	С		+		ע		_
Amount of bonds retired Amount of bonds legally defeased				<i>,</i> , <u>,</u> , ,					-				
3 Total proceeds of issue				0,000.					+				
4 Gross proceeds in reserve funds				-,									_
5 Capitalized interest from proceeds													_
													_
7 Issuance costs from proceeds													_
8 Credit enhancement from proceeds													_
Working capital expenditures from proceed	ds												_
10 Capital expenditures from proceeds			4 4 4 4	4,824.									
11 Other spent proceeds				5,176.									
12 Other unspent proceeds													
13 Year of substantial completion			2	013									
			Yes	No	Yes	No	Yes	No		Yes		No	
14 Were the bonds issued as part of a refund	ing issue of tax-exempt b	oonds (or,											
if issued prior to 2018, a current refunding				X					_		_		
15 Were the bonds issued as part of a refund	-	•											
issued prior to 2018, an advance refunding				X			 						
			Х				 						
17 Does the organization maintain adequate by	-	•											
final allocation of proceeds?			Х							ali il a IV			

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

Schedule K (Form 990) 2018

Pai	rt III Private Business Use									
			Ą	E	3	(Ç	Γ)	
1	Was the organization a partner in a partnership, or a member of an LLC,	Yes	No	Yes	No	Yes	No	Yes	No	
	which owned property financed by tax-exempt bonds?		X							
2	Are there any lease arrangements that may result in private business use of									
	bond-financed property?		X							
3a	Are there any management or service contracts that may result in private									
	business use of bond-financed property?		X							
b	If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside									
	counsel to review any management or service contracts relating to the financed property?									
С	Are there any research agreements that may result in private business use of									
	bond-financed property?		X							
d	If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside									
	counsel to review any research agreements relating to the financed property?									
4	Enter the percentage of financed property used in a private business use by									
	entities other than a section 501(c)(3) organization or a state or local government		%		%		%		%	
5	Enter the percentage of financed property used in a private business use as a result of							i		
	unrelated trade or business activity carried on by your organization, another							i		
	section 501(c)(3) organization, or a state or local government	%			%	%		<u> </u>	%	
6	Total of lines 4 and 5		%		%	%			%	
7	Does the bond issue meet the private security or payment test?		X							
8a	Has there been a sale or disposition of any of the bond-financed property to a non-									
	governmental person other than a 501(c)(3) organization since the bonds were issued?		X							
b	If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed									
	of		%		%		%	<u> </u>	%	
С	If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections									
	1.141-12 and 1.145-2?									
9	Has the organization established written procedures to ensure that all nonqualified									
	bonds of the issue are remediated in accordance with the requirements under							<u>'</u>		
	Regulations sections 1.141-12 and 1.145-2?	X								
Pai	rt IV Arbitrage									
			Ą	E	3	(Ç)	
1	Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and	Yes	No	Yes	No	Yes	No	Yes	No	
	Penalty in Lieu of Arbitrage Rebate?		X							
2	If "No" to line 1, did the following apply?									
a	Rebate not due yet?		X							
	Exception to rebate?	X								
	No rebate due?		Х							
	If "Yes" to line 2c, provide in Part VI the date the rebate computation was									
	performed									
3	Is the bond issue a variable rate issue?		X							

Part IV Arbitrage (Continued)									
		Α		<u></u> В		С	Г	D	
4a Has the organization or the governmental issuer entered into a qualif	fied Yes	No	Yes	No	Yes	No	Yes	No	
hedge with respect to the bond issue?		X							
b Name of provider	•	•						•	
c Term of hedge						,		,	
d Was the hedge superintegrated?									
e Was the hedge terminated?									
5a Were gross proceeds invested in a guaranteed investment contract		X							
b Name of provider		•							
c Term of GIC						,		,	
d Was the regulatory safe harbor for establishing the fair market value	of the GIC satisfied?								
6 Were any gross proceeds invested beyond an available temporary p	eriod?	X							
7 Has the organization established written procedures to monitor the r	requirements of								
section 148?	Х Х								
Part V Procedures To Undertake Corrective Action									
		Α		В		C	D		
Has the organization established written procedures to ensure that we	violations of Yes	No	Yes	No	Yes	No	Yes	No	
federal tax requirements are timely identified and corrected through	the voluntary								
closing agreement program if self-remediation isn't available under a	· ·								
regulations?	X								
Part VI Supplemental Information. Provide additional information for r	responses to questions on Schedu	ule K. See inst	ructions						
PART IV, LINE 2C, REBATE COMPUTATION									
NO REBATE COMPUTATION WAS MADE BECAUS	E THERE WERE NO E	OND PRO	CEEDS '	ГО					
INVEST.									

SCHEDULE O

Internal Revenue Service

(Form 990 or 990-EZ)

Department of the Treasury

Supplemental Information to Form 990 or 990-EZ

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

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

2018
Open to Public

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

CENTER FOR GLOBAL DEVELOPMENT

Employer identification number 52-2351337

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

ENGAGES POLICY MAKERS AND THE PUBLIC TO INFLUENCE THE POLICIES OF THE

U.S. AND OTHER RICH COUNTRIES AND SUCH INSTITUTIONS AS THE WORLD BANK,

IMF AND WTO TO IMPROVE THE ECONOMIC AND SOCIAL DEVELOPMENT PROSPECTS IN

POOR COUNTRIES.

FORM 990, PART VI, SECTION A, LINE 4:

THE ORGANIZATION HAS MADE CHANGES TO ITS BYLAWS TO ALLOW BOARD MEMBERS TO SERVE FOR UP TO 12 CONSECUTIVE YEARS (4 TERMS) RATHER THAN 9 (3 TERMS). IN ADDITION, TWO OR MORE OFFICER POSITIONS MAY BE HELD BY THE SAME PERSON, EXCEPT THE OFFICES OF THE PRESIDENT AND THE TREASURER.

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

THE ORGANIZATION'S FORM 990 WAS PREPARED BY OUTSIDE ACCOUNTANTS WITH

ASSISTANCE FROM THE ORGANIZATION'S EXECUTIVE MANAGEMENT. THE AUDIT

COMMITTEE THEN REVIEWED THE 990. THE 990 WAS POSTED TO A SECURE WEBSITE AND

THE LOGIN INFORMATION EMAILED TO THE GOVERNING BODY (BOARD OF DIRECTORS)

FOR COMMENTS AND REVIEW BEFORE FINALIZING AND SIGNING.

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

FOR EMPLOYEES, WORK PERFORMED IN A PROFESSIONAL CAPACITY OUTSIDE CGD WHICH
MAY INTERSECT WITH THE ORGANIZATION'S MISSION MUST BE CLEARED BY THE
PRESIDENT IN WRITING. ANNUALLY, EACH BOARD MEMBER IS REQUIRED TO SIGN A
RENEWAL CONFLICT OF INTEREST POLICY STATEMENT. ANNUALLY, EACH EMPLOYEE IS
ADVISED TO NOTIFY MANAGEMENT OF ANY NEW POTENTIAL CONFLICTS. SPECIFIC CASES
OF CONFLICTS ARE ADDRESSED IN THE POLICY AND ARE RESOLVED BY THE PRESIDENT
LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Schedule O (Form 990 or 990-EZ) (2018)

832211 10-10-18

Schedule O (Form 990 or 990-EZ) (2018)	Page 2
Name of the organization CENTER FOR GLOBAL DEVELOPMENT	Employer identification number 52-2351337
OR THE BOARD OF DIRECTORS.	
FORM 990, PART VI, SECTION B, LINE 15A:	
THE COMPENSATION COMMITTEE OF THE BOARD DETERMINES THE PR	ESIDENT'S ANNUAL
SALARY AND BONUS. WHEN THE PRESIDENT WAS HIRED, THE ORGAN	IIZATION USED AN
OUTSIDE CONSULTANT WHO SPECIALIZES IN COMPENSATION SURVEY	S FOR WASHINGTON
AREA NON-PROFITS, SPECIFICALLY THINK TANKS. THE COMPENSAT	ION COMMITTEE ALSO
USES COMPENSATION SURVEYS AND OTHER SIMILAR ORGANIZATIONS	s' FORMS 990 ON AN
ANNUAL BASIS TO DETERMINE THE PRESIDENT'S COMPENSATION. T	HE MOST RECENT
REVIEW OF THE PRESIDENT TOOK PLACE IN FEBRUARY 2019. FOR	OTHER OFFICERS AND
KEY EMPLOYEES, THE ORGANIZATION BASES SALARIES UPON A COM	IPENSATION STUDY
CUSTOM-PREPARED FOR CGD, AS WELL AS AN ANNUAL COMPENSATION	N STUDY THAT
FOCUSES STRICTLY ON THINK TANKS.	
FORM 990, PART VI, SECTION C, LINE 19:	
THE ORGANIZATION MAKES ITS FINANCIAL STATEMENTS, GOVERNIN	IG DOCUMENTS AND
CONFLICT OF INTEREST POLICIES AVAILABLE TO THE PUBLIC UPO	N REQUEST.
FORM 990, PART IX, LINE 11G, OTHER FEES:	
RECRUITING:	
PROGRAM SERVICE EXPENSES	4,209.
MANAGEMENT AND GENERAL EXPENSES	32,719.
FUNDRAISING EXPENSES	4,663.
TOTAL EXPENSES	41,591.
ADMIN. CONSULTING SERVICES:	-
PROGRAM SERVICE EXPENSES	12,527.
MANAGEMENT AND GENERAL EXPENSES	97,379.
832212 10-10-18 Sche	dule O (Form 990 or 990-EZ) (2018)

Name of the organization CENTER FOR GLOBAL DEVELOPMENT	Employer identification number 52-2351337
FUNDRAISING EXPENSES	13,877.
TOTAL EXPENSES	123,783.
TEMPORARY SERVICES:	
PROGRAM SERVICE EXPENSES	648.
MANAGEMENT AND GENERAL EXPENSES	5,035.
FUNDRAISING EXPENSES	718.
TOTAL EXPENSES	6,401.
PROGRAM & RESEARCH CONSULTANTS:	
PROGRAM SERVICE EXPENSES	544,244.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	250.
TOTAL EXPENSES	544,494.
CONTRACTORS/PARTNERSHIPS:	
PROGRAM SERVICE EXPENSES	1,073,598.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	1,073,598.
TOTAL OTHER FEES ON FORM 990, PART IX, LINE 11G, COL A	1,789,867.
FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:	
AWARDS WRITE-OFF	-1,841,547.

SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships

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

Attach to Form 990.

Attach to Form 990.

2018
Open to Public Inspection

OMB No. 1545-0047

Department of the Treasury
Internal Revenue Service

Name of the organization

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

Name of the organization CENTER FOR GL	OBAL DEVELOPMENT				E	Employer identific 52-23513	ation no	umber
Part I Identification of Disregarded Entities. Comple	ete if the organization answered "Yes	" on Form 990, Part IV, line 3	33.					
(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state of foreign country)	(d) or Total inco	me End-of-year		birect co	f) ontrolling tity	9
Part II Identification of Related Tax-Exempt Organizations during the tax year.	zations. Complete if the organization	answered "Yes" on Form 99	0, Part IV, line 34,	because it had one	e or mo	ore related tax-exe	mpt	
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) (d) Legal domicile (state or foreign country) Exempt Code section		(e) Public charity status (if section 501(c)(3))			contr ent	g) 512(b)(13) rolled ity?
CENTER FOR GLOBAL DEVELOPMENT IN EUROPE (CGDE), 1 ABBEY GARDENS, LONDON, UNITED KINGDOM SW1V1DE	EDUCATION & RESEARCH ON POVERTY, HEALTH AND OTHER ISSUES	UNITED KINGDOM	501(C)(3)			ER FOR GLOBAL LOPMENT	Yes X	No
	4							

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

Schedule R (Form 990) 2018

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

			T	1					1	1	
(a)	(b)	(c)	(d)	(e)	(f)	(g)	(1	h)	(i)	(j)	(k)
Name, address, and EIN of related organization	Primary activity	Legal domicile	Legal domicile (state or foreign country) Direct controlling entity Predominant income (related, unrelated, excluded from tax under sections 512-514) Share of total income end-of-year assets		Disprop	ortionate	Code V-UBI	Genera	or Percentage		
of related organization		(state or	entity	(related, unrelated,	income	end-of-year	allocations?		amount in hav		ownership
		foreign country)		sections 512-514)		assets	Yes	No	K-1 (Form 1065)	Yes	lo
		-									
										$\perp \perp$	
										+	
-											

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	Sec 512(t contr ent	tion o)(13) rolled ity?
		country)	,			400010		Yes	No
									
									<u> </u>
									<u> </u>
		10							

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

Not	te: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.					Yes	No	
1	During the tax year, did the organization engage in any of the following transactions with o	one or more re	elated organizations listed	in Parts II-IV?				
а	Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity				1a		X	
	Gift, grant, or capital contribution to related organization(s)				1b	Х		
	Gift, grant, or capital contribution from related organization(s)				1c		X	
d	Loans or loan guarantees to or for related organization(s)				1d		X	
е	Loans or loan guarantees by related organization(s)				1e		X	
f	Dividends from related organization(s)							
g	Sale of assets to related organization(s)				1 g		X	
h					1h		X	
i	Exchange of assets with related organization(s)				1i		Х	
j	Lease of facilities, equipment, or other assets to related organization(s)				1j		Х	
k	k Lease of facilities, equipment, or other assets from related organization(s)							
ı	l Performance of services or membership or fundraising solicitations for related organization(s)							
m	Performance of services or membership or fundraising solicitations by related organization				1m		X	
	n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)							
	Sharing of paid employees with related organization(s)				10		X	
р	Reimbursement paid to related organization(s) for expenses				1p		Х	
q	q Reimbursement paid by related organization(s) for expenses							
-	· · · · · · · · · · · · · · · · · · ·							
r Other transfer of cash or property to related organization(s)								
	Other transfer of cash or property from related organization(s)				1s		X	
2	If the answer to any of the above is "Yes," see the instructions for information on who mus							
	(a) (b) (c) (d) Name of related organization Transaction type (a-s) Amount involved Method of determining amount in							
<u>(1)</u> (CENTER FOR GLOBAL DEVELOPMENT IN EUROPE	В	968,450.	ACTUAL AMOUNT				
(2)								
(3)								
(4)								
(')								
<u>(5)</u>								
(6)								
83216	3 10-02-18	49		Schedule F	R (Forr	n 990)	2018	

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

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

(a)	(b)	(c)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(e)	(f)	(g)	(r	1)	(i)	(j)	(k)
Name, address, and EIN	Primary activity	Legal domicile	Predominant income (related_unrelated	partners se	Share of	Share of	Dispri	opor- ate	Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	Genera managi	or Percentage
of entity		(state or foreign country)	excluded from tax under	orgs.?	total income	end-of-year assets	allocat	ions?	of Schedule K-1	partne	ownersnip
		Country)	Sections 5 (2-5 (4)	Yes No	p mcome	assets	Yes	No	(F01111 1065)	Yes N	0
											1
							$oxed{oxed}$				
								Ш			
										1 1	