Form 990
(Rev. January 2020)
Department of the Treasury Internal Revenue Service

EXTENDED TO NOVEMBER 16, 2020

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

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



AI	or th	e 2019 calendar year, or tax year beginning and e	ending		
B c	Check if pplicat	le: C Name of organization		D Employer identifie	cation number
	Addr	STRIVE INTERNATIONAL, INC.			
	Name	Doing business as		13-32556	79
	Initia		Room/suite	E Telephone number	
	Final	205 EAST 122ND STREET, 3RD FLOOR		212-360-	
	termi ated			G Gross receipts \$	10,352,856.
	Amer	MEW TORK, NT 10055 2050		H(a) Is this a group re	
	Appli tion pend			for subordinates	
		SAME AS C ABOVE		H(b) Are all subordinates in	
		empt status: X 501(c)(3)	r 🛄 527	If "No," attach a	list. (see instructions)
		te: WWW.STRIVE.ORG		H(c) Group exemption	
		f organization: 🔀 Corporation 🔄 Trust 🔄 Association 🔛 Other 🕨	L Year	of formation: 1984 N	State of legal domicile: NY
Pa	T	Summary			
e	1	Briefly describe the organization's mission or most significant activities: STRIV	ESM	ISSION IS T	
ano		PEOPLE ACQUIRE THE LIFE-CHANGING SKILLS A			
Governance	2	Check this box 🕨 🛄 if the organization discontinued its operations or dispos			
õ	3	Number of voting members of the governing body (Part VI, line 1a)			16
~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	4	Number of independent voting members of the governing body (Part VI, line 1b) $\ldots$			16
ies	5	Total number of individuals employed in calendar year 2019 (Part V, line 2a)			76
Activities &	6	Total number of volunteers (estimate if necessary)			0
Act		Total unrelated business revenue from Part VIII, column (C), line 12			0.
	b	Net unrelated business taxable income from Form 990-T, line 39	·····		
				Prior Year	Current Year
ue	8	Contributions and grants (Part VIII, line 1h)		9,701,357.	9,987,303.
Revenue	9	Program service revenue (Part VIII, line 2g)		317,279. -4,365.	199,125. -200.
Be		Investment income (Part VIII, column (A), lines 3, 4, and 7d)		153.	521.
		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		10,014,424.	10,186,749.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		2,954,517.	2,523,539.
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		2,954,517.	2,525,559.
	14	Benefits paid to or for members (Part IX, column (A), line 4)		4,467,734.	4,940,468.
Expenses		Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		<u>4,407,754</u> . 0.	43,639.
Den		Professional fundraising fees (Part IX, column (A), line 11e) Total fundraising expenses (Part IX, column (D), line 25) <b>709,33</b>	22	• •	43,033.
Ă		- · · · · · · · · · · · · · · · · · · ·		2,505,662.	2,436,154.
		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		9,927,913.	9,943,800.
	10	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		86,511.	242,949.
or	19	Revenue less expenses. Subtract line 18 from line 12		ginning of Current Year	End of Year
ance	20	Total assots (Part X, line 16)		4,972,957.	5,008,026.
t Assets ( d Balanc	20	Total assets (Part X, line 16) Total liabilities (Part X, line 26)		1,925,100.	1,717,220.
Fund		· · · · · · · · · · · · · · · · · · ·		3,047,857.	3,290,806.
		Net assets or fund balances. Subtract line 21 from line 20		5,011,057.	5,250,000.
		alties of perjury, I declare that I have examined this return, including accompanying schedules	and statem	ents, and to the best of m	v knowledge and belief it is

true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

	the mun			11/12/2020
Sign	Signiture of officer	1		Date
Here	PHILIP WEINBERG, PRESI	DENT/CEO		
	Type or print name and title			
	Print/Type preparer's name	Preparer's signature	Date	
Paid	ALWAYNE BURKE, CPA	ALWAYNE BURKE,		/20 ^{if} p01623706
Preparer	Firm's name 🕒 NCHENG LLP	-		Firm's EIN ▶ 81-0926770
Use Only	Firm's address 40 WALL STREET,	32ND FLOOR		
	NEW YORK, NY 100	05		Phone no. (212) 785-0100
May the IF	RS discuss this return with the preparer shown ab	ove? (see instructions)		X Yes No
932001 01-20	0-20 LHA For Paperwork Reduction Act Noti	ce, see the separate instruct	ions.	Form <b>990</b> (2019
S	EE SCHEDULE O FOR ORGANIZ	ATION MISSION S	STATEMENT C	ONTINUATION

orm	990 (2019) STRIVE INTERNATIONAL, INC.	13-3255679	Page
Par	t III Statement of Program Service Accomplishments		
	Check if Schedule O contains a response or note to any line in this Part III		<u></u> [.
1	Briefly describe the organization's mission:		
	STRIVE'S MISSION IS TO HELP PEOPLE ACQUIRE THE LIFE		5
	AND ATTITUDES NEEDED TO OVERCOME CHALLENGING CIRCUM		
	SUSTAINED EMPLOYMENT, AND BECOME VALUABLE CONTRIBUT		
	FAMILIES, THEIR EMPLOYERS, AND THEIR COMMUNITIES.	FOUNDED IN EAST	
2	Did the organization undertake any significant program services during the year which were not listed		
	prior Form 990 or 990-EZ?	Yes	X
	If "Yes," describe these new services on Schedule O.		
3	Did the organization cease conducting, or make significant changes in how it conducts, any program s	services?Yes	X
	If "Yes," describe these changes on Schedule O.		
4	Describe the organization's program service accomplishments for each of its three largest program se	rvices, as measured by expense	s.
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocation	ns to others, the total expenses,	and
	revenue, if any, for each program service reported.		
4a	(Code: ) (Expenses \$ 4,175,781. including grants of \$	) (Revenue \$	
	STRIVE'S FLAGSHIP PROGRAM, CAREER PATH, FOLLOW FIVE	PILLARS, WHICH	ARE
	PROVEN TO INCREASE STUDENT'S JOB PLACEMENT AND RETE	NTION RATES. IT	
	BEGINS WITH STRIVE'S SIGNATURE JOB READINESS WORKSH	OP, STRIVE START	· •
	DELIVERED THROUGH A WORK-SIMULATED ENVIRONMENT, THI	S PROGRAM PROVID	DES
	THE TRAINING PEOPLE NEED TO NOT ONLY LAND A JOB, BU		
	START FOCUSES ON ATTITUDE, ACCOUNTABILITY, PERSONAL		
	WORKPLACE ETHICS, PROFESSIONAL ETIQUETTE, AND INTER	-	
	FOLLOWING STRIVE START, STUDENTS CONTINUE WITH OCCU		
	TRAINING, WHICH FOLLOWS ONE OF SEVERAL CAREER PATHS		CAL
	MARKET DEMAND AND EMPLOYER NEEDS. TRAINING RESULTS		
	INDUSTRY-RECOGNIZED CREDENTIALS. THROUGHOUT THE PRO		
	COACHING GIVES EACH STUDENT INTENSE, PERSONAL ATTEN	-	
16	2 754 500 2 522 520		
4b	(Code:) (Expenses \$ 3,754,508 · including grants of \$ 2,523,539 · STRIVE IS THE NATION'S LEADING SOLUTION FOR PEOPLE		
	OBSTACLES TO EMPLOYMENT. OUR PROVEN MODEL PROPELS S		
	THAT LEAD TO UPWARD MOBILITY. WHAT MAKES STRIVE UNI		
	OF PROVIDERS. THE UNPARALLELED NETWORK IS A COMBINA		
	SITES (NEW YORK CITY) AND COMMUNITY-BASED ORGANIZAT		
	NETWORK) IN CITIES ACROSS THE COUNTRY, TOTALING 12		
	HIGHLY EFFECTIVE PROGRAMS PROVIDE COMPREHENSIVE TRA		E 2
	DEVELOPMENT SERVICES FOR INDIVIDUALS IN AREAS OF CO		
	AND UNEMPLOYMENT. EACH AFFILIATE IS AN INDEPENDENT		
	THAT LICENSES WITH STRIVE TO UTILIZE THE STRIVE PRO		
	IN CAPACITY-BUILDING ACTIVITIES. STRIVE SUPPORTS TH		RK
	VIA 1) A CAPABLE TEAM OF DEDICATED STAFF THAT SUPPO		
4c	(Code:) (Expenses \$ including grants of \$	) (Revenue \$	
1d	Other program services (Describe on Schedule O.)		
ти		)	
40	(Expenses \$ including grants of \$ ) (Revenue \$ ) Total program service expenses ► 7,930,289.	)	
10		Form	<b>)90</b> (n
	SEE SCHEDULE O FOR CONTINUAT		200
52002	2 01-20-20 SEE SCHEDOLE O FOR CONTINOAT		
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 Form 990 (2019)
 STRIVE INTERNATIONAL, INC.

 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	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		x
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			x
_	during the tax year? If "Yes," complete Schedule C, Part II	4		<u> </u>
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or	_		x
e	similar amounts as defined in Revenue Procedure 98-19? <i>If "Yes," complete Schedule C, Part III</i>	5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If</i> "Yes," <i>complete Schedule D, Part I</i>	6		x
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	0		- 23
'	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II.	7		x
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete	-		
U	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	-		
•	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		x
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10		x
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X			
	as applicable.			
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	Х	
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total			
	assets reported in Part X, line 16? 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	v	X
	Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>	11e	Х	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses		х	
10-	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X</i>	11f	A	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	10-	х	
h	Schedule D, Parts XI and XII Was the organization included in consolidated, independent audited financial statements for the tax year?	12a	- 73	
b	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		x
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	120		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,	114		
~	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		x
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? 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	Х	Ļ
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		X
	Did the organization operate one or more hospital facilities? <i>If</i> "Yes," <i>complete Schedule H</i>	20a		X
	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		v	
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	X	
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Part IV	Checklist of	<b>Required Sc</b>	hedules (continued)	

STRIVE INTERNATIONAL, INC.

23 [ 24a [ 24a [ 14 25a { 25a {	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the ast 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 Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease	22 23 24a	x	x
23 [ 24a [ 3 b [ c [ 4 25a \$	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete</i> <i>Schedule J</i> Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the ast day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete</i> <i>Schedule K. If "No," go to line 25a</i> Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		x	
24a [ 	and former officers, directors, trustees, key employees, and highest compensated employees? <i>If</i> "Yes," <i>complete</i> <i>Schedule J</i> Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the ast day of the year, that was issued after December 31, 2002? <i>If</i> "Yes," <i>answer lines 24b through 24d and complete</i> <i>Schedule K. If</i> "No," <i>go to line 25a</i> Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		x	
24a [ 3 b [ c [ 4 25a \$	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the ast day of the year, that was issued after December 31, 2002? <i>If</i> "Yes," <i>answer lines 24b through 24d and complete</i> <i>Schedule K. If</i> " <i>No</i> ," <i>go to line 25a</i> Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?			1
b [ c [ d [ 25a \$	Schedule K. If "No," go to line 25a	242		$\square$
b [ c [ d [ 25a \$	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	242		
c [ a d [ 25a \$				X
d [ 25a \$	Jid the organization maintain an escrow account other than a refunding escrow at any time during the year to defease	24b		-
d [ 25a \$	any tax-exempt bonds?	24c		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	ransaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
t	s the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and hat 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		x
	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current	200		<u> </u>
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		X
	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
C	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
€	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28 \	Nas the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	nstructions, for applicable filing thresholds, conditions, and exceptions):			
	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			
	Yes," complete Schedule L, Part IV	28a		X
	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		
	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b?/f	00-		X
	Yes," complete Schedule L, Part IV	28c 29		X
<b>30</b> [	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation	29		
	contributions? If "Yes," complete Schedule M	30		X
	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		X
	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets?If "Yes," complete Schedule N, Part II	32		X
	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
	Nas the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34		X X
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		<u> </u>
	f "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity vithin the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	330		-
	f "Yes," complete Schedule R, Part V, line 2	36		X
	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
é	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
<b>38</b> [	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?			
N Part	Note: All Form 990 filers are required to complete Schedule O           V         Statements Regarding Other IRS Filings and Tax Compliance	38	X	
	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	N
1a [	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 29			
	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
(	gambling) winnings to prize winners?	1c	X	
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2019)	STRIVE	INTERNATIONAL,	INC.
Statements	Regarding C	other IRS Filings and Ta	ax 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 76			
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 <i>e-file</i> (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		Х
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X
b	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			v
	any contributions that were not tax deductible as charitable contributions?	6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
_	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).	-		v
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required	7.		x
	to file Form 8282?	7c		<u>л</u>
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d	70		
e f	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e 7f		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
g h	If the organization received a contribution of qualified intellectual property, did the organization file of on 8039 as required ? If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	79 7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the	/11		
U	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
a	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12 10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders 11a			
b	Gross income from other sources (Do not net amounts due or paid to other sources against			
	amounts due or received from them.) 11b			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note: See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which the			
	organization is licensed to issue qualified health plans 13b			
	Enter the amount of reserves on hand 13c			37
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b		<b> </b>
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			v
	excess parachute payment(s) during the year?	15		X
10	If "Yes," see instructions and file Form 4720, Schedule N.	40		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** (2019)

932005 01-20-20

Form 990 (2019)

Form 990 (2019	3)
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STRIVE INTERNATIONAL, INC.

X

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

ec	tion A. Governing Body and Management					_
		1		_	Yes	
1a	Enter the number of voting members of the governing body at the end of the tax year	<b>1</b> a	1	6		
	If there are material differences in voting rights among members of the governing body, or if the governing					
	body delegated broad authority to an executive committee or similar committee, explain on Schedule 0.					
b	Enter the number of voting members included on line 1a, above, who are independent	1b	1	6		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationsh	nip with	any other			
	officer, director, trustee, or key employee?			2		1
3	Did the organization delegate control over management duties customarily performed by or under t	he dire	ct supervision			
	of officers, directors, trustees, or key employees to a management company or other person?			3		
4	Did the organization make any significant changes to its governing documents since the prior Form	990 wa	as filed?	4		
5	Did the organization become aware during the year of a significant diversion of the organization's as	ssets?		5		
6	Did the organization have members or stockholders?			6		
7a	Did the organization have members, stockholders, or other persons who had the power to elect or a	appoint	one or			Τ
	more members of the governing body?			7a		
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,					Τ
	persons other than the governing body?			7b		
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year					t
	The governing body?	-	-	8a	Х	I
	Each committee with authority to act on behalf of the governing body?				Х	┫
	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be re					1
-	organization's mailing address? If "Yes," provide the names and addresses on Schedule O			9		
ec	tion B. Policies (This Section B requests information about policies not required by the Internal I					
					Yes	1
0a	Did the organization have local chapters, branches, or affiliates?			10a	X	1
	If "Yes," did the organization have written policies and procedures governing the activities of such			. 100		1
~	and branches to ensure their operations are consistent with the organization's exempt purposes?			10b	х	
12	Has the organization provided a complete copy of this Form 990 to all members of its governing bo			11a	x	1
		uy ber		114		
	Describe in Schedule O the process, if any, used by the organization to review this Form 990. Did the organization have a written conflict of interest policy? <i>If</i> " <i>No</i> ," <i>go to line</i> 13			12a	х	
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give ris				X	+
	Did the organization regularly and consistently monitor and enforce compliance with the policy? If				- 23	┦
С				40-	х	
<b>`</b>	in Schedule O how this was done				X	+
	Did the organization have a written whistleblower policy?				X	╉
4	Did the organization have a written document retention and destruction policy?			. 14	~	+
5	Did the process for determining compensation of the following persons include a review and appro-	-	-			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision				37	ł
	The organization's CEO, Executive Director, or top management official			. 15a	X	4
b	Other officers or key employees of the organization			. 15b	Х	1
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).					
6a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrange	ement \	with a			
	taxable entity during the year?			<b>16</b> a		1
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evalu	ate its	participation			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organized	anizatio	on's			
	exempt status with respect to such arrangements?			16b		
	tion C. Disclosure					
7	List the states with which a copy of this Form 990 is required to be filed $\blacktriangleright NY$					
	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990,	and 99	0-T (Section 501(c)	(3)s only	) avai	ila
	for public inspection. Indicate how you made these available. Check all that apply.          X       Own website       X       Another's website       X       Upon request       Other (explain the control of the con	n on Si	chedule ()			
9	Describe on Schedule O whether (and if so, how) the organization made its governing documents, of		,	and fina	ncial	
3		Joimict	or interest policy,	anu iiridi	iuidi	
^	statements available to the public during the tax year.					
0	State the name, address, and telephone number of the person who possesses the organization's b HILDA ROMERO – (212) $360-1100$	UOKS A	nu recoras 🕨			
						-
		0035	j			

Part VII	Compensation of Officers,	Directors,	Trustees,	Key En	nployees,	Highest	Compensa	ted
	Employees, and Independe	ent Contra	ctors					

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.

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

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

Name and title         Average hours per below         Description the art of electron units below         Description to the compensation from organization         Reportable compensation from organization         Estimated aunual of other           (1)         BLIAN FRIEDMAN         2.00         X         X         0.         0.           (2)         JUDITH B. MCREIMEA         5.00         X         X         0.         0.         0.           (2)         JUDITH B. MCREIMEA         5.00         X         X         0.         0.         0.         0.           (2)         JUDITH B. MCREIMEA         5.00         X         X         0.         0.         0.         0.           (2)         JUDITH B. MCREIMEA         5.00         X         X         0.         0.         0.         0.           (3)         BORNEY CALENEA         5.00         X         X         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.	(A)	(B)		(C)					(D)	(E)	(F)
hours per week (list any hours for elated organizations         compensation from the organizations         compensation from the organizations         compensation the organizations         amount of the organizations           (1) BRIAN FRIEDMAN         2.00 (log)         x         x         0.         0.         0.           (1) BRIAN FRIEDMAN         2.00 (log)         x         x         x         0.         0.         0.           (1) BRIAN FRIEDMAN         2.00 (log)         x         x         x         0.         0.         0.           (2) JUDITH B. MELINEA         5.00 (log)         x         x         x         0.         0.         0.           (3) BOINTE L. HOWARD         2.00 (log)         x         x         0.         0.         0.         0.           (4) ADDREW RAHL         2.00 (log)         x         x         0.         0.         0.           (6) YUAH CLAUDE PIERRE         1.00 BOARD MEMEER         x         0.         0.         0.         0.           (1) ADREW RAHL         2.00 (log) ARDMERER         x         0.         0.         0.         0.           (10) VAR CLAUDE PIERRE         1.00 (log) ARD MEMER         x         0.         0.         0.         0.         0.	Name and title	Average	(do					one	Reportable	Reportable	Estimated
Week (ist ary bours for related organizations below line)         Interfer and below line)         Interfer and bel		hours per	box	, unle	ss pe	rson	is bot	h an	compensation	compensation	
(1)         BRIAN FRIEDMAN         2.00         x         x         x         x         0.         0.         0.           BOARD CHAIR         x         x         x         x         0.         0.         0.         0.           BOARD VICE CHAIR         2.00         x         x         x         0.         0.         0.           (3)         BONNIE L. HOWARD         2.00         x         x         0.         0.         0.           (4)         ANDREW RAHL         2.00         x         x         0.         0.         0.           SCRETARY         x         0.         0.         0.         0.         0.         0.           BOARD MEMBER         1.00         x         0.         0.         0.         0.           (5)         RICHARD SLUTSKY         1.00         x         0.         0.         0.           BOARD MEMBER         x         0.         0.         0.         0.         0.           (6)         YAAN-CLAUDE FIERRE         1.00         X         0.         0.         0.           BOARD MEMBER         x         0.         0.         0.         0.         0.				cer an	a a a	recto	or/trus	tee)			
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(2) JUDITH B, MCELNEA         5.00         X         X         X         0.         0.         0.           BOARD VICE CHAIR         X         X         X         0.         0.         0.         0.           TREASURER         2.00         X         X         0.         0.         0.         0.           (4) ANDREW RAHL         2.00         X         X         0.         0.         0.           SECRETARY         X         X         0.         0.         0.         0.           (5) RICHARD BARTHELMES         1.00         X         0.         0.         0.         0.           (6) YVAN-CLAUDE PIERRE         1.00         X         0.         0.         0.         0.           BOARD MEMBER         X         0.         0.         0.         0.         0.         0.           BOARD MEMBER         X         0.         0.         0.         0.         0.         0.           (9) RANDY ZENO         1.00         X         0.         0.         0.         0.           BOARD MEMBER         X         0.         0.         0.         0.         0.           (10) JAY SHEEHY         1.00<	(1) BRIAN FRIEDMAN	2.00	_	_		-		-			
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(6)         YVAN-CLAUDE PIERRE         1.00         X         0.         0.         0.           BOARD MEMBER         X         0.         0.         0.         0.         0.         0.           BOARD MEMBER         X         0.         0.         0.         0.         0.         0.           BOARD MEMBER         X         0.         0.         0.         0.         0.         0.           BOARD MEMBER         X         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.	(5) RICHARD BARTHELMES	1.00									
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(7) ARTHUR KOKOT       1.00       X       0.       0.       0.         BOARD MEMBER       X       0.       0.       0.       0.       0.         BOARD MEMBER       X       0.       0.       0.       0.       0.       0.         BOARD MEMBER       X       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.	(6) YVAN-CLAUDE PIERRE	1.00									
BOARD MEMBER         X         0.         0.         0.           (8) LAURA SLUTSKY         1.00         0.         0.         0.         0.           BOARD MEMBER         X         0.         0.         0.         0.         0.           (11) TONIA O'CONNOR         1.000         0.         0.         0.         0.         0.           BOARD MEMBER         X         0.         0.         0.         0.         0.         0.           (12) TONY STEADMAN         1.000         X         0.         0.         0.         0.           BOARD MEMBER         X         0.         0.         0.         0.         0.           (14) LAURIE ROSENFE	BOARD MEMBER		Х						0.	0.	0.
(8)       LAURA SLUTSKY       1.00       X       0.       0.       0.         BOARD MEMBER       X       0.       0.       0.       0.       0.         (9)       RANDY ZENO       1.00       X       0.       0.       0.       0.         BOARD MEMBER       X       0.       0.       0.       0.       0.       0.         BOARD MEMBER       X       0.       0.       0.       0.       0.       0.         BOARD MEMBER       X       0.       0.       0.       0.       0.       0.         BOARD MEMBER       X       0.       0.       0.       0.       0.       0.         BOARD MEMBER       X       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0. <td>(7) ARTHUR KOKOT</td> <td>1.00</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td>	(7) ARTHUR KOKOT	1.00									
BOARD MEMBER         X         0.         0.         0.         0.           (9) RANDY ZENO         1.00         X         0.         0.         0.         0.           BOARD MEMBER         X         0.         0.         0.         0.         0.           (12) TONY STEADMAN         1.000         X         0.         0.         0.         0.           BOARD MEMBER         X         0.         0.         0.         0.         0.         0.           (14) LAURIE ROSENFELD         1.000         X         0.         0.         0.         0.           (15) H. THOMPSON RODMAN JR.         1.00         X         0.         0.         0.         0. </td <td>BOARD MEMBER</td> <td></td> <td>Х</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td>0.</td> <td>0.</td> <td>0.</td>	BOARD MEMBER		Х						0.	0.	0.
(9) RANDY ZENO       1.00       X       0.       0.       0.         BOARD MEMBER       X       0.       0.       0.       0.       0.         (10) JAY SHEEHY       1.00       X       0.       0.       0.       0.         BOARD MEMBER       X       0.       0.       0.       0.       0.       0.         (11) TONIA O'CONNOR       1.00       X       0.       0.       0.       0.       0.         BOARD MEMBER       X       0.       0.       0.       0.       0.       0.       0.         (12) TONY STEADMAN       1.00       X       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.	(8) LAURA SLUTSKY	1.00									
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(10) JAY SHEEHY       1.00       X       0.       0.       0.         BOARD MEMBER       X       0.       0.       0.       0.       0.         (11) TONIA O'CONNOR       1.00       X       0.       0.       0.       0.         BOARD MEMBER       X       0.       0.       0.       0.       0.       0.         (12) TONY STEADMAN       1.00       X       0.       0.       0.       0.       0.         BOARD MEMBER       X       0.       0.       0.       0.       0.       0.         (13) ROY CASTRO       1.00       0.       0.       0.       0.       0.       0.         BOARD MEMBER       X       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.	(9) RANDY ZENO	1.00									_
BOARD MEMBER         X         0.         0.         0.         0.           (11) TONIA O'CONNOR         1.00         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .         .	BOARD MEMBER		Х						0.	0.	0.
(11) TONTA O'CONNOR       1.00       X       0.0.0.0.         BOARD MEMBER       1.00       X       0.0.0.0.         (12) TONY STEADMAN       1.00       X       0.0.0.0.         BOARD MEMBER       X       0.0.0.0.       0.0.0.         BOARD MEMBER       X       0.0.0.0.       0.0.0.         (13) ROY CASTRO       1.00       X       0.0.0.0.         BOARD MEMBER       X       0.0.0.0.       0.0.0.         (14) LAURIE ROSENFELD       1.00       0.0.0.0.       0.0.0.         BOARD MEMBER       X       0.0.0.0.0.       0.0.0.         (15) H. THOMPSON RODMAN JR.       1.00       0.0.0.0.       0.0.0.         (16) PHILIP WEINBERG       35.00       X       250,000.0.0.4,990.         (17) HILDA ROMERO       35.00       X       129,885.0.2,515.	(10) JAY SHEEHY	1.00									_
BOARD MEMBER         X         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.			Х						0.	0.	0.
(12) TONY STEADMAN       1.00       X       0.       0.       0.       0.         BOARD MEMBER       X       1.00       X       0.       0.       0.       0.       0.         (13) ROY CASTRO       1.00       X       0.       0.       0.       0.       0.       0.         BOARD MEMBER       X       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.	(11) TONIA O'CONNOR	1.00									
BOARD MEMBER         X         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.			х						0.	0.	0.
(13) ROY CASTRO       1.00       X       0.       0.       0.         BOARD MEMBER       1.00       X       0.       0.       0.       0.         (14) LAURIE ROSENFELD       1.00       X       0.       0.       0.       0.         BOARD MEMBER       X       0.       0.       0.       0.       0.       0.         BOARD MEMBER       X       0.       0.       0.       0.       0.       0.         BOARD MEMBER       X       1.00       X       0.       0.       0.       0.         (15) H. THOMPSON RODMAN JR.       1.00       X       0.       0.       0.       0.         (16) PHILIP WEINBERG       35.00       X       X       250,000.       0.       4,990.         (17) HILDA ROMERO       35.00       X       129,885.       0.       2,515.		1.00									•
BOARD MEMBER         X         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.		1 00	Х						0.	0.	0.
(14) LAURIE ROSENFELD       1.00       0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.		1.00									•
BOARD MEMBER         X         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.		1 00	Х						0.	0.	0.
(15) H. THOMPSON RODMAN JR.       1.00       0.       0.       0.         CHAIRMAN EMERITUS & CO-FOUNDER       X       0.       0.       0.       0.         (16) PHILIP WEINBERG       35.00       X       X       250,000.       0.       4,990.         PRESIDENT & CEO       35.00       X       X       129,885.       0.       2,515.		1.00									0
CHAIRMAN EMERITUS & CO-FOUNDER       X       0.       0.       0.         (16) PHILIP WEINBERG       35.00       X       X       250,000.       0.       4,990.         PRESIDENT & CEO       X       X       250,000.       0.       4,990.         (17) HILDA ROMERO       35.00       X       129,885.       0.       2,515.		1 00	х						0.	0.	0.
(16) PHILIP WEINBERG       35.00       X       X       250,000.       0.       4,990.         PRESIDENT & CEO       X       X       250,000.       0.       4,990.         (17) HILDA ROMERO       35.00       X       129,885.       0.       2,515.		1.00									0
PRESIDENT & CEO         X         X         X         250,000.         0.         4,990.           (17) HILDA ROMERO         35.00         X         129,885.         0.         2,515.		25 00	х						0.	0.	0.
(17) HILDA ROMERO         35.00         X         129,885.         0.         2,515.		35.00								<u> </u>	4 000
CHIEF FINANCIAL OFFICER         X         129,885.         0.         2,515.			X	<u> </u>	X				⊿50,000.	0.	4,990.
		35.00							100 005		
	CHIEF FINANCIAL OFFICER 932007 01-20-20				Ā				129,005.	U.	∠,515. Form <b>990</b> (2019)

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7 2019.05000 STRIVE INTERNATIONAL, INC.

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Form 990 (2019) STRIVE INTERNATIONAL, INC. 13-3255										255	679	Pa	ge <b>8</b>
Part VII Section A. Officers, Directors, Trus		ploy	ees,			ghe	st C		es (continued)				
(A) Name and title	<b>(B)</b> Average hours per week	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)			than ( is botl	n an	(D) Reportable compensation from	<b>(E)</b> Reportable compensation from related		Est am	(F) imateo ount c 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)	organization (W-2/1099-MIS		fro orga and	ensat m the nizatio relate nizatio	on ed
(18) LAKYTHIA FERBY	35.00			х				142 110		ο.	-		1
EXECUTIVE DIRECTOR, STRIVE (19) GREG WISE	35.00			^				142,119.		<u> </u>	2	2,60	14.
VICE PRESIDENT, NATIONAL						x		123,200.		0.	2	2,25	53.
(20) CYNTHIA TREVOR	35.00												
NATIONAL VP DEVELOPMENT & COMMUNICAT						X		145,000.		0.			0.
1b Subtotal								790,204.		0.	12	2,36	
c Total from continuation sheets to Part VI								0.790,204.		0.	1 0	2,36	0.
<ul> <li>d Total (add lines 1b and 1c)</li> <li>2 Total number of individuals (including but not set to the set of the set of</li></ul>								-	000 of reported	-	12	1,30	04.
compensation from the organization		1050	11510	u ai	0000	5) VVI	101		,000 of reportab	C			5
											,	Yes	No
<b>3</b> Did the organization list any <b>former</b> officer,			key e	empl	loye	e, or	hig	ghest compensated emp	loyee on				
line 1a? If "Yes," complete Schedule J for si											3	_	X
4 For any individual listed on line 1a, is the su			•					•	the organization			x	
<ul><li>and related organizations greater than \$150</li><li>Did any person listed on line 1a receive or a</li></ul>									dual for services		4		
rendered to the organization? If "Yes," com					-						5		Х
Section B. Independent Contractors													
<b>1</b> Complete this table for your five highest con										pensa	ation fr	om	
the organization. Report compensation for t	the calendar y	ear e	endir	ng w	vith	or w	ithiı T		/ear.		(0)		
(A) Name and business	address							<b>(B)</b> Description of s	ervices	C	( <b>C</b> ) ompen		I
JOBS FOR THE FUTURE								PROGRAM					
88 BROAD STREET, BOSTON,	L 0						IMPLEMENTATI	ON SUPPO		112	2,81	9.	
							_						
					.,								
2 Total number of independent contractors (ii \$100,000 of compensation from the organiz	•	ot lii	niteo	u to	τno	se lis L	stec	a above) who received m	iore than				
					-	-					Form 9	<b>90</b> (2	019)

932008 01-20-20

			2019) STRIVE INTE	RN	ATIONAL,	INC.		13-3255	679 Page 9
Ра			Statement of Revenue						
			Check if Schedule O contains a respo	nse	or note to any lin	e in this Part VIII	/=		
						( <b>A)</b> Total revenue	( <b>B</b> ) Related or exempt function revenue	Unrelated	Revenue excluded
nts nts	1	а	Federated campaigns 1a						
Contributions, Gifts, Grants and Other Similar Amounts			Membership dues 1b						
ts, Arr			Fundraising events 1c		1,117,344.				
Gif			Related organizations 1d						
ons, Sim			Government grants (contributions) 1e		6,506,484.				
utic		f	All other contributions, gifts, grants, and		2 262 475				
trib Oth			similar amounts not included above 1f		2,363,475.				
Son			Noncash contributions included in lines 1a-1f		19,777.	9,987,303.			
0		<u> </u>	Total. Add lines 1a-11		Business Code	5,507,505.			
e	2	а	PROGRAM INCOME		900099	199,125.	199,125.		
Program Service Revenue	~	b					,		
Sei		c							
am		d		_					
ogr		е							
P		f	All other program service revenue						
		g	Total. Add lines 2a-2f			199,125.			
	3		Investment income (including dividends, in						
			other similar amounts)						
	4		Income from investment of tax-exempt bo		. 1				
	5		Royalties		(ii) Personal				
	6	_			(II) Personal				
	0		Gross rents 6a Less: rental expenses 6b						
			Rental income or (loss) 6c						
			Net rental income or (loss)						
	7		Gross amount from sales of (i) Securit		(ii) Other				
	-		assets other than inventory <b>7a</b> 19,5	577.					
		b	Less: cost or other basis						
anı			and sales expenses 7b 19,7	77.					
evenue		с	Gain or (loss)	200.					
r Re			Net gain or (loss)		►	-200.	-200.		
Other Re	8	а	Gross income from fundraising events (not						
0			including \$ 1,117,344. of						
			contributions reported on line 1c). See		146 220				
		Ŀ	Part IV, line 18	8a 8b	146,330. 146,330.				
			Less: direct expenses Net income or (loss) from fundraising ever		140,550.	0.			
	9		Gross income from gaming activities. See			•••			
	•		Part IV, line 19	9a					
		b	Less: direct expenses	9b					
			Net income or (loss) from gaming activities	s	►				
	10	а	Gross sales of inventory, less returns						
			and allowances	10a					
		b	Less: cost of goods sold	10b					
		С	Net income or (loss) from sales of inventor	ry					
sn					Business Code	Fai			
neo	11		OTHER REVENUE		532000	521.	521.		
Miscellaneous Revenue		b							<u> </u>
Re		c c	All other revenue						
Σ			All other revenue			521.			
	12		Total revenue. See instructions			10,186,749.	199,446.	0.	0
93200					►	, , •	,		Form <b>990</b> (2019

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2019.05000 STRIVE INTERNATIONAL, INC.

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STRIVE INTERNATIONAL, INC. 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).

Don	Check if Schedule O contains a respons ot include amounts reported on lines 6b,	(A)	(B)	(C)	(D)
	Bb, 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		CAPONOCO	general expenses	expenses
	and domestic governments. See Part IV, line 21	2,523,539.	2,523,539.		
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				
4	Benefits paid to or for members				
	Compensation of current officers, directors,				
		379,885.		267,385.	112,500
	trustees, and key employees	575,005.		207,303.	112,500
6	Compensation not included above to disqualified				
	persons (as defined under section $4958(f)(1)$ ) and				
_	persons described in section 4958(c)(3)(B)	3,717,843.	2 000 121	398,324.	331,098
	Other salaries and wages	3,111,043.	2,988,421.	390,324.	331,090
	Pension plan accruals and contributions (include	EE 011	27 520	1 4 4 7 2	2 200
	section 401(k) and 403(b) employer contributions)	55,311.	37,530.	14,473.	3,308
9	Other employee benefits	524,639.	389,969.	74,405.	60,265
0	Payroll taxes	262,790.	187,099.	48,034.	27,657
1	Fees for services (nonemployees):	00.450	10.100	40.050	
а	Management	82,179.	12,109.	49,250.	20,820
b	Legal				
С	Accounting	39,100.		39,100.	
d	Lobbying				
	Professional fundraising services. See Part IV, line 17	43,639.			43,639
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25,				
-	column (A) amount, list line 11g expenses on Sch 0.)	796,895.	766,461.	23,148.	7,286
12	Advertising and promotion				
	Office expenses	114,755.	75,430.	14,527.	24,798
	Information technology	148,075.	103,123.	35,174.	9,778
5	Royalties				-
16	Occupancy	410,159.	293,400.	95,067.	21,692
	Travel	80,239.	73,367.	4,174.	2,698
8	Payments of travel or entertainment expenses		,		_,
	for any federal, state, or local public officials				
	Conferences, conventions, and meetings	36,221.	23,329.	4,146.	8,746
	· · · · · · · · · · · · · · · · · · ·	50,221.	23,525.	4,140.	0,740
20	Interest				
21	Payments to affiliates	84,473.	59,924.	14,563.	9,986
22	Depreciation, depletion, and amortization	28,207.	13,286.	13,926.	995
3		20,207.	13,200.	13,920.	995
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses on line 24e. If				
	line 24e amount exceeds 10% of line 25, column (A)				
	amount, list line 24e expenses on Schedule 0.)		00.000	170 707	
а	BAD DEBT EXPENSE	259,795.	80,068.	179,727.	
b	CLIENT ACTIVITIES/SUPPL	254,031.	254,031.		
с	OTHER	73,296.	26,445.	24,280.	22,571
d	EQUIPMENT RENTAL	24,207.	19,313.	3,454.	1,440
е	All other expenses	4,522.	3,445.	1,021.	56
5	Total functional expenses. Add lines 1 through 24e	9,943,800.	7,930,289.	1,304,178.	709,333
6	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 <b>990</b> (20 ⁻

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2019.05000 STRIVE INTERNATIONAL, INC.

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

STRIVE INTERNATIONAL,

INC.

13-3255679 Page 11

Beginning of year         End of year           1         Cash - non-interest-bearing         147,775.1         399,652           2         Savings and temporary cash investments         320,938         1,479,737.3         3717,158           3         Pledges and grants receivable, net         1,479,379.3         717,158           4         Accounts receivable, net         2,731,602.4         3,031,807           5         Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons         5           6         Loans and other receivable, net         6           7         Notes and loans receivable, net         7           8         Inventories for sale or use         8           9         Prepaid expenses and deferred charges         48,798.9         42,705           10a         906,062.         8         9           11         Investments - ubdicipreciation         10a         906,062.           12         Investments - ubdicipreciation         10a         906,062.           13         Investments - ubdicipreciation         10a         906,062.           14         Intarget expenses         10a         906,062.      <
2       Savings and temporary cash investments       8,581. 2       320,938         3       Pledges and grants receivable, net       1,479,379. 3       717,158         4       Accounts receivable, net       2,731,602. 4       3,031,807         5       Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons       5         6       Loans and other receivables from other disgualified persons (as defined under section 4958()(1)), and persons described in section 4958()(2)(8)       6         7       Notes and loans receivable, net       7         8       Inventories for sale or use       8         9       Prepaid expenses and deferred charges       48,798. 9       42,705         10a       906,062.       488,798. 9       422,705         11       Investments - other securities. See Part IV, line 11       11       12         12       Investments - other securities. See Part IV, line 11       13       14         14       Intargible assets       11       13         14       13       14       14         15       Other assets. See Part IV, line 11       13       14         16       Total assets. Acid lines 1 through 15 (must equal line 33) </th
3       Pledges and grants receivable, net       1,479,379.3       717,158         4       Accounts receivable, net       2,731,602.4       3,031,807         5       Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons       5         6       Loans and other receivable, net       7         7       Notes and loans receivable, net       7         8       nvertorizes from other disgualified persons (as defined under section 4958(r)(1)), and persons described in section 4958(c)(3)(B)       6         9       Prepaid expenses and deferred charges       48,798.9       42,705         10a       906,062.       8       9         11       Investments - publicly traded securities       11       12         12       Investments - publicly traded securities       11       13         13       Investments - publicly traded securities       11       13         14       Intangible assets       14       33,516         15       Other assets. See Part IV, line 11       13       14         14       Intangible assets       14       15         15       Other assets. See Part IV, line 11       13       14
4       Accounts receivable, net       2,731,602.4       3,031,807         5       Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons       5         6       Loans and other receivables from other disqualified persons (as defined under section 4958(0/1)), and persons described in section 4958(0/3)(B)       6         7       Notes and loans receivable, net       7         8       Inventories for sale or use.       8         9       Prepaid expenses and deferred charges       48,798.9         10a       906,062.       8         b Less: accumulated depreciation       10a       906,062.         b Less: accumulated depreciation       10a       906,062.         11       Investments - publicly traded securities.       11         12       Investments - publicly traded securities.       11         13       Investments - publicly traded securities.       14         14       15       016 accust spashe and accrued expenses       1, 384, 052.17       1, 507, 133         18       Grants payable       18       20       21       22         21       Eccorw or custorial account liability. Complete Part V of Schedule D       21       22       22
5       Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons       5         6       Loans and other receivables from other disqualified persons (as defined under section 4958/(1), and persons described in section 4958(c)(3)(B)       6         7       Notes and loans receivable, net       7         8       inventories for sale or use       8         9       Prepaid expenses and deterred charges       48,798.9         10a       Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D       10a         9       Less: accumulated depreciation       10b       443,812.         11       Investments - publicly traded securities       11         12       Investments - publicly traded securities       11         14       Intangible assets       14         15       Other assets. See Part IV, line 11       13         16       Total assets. Add lines 1 through 15 (must equal line 33)       4,972,957.       16       5,008,026         17       Accounts payable and accrued expenses       1,384,052.       17       1,507,133         19       Deferred revenue       19       1,667         21       Econw or custodial account liability. Complete Part IV of
segent       trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons       5         6       Loans and other receivables from other disqualified persons (as defined under section 4958(r)(1)), and persons described in section 4958(c)(3)(B)       6         7       Notes and loans receivable, net       7         8       Inventories for sale or use       8         9       Prepaid expenses and deferred charges       48,798.9         10a       Land, buildings, and equipment: cost or other basis. Complete Part V of Schedule D       10b         11       Investments - publicly traded securities       11         12       Investments - publicly traded securities       11         13       Investments - publicly traded securities       11         14       Intangible assets       14         15       Other assets. See Part IV, line 11       12         14       Intangible assets       1, 33, 516         16       Total assets. Add lines 1 through 15 (must equal line 33)       4, 972, 957.16       5, 008, 026         17       Accounts payable and accrued expenses       1, 384, 052.17       1, 507, 133         19       Deferred revenue       19       1, 667         20       21       22       23
ggg       controlled entity or family member of any of these persons       5         6       Lcans and other receivables from other disqualified persons (as defined under section 4958()(3)(B)       6         7       Notes and loans receivable, net       7         8       Inventories for sale or use       8         9       Prepaid expenses and deferred charges       48,798.9       42,705         10a       Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D       10a       906,062.         b       Less: accumulated depreciation       10b       443,812.530,225.10c       462,250         11       Investments - publicly traded securities       11       12         12       Investments - program-related. See Part IV, line 11       13       14         14       Intragible assets       14       14         15       Other assets. See Part IV, line 11       13       14         14       Intragible assets       1,384,052.17       1,507,133         18       Grants payable       18       19       1,667         20       Tax exempt bond liabilities       20       20       21         21       Escrow or custodial account liability. Complete Part IV of Schedule D       21       22         21
6       Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)       6         7       Notes and loans receivable, net       7         8       Inventories for sale or use       8         9       Prepaid expenses and deferred charges       48,798.9       42,705         10a       Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D       10a       906,062.         b       Less: accumulated depreciation       10a       443,812.       530,225.       10c       462,250         11       Investments - publicly traded securities       11       12       13       14         12       Investments - other securities. See Part IV, line 11       13       14       13         14       13       14       13       14         15       Other assets. See Part IV, line 11       13       14       15         16       Total assets. Add lines 1 through 15 (must equal line 33)       4,972,957.       16       5,008,026         17       Accounts payable and accrued expenses       1,384,052.       17       1,507,133         18       Grants payable       18       1       1,667         20       Tax-exempt bond liability. Complete Part IV o
gege         under section 4958(h(1)), and persons described in section 4958(c)(3)(B)         6           7         Notes and loans receivable, net         7           8         Inventories for sale or use         8           9         Prepaid expenses and deferred charges         48,798.9         42,705           10a         Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D         10a         906,062.           b         Less: accumulated depreciation         10b         443,812.         530,225.10c         462,250           11         Investments - program-related. See Part IV, line 11         11         12         11           12         Investments - program-related. See Part IV, line 11         13         14           15         Other assets. See Part IV, line 11         13         14           16         Total assets. Add lines 1 through 15 (must equal line 33)         4,972,957.16         5,008,026           17         Accounts payable and accrued expenses         1,384,052.177         1,507,133           19         Deferred revenue         19         1,667           21         Escrow or custodial account liability. Complete Part IV of Schedule D         21           22         Loans and other payables to any outrent or former officer, director, trustee, key employee, cr
9       7       Notes and loans receivable, net       7         8       Inventories for sale or use       8       9         9       Prepaid expenses and deferred charges       48,798.9       42,705         10a       Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D       10a       906,062.         b       Less: accumulated depreciation       10b       443,812.       530,225.10c       462,250         11       Investments - publicly traded securities       11       12       11         12       Investments - specirities. See Part IV, line 11       13       13         14       Intagible assets       14       5,008,026         15       Other assets. See Part IV, line 11       13       14         14       Intagible and accrued expenses       1,384,052.17       1,507,133         16       Total assets. Add lines 1 through 15 (must equal line 33)       4,972,957.16       5,008,026         17       Accounts payable       18       20       21         20       21       20       21       20         21       Econs and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons       378,000.2
8       Inventories for sale or use       8         9       Prepaid expenses and deferred charges       48,798.9       9       42,705         10a       Land, buildings, and equipment: cost or other basis. Complete Part V of Schedule D       10a       906,062.       10a       48,798.9       42,705         b       Less: accumulated depreciation       10a       906,062.       11       12       462,250         11       Investments - publicly traded securities       11       12       12       11         12       Investments - other securities. See Part IV, line 11       13       14       13         14       Intangible assets       14       13       14         15       Other assets. See Part IV, line 11       26,597.15       33,516         16       Total assets. Add lines 1 through 15 (must equal line 33)       4,972,957.16       5,008,026         17       Accounts payable and accrued expenses       1,384,052.17       1,507,133         18       Grants payable       18       20         21       Escrow or custodial account liability. Complete Part IV of Schedule D       21       21         22       Loans and other payable to unrelated third parties       23       24       23         22       Loans and othe
10a       Land, buildings, and equipment: cost or other basis. Complete Part V of Schedule D       10a       906,062.         10a       Land, buildings, and equipment: cost or other basis. Complete Part V of Schedule D       10b       443,812.       530,225.       10c       462,250         11       Investments - publicly traded securities       111       12       111         12       Investments - other securities. See Part IV, line 11       12       13       14         13       Investments - program-related. See Part IV, line 11       13       14       14         14       Intangible assets.       26,597.       16       5,008,026         17       Accounts payable and accrued expenses       1,384,052.       17       1,507,133         18       Grants payable       19       1,667         10       Tax-exempt bond liabilities       20       20         21       Escrow or custodial account liability. Complete Part IV of Schedule D       21       21         22       Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons       378,000.       22         23       Secured mortagaes and notes payable to unrelated third parties       24       23       24
10a       Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D       10a       906, 062.         b       Less: accumulated depreciation       10b       443, 812.       530, 225.       10c       462, 250         11       Investments - publicly traded securities       11       12       11         12       Investments - other securities. See Part IV, line 11       12       13         14       Intangible assets       14       13         15       Other assets. See Part IV, line 11       26, 597.       16       5,008,026         16       Total assets. Add lines 1 through 15 (must equal line 33)       4, 972,957.       16       5,008,026         17       Accounts payable and accrued expenses       1, 384,052.       17       1, 507,133         18       19       Deferred revenue       19       1,667         20       21       Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons       378,000.       22         23       Secured mortsgaes and notes payable to unrelated third parties       24       24         25       Other liabilities not included on lines 17:24). Complete Part X of Schedule D       24       24
basis. Complete Part VI of Schedule D b Less: accumulated depreciation b Less: accumulated depreciation 11 Investments - publicly traded securities 12 Investments - other securities. See Part IV, line 11 13 Investments - program-related. See Part IV, line 11 14 Intangible assets 14 Intangible assets 15 Other assets. See Part IV, line 11 16 Total assets. Add lines 1 through 15 (must equal line 33) 17 Accounts payable and accrued expenses 11, 384, 052, 17 17, 1, 507, 133 18 Grants payable 19 Deferred revenue 21 Escrow or custodial account liability. Complete Part IV of Schedule D 22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons 23 Secured mortgages and notes payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 25 Other liabilities. Add lines 17 through 25. 26 Total liabilities. Add lines 17 through 25. 27 Orcanizations that follow FASB ASC 958, check here ► X
b       Less: accumulated depreciation       10b       443,812.       530,225.       10c       462,250         11       Investments - publicly traded securities       11       12       11         12       Investments - other securities. See Part IV, line 11       13       14         13       Investments - program-related. See Part IV, line 11       13       14         14       Intragible assets       14       14         15       Other assets. See Part IV, line 11       13       14         16       Total assets. Add lines 1 through 15 (must equal line 33)       4,972,957.       16       5,008,026         17       Accounts payable and accrued expenses       1,384,052.       17       1,507,133         18       Escrow or custodial account liability. Complete Part IV of Schedule D       21       20         21       Leass and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons       378,000.       22         23       Secured notes and loans payable to unrelated third parties       24       23         24       Unsecured notes and loans payable to unrelated third parties       24       208,420         25       Other liabilities not included on lines 17-24). Comple
11       Investments - publicly traded securities       11         12       Investments - other securities. See Part IV, line 11       12         13       Investments - program-related. See Part IV, line 11       13         14       Intangible assets       14         15       Other assets. See Part IV, line 11       13         16       Total assets. Add lines 1 through 15 (must equal line 33)       4, 972, 957.       16       5, 008, 026         17       Accounts payable and accrued expenses       1, 384, 052.       17       1, 507, 133         18       19       Deferred revenue       19       1, 667         20       21       Escrow or custodial account liability. Complete Part IV of Schedule D       21         22       Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons       378,000.       22         23       Secured mortgages and notes payable to unrelated third parties       24       24         25       Other liabilities not included on lines 17.24). Complete Part X of Schedule D       1, 925,100.       26       1, 717, 220         26       Total liabilities. Add lines 17 through 25       Complete Part X of Schedule D       1, 925,100.       26       1, 717, 220
12       Investments - other securities. See Part IV, line 11       12         13       Investments - program-related. See Part IV, line 11       13         14       Intangible assets       14         15       Other assets. See Part IV, line 11       26, 597.       15       33, 516         16       Total assets. Add lines 1 through 15 (must equal line 33)       4, 972, 957.       16       5, 008, 026         17       Accounts payable and accrued expenses       1, 384, 052.       17       1, 507, 133         18       9       Deferred revenue       19       1, 667         20       Tax-exempt bond liabilities       20       21         21       Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons       378,000.       22         23       Secured mortgages and notes payable to unrelated third parties       23       24         24       Unsecured notes and loans payable to unrelated third parties       24       24         25       Other liabilities not included on lines 17:24). Complete Part X of Schedule D       163,048.       25       208,420         26       Total liabilities. Add lines 17 through 25       1,925,100.       26       1,717,220
13       Investments - program-related. See Part IV, line 11       13         14       Intangible assets       14         15       Other assets. See Part IV, line 11       26, 597. 15       33, 516         16       Total assets. Add lines 1 through 15 (must equal line 33)       4, 972, 957. 16       5, 008, 026         17       Accounts payable and accrued expenses       1, 384, 052. 17       1, 507, 133         18       Grants payable       18       18         19       Deferred revenue       19       1, 667         20       Tax-exempt bond liabilities       20       21         21       Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons       378,000. 22         23       Secured mortgages and notes 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       163,048. 25       208,420         26       Total liabilities. Add lines 17 through 25       1,925,100. 26       1,7177,220         Organizations that follow FASB ASC 958, check here         X       X       163,048. 25       208,420
14       Intangible assets       14         15       Other assets. See Part IV, line 11       26,597.15       33,516         16       Total assets. Add lines 1 through 15 (must equal line 33)       4,972,957.16       5,008,026         17       Accounts payable and accrued expenses       1,384,052.17       1,507,133         18       19       Deferred revenue       19       1,667         20       21       22       Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons       378,000.22         23       Secured mortgages and notes payable to unrelated third parties       24         24       Unsecured notes and loans payable to unrelated third parties       24         25       Other liabilities (including federal income tax, payables to related third parties       24         25       Other liabilities not included on lines 17-24). Complete Part X of Schedule D       163,048.25       208,420         26       Total liabilities. Add lines 17 through 25       1,925,100.26       1,717,220         0rganizations that follow FASB ASC 958. check here ▶ [X]       16       1,717,220
15       Other assets. See Part IV, line 11       26, 597. 15       33, 516         16       Total assets. Add lines 1 through 15 (must equal line 33)       4, 972, 957. 16       5, 008, 026         17       Accounts payable and accrued expenses       1, 384, 052. 17       1, 507, 133         18       Grants payable       18         19       Deferred revenue       19       1, 667         20       21       20         21       Escrow or custodial account liability. Complete Part IV of Schedule D       21         22       Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons       378,000. 22         23       Secured mortgages and notes payable to unrelated third parties       24         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       1, 63, 048. 25       208, 420         26       Total liabilities. Add lines 17 through 25       1, 925, 100. 26       1, 717, 220         Orranizations that follow FASB ASC 958. check here         X       X
16       Total assets. Add lines 1 through 15 (must equal line 33)       4,972,957.16       5,008,026         17       Accounts payable and accrued expenses       1,384,052.17       1,507,133         18       Grants payable       19       1,667         20       Tax-exempt bond liabilities       20         21       Escrow or custodial account liability. Complete Part IV of Schedule D       21         22       Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons       378,000.22         23       Secured mortgages and notes payable to unrelated third parties       24         25       Other liabilities not included on lines 17:24). Complete Part X of Schedule D       163,048.25       208,420         26       Total liabilities. Add lines 17 through 25       1,925,100.26       1,717,220         Organizations that follow FASB ASC 958. check here X       X       163,048.25       208,420
17       Accounts payable and accrued expenses       1,384,052.17       1,507,133         18       Grants payable       19       1,667         19       Deferred revenue       19       1,667         20       Tax-exempt bond liabilities       20       21         21       Escrow or custodial account liability. Complete Part IV of Schedule D       21       21         22       Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons       378,000.22         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       163,048.25       208,420         26       Total liabilities. Add lines 17 through 25       1,925,100.26       1,717,220         Organizations that follow FASB ASC 958. check here >       X       X
18       Grants payable       18         19       Deferred revenue       19       1,667         20       Tax-exempt bond liabilities       20         21       Escrow or custodial account liability. Complete Part IV of Schedule D       21         22       Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons       378,000.22         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       163,048.25       208,420         26       Total liabilities. Add lines 17 through 25       1,925,100.26       1,717,220         Organizations that follow FASB ASC 958, check here  (X)       X       163       163
19       Deferred revenue       19       1,667         20       Tax-exempt bond liabilities       20         21       Escrow or custodial account liability. Complete Part IV of Schedule D       21         22       Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons       378,000.22         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       163,048.25       208,420         26       Total liabilities. Add lines 17 through 25       1,925,100.26       1,717,220         Organizations that follow FASB ASC 958, check here  (X)       X       X
20       Tax-exempt bond liabilities       20         21       Escrow or custodial account liability. Complete Part IV of Schedule D       21         22       Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons       378,000.22         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       163,048.25       208,420         26       Total liabilities. Add lines 17 through 25       1,925,100.26       1,717,220
21       Escrow or custodial account liability. Complete Part IV of Schedule D       21         22       Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons       378,000.22         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       163,048.25       208,420         26       Total liabilities. Add lines 17 through 25       1,925,100.26       1,717,220
22       Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons       378,000.22         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       163,048.25       208,420         26       Total liabilities. Add lines 17 through 25       1,925,100.26       1,717,220
trustee, key employee, creator or founder, substantial contributor, or 35%       378,000.22         controlled entity or family member of any of these persons       378,000.22         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       163,048.25       208,420         26       Total liabilities. Add lines 17 through 25       1,925,100.26       1,717,220
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       163,048.25       208,420         26       Total liabilities. Add lines 17 through 25       1,925,100.26       1,717,220         Organizations that follow FASB ASC 958, check here ▶       X       X
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       163,048.25       208,420         26       Total liabilities. Add lines 17 through 25       1,925,100.26       1,717,220         Organizations that follow FASB ASC 958, check here ▶       X       X
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       163,048.25       208,420         26       Total liabilities. Add lines 17 through 25       1,925,100.26       1,717,220         Organizations that follow FASB ASC 958, check here ▶       X       X
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       163,048.25       208,420         26       Total liabilities. Add lines 17 through 25       1,925,100.26       1,717,220         Organizations that follow FASB ASC 958, check here ► X
of Schedule D       163,048.25       208,420         26       Total liabilities. Add lines 17 through 25       1,925,100.26       1,717,220         Organizations that follow FASB ASC 958, check here ► X
26         Total liabilities. Add lines 17 through 25         1,925,100.26         1,717,220           Organizations that follow FASB ASC 958, check here ► X         X         X         X
Organizations that follow FASB ASC 958, check here  X
Organizations that follow FASB ASC 958, check here ► X
and complete lines 27, 28, 32, and 33.
E         27         Net assets without donor restrictions         1,431,419.27         1,676,127           28         Net assets with donor restrictions         1,616,438.28         1,614,679
28         Net assets with donor restrictions         1,616,438.28         1,614,679
Ğ Organizations that do not follow FASB ASC 958, check here ►
and complete lines 29 through 33.
29 Capital stock or trust principal, or current funds 29
<b>30</b> Paid-in or capital surplus, or land, building, or equipment fund <b>30</b>
and complete lines 27, 28, 32, and 33.         27       Net assets without donor restrictions         28       Net assets with donor restrictions         0rganizations that do not follow FASB ASC 958, check here         and complete lines 29 through 33.         29       Capital stock or trust principal, or current funds         30       Paid-in or capital surplus, or land, building, or equipment fund         31       Retained earnings, endowment, accumulated income, or other funds         32       Total net assets or fund balances
33         Total liabilities and net assets/fund balances         4,972,957.33         5,008,026           Form 990 (2019)

Form 990 (2019) Part X Balance Sheet

Form	990 (2019) STRIVE INTERNATIONAL, INC.	13-32	255679	Pag	ge <b>12</b>
Pa	t XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1	10,180		
2	Total expenses (must equal Part IX, column (A), line 25)	2	9,943		
3	Revenue less expenses. Subtract line 2 from line 1	3			49.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	3,04	7,8	57.
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain on Schedule O)	9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,				
	column (B))	10	3,290	),8	06.
Pa	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				X
				Yes	No
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				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		<b>2</b> a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	d on a			
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	х	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat	e basis,			
	consolidated basis, or both:				
	X 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 on Scl				
3a	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			
	Act and OMB Circular A-133?		3a	Х	<u> </u>
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ				
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits			X	<u> </u>

Form **990** (2019)

932012 01-20-20

SCHEDULE A

Department of the Treasury

Internal Revenue Service

(Form	990	or	990	-EZ)
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## 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
2019
Open to Public Inspection

Name of the	organization
-------------	--------------

man	le of i	ine organization מיייס ד							3-3255679			
Da	rt I	Reason for Public (		TIONAL, INC.	malata th	ic part ) S			7-7722013			
				-				5.				
	organ	ization is not a private found			•							
1		A church, convention of ch					1)(A)(I).					
2		A school described in <b>sect</b> i										
3		A hospital or a cooperative					-					
4		A medical research organiz	ation operated in co	injunction with a hospital	described	a in sectio	A)(1)(a)(1)(A	)(III). Enter	the hospital's name,			
-		city, and state:	ar the henefit of a co			tad by a a	overnmentel	unit dooorik	and in			
5		An organization operated for		nege of university owned	u or opera	lied by a g	overnmentart	unit descrit				
e		section 170(b)(1)(A)(iv). (C		mantal unit described in a	nantion 1	70/6//4//4	(A)					
6 7	X	A federal, state, or local gov	-					ha aanaral	nublic described in			
'	- 23	An organization that norma		antial part of its support i	rom a gov	remmenta	unit or from t	rie general	public described in			
8		section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.)										
9						od in ooniu	upotion with a	land grant	collogo			
9		An agricultural research orgoing or university or a non-land-										
		university:	grant conege of agric			name, or	y, and state of	r the colleg				
10		· · · · · · · · · · · · · · · · · · ·	Illy receives: (1) more	than 33 1/3% of its sur	port from	contributi	ons members	hin foos	and gross receipts from			
10	· · · · · · · · · · · · · · · · · · ·											
		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 a	-	•	•			arrv out the	e purposes of one or			
		more publicly supported or	-	-				-				
		lines 12a through 12d that										
а		<b>Type I.</b> A supporting orga				-		-	/ giving			
		the supported organization	on(s) the power to re	gularly appoint or elect a	a majority	of the dire	ctors or truste	es of the s	supporting			
		organization. You must o	complete Part IV, Se	ections A and B.								
b		<b>Type II.</b> A supporting org	anization supervised	d or controlled in connec	tion with it	ts support	ed organizatio	on(s), by ha	aving			
		control or management o	of the supporting org	anization vested in the s	ame perso	ons that co	ontrol or mana	age the sup	oported			
		organization(s). You mus	t complete Part IV,	Sections A and C.								
с		Type III functionally inte	grated. A supportin	g organization operated	in connec	tion with,	and functiona	lly integrat	ed with,			
		_ its supported organization	n(s) (see instructions	s). <b>You must complete f</b>	Part IV, Se	ections A,	D, and E.					
d		Type III non-functionally	<b>y integrated.</b> A supp	porting organization oper	ated in co	nnection \	with its suppo	rted organi	ization(s)			
		that is not functionally int	egrated. The organized	zation generally must sat	tisfy a dist	ribution re	quirement and	d an attent	iveness			
		requirement (see instruct										
е		Check this box if the orga					а Туре I, Туре	II, Type III				
		functionally integrated, or		onally integrated support	ing organi:	zation.						
f		er the number of supported o	•									
g		vide the following informatior i) Name of supported	n about the supporte	ed organization(s). (iii) Type of organization	(iv) is the orga	anization listed	(v) Amount of	monotany	(vi) Amount of other			
	(	organization		(described on lines 1-10	in your governi	ing document?	support (see ir	-	support (see instructions)			
				above (see instructions))	Yes	No		,				
							-					

Total

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. 932021 09-25-19 Schedule A (Form 990 or 990-EZ) 2019 13

2019.05000 STRIVE INTERNATIONAL, INC. 616____1

## Schedule A (Form 990 or 990-EZ) 2019 STRIVE INTERNATIONAL, INC. 13-32556 Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

13-3255679 Page 2

(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.)

Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🕨	<b>(a)</b> 2015	<b>(b)</b> 2016	<b>(c)</b> 2017	(d) 2018	(e) 2019	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	5980140.	7847797.	8243797.	10088547.	10332758.	42493039.
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge $\dots$						
4	Total. Add lines 1 through 3	5980140.	7847797.	8243797.	10088547.	10332758.	42493039.
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)						114,540.
	Public support. Subtract line 5 from line 4.						42378499.
	ction B. Total Support	i			i	i	
	ndar year (or fiscal year beginning in) 🕨	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total 42493039.
7	Amounts from line 4	5980140.	7847797.	8243797.	10088547.	10332758.	42493039.
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,			200			0.50
	and income from similar sources $\dots$			286.	572.		858.
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital	E2 200	E0 E01	6 067	1 5 2	E 0 1	117 600
	assets (Explain in Part VI.)	52,380.	58,501.	6,067.	153.	521.	<u>117,622.</u> 42611519.
	Total support. Add lines 7 through 10						42011519.
	Gross receipts from related activities,		,				
13	First five years. If the Form 990 is for		s first, second, thir	d, fourth, or fifth ta	ax year as a sectio	n 501(c)(3)	
Sec	organization, check this box and stor ction C. Computation of Publ	ic Support Pe	rcentage				
	Public support percentage for 2019 (			olump (f))		14	99.45 %
	Public support percentage from 2018					15	<u>98.71</u> %
	<b>33 1/3% support test - 2019.</b> If the c						, -
100	stop here. The organization qualifies	-					► V
h	<b>33 1/3% support test - 2018.</b> If the c		Ũ				
~	and stop here. The organization qual						
17a	10% -facts-and-circumstances tes						
	and if the organization meets the "fac						
	meets the "facts-and-circumstances"		•			•	
b	10% -facts-and-circumstances tes						
	more, and if the organization meets th	-					
	organization meets the "facts-and-circ				• •		
18	Private foundation. If the organization						ns 🕨 🗌
							) or 990-EZ) 2019

932022 09-25-19

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### Schedule A (Form 990 or 990-EZ) 2019 STRIVE INTERNATIONAL, INC.

### 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.)

Cale	ndar year (or fiscal year beginning in) 🕨	<b>(a)</b> 2015	<b>(b)</b> 2016	(c) 2017	(d) 2018	(e)	2019	(f) Total
1	Gifts, grants, contributions, and							
	membership fees received. (Do not							
	include any "unusual grants.")							
2	Gross receipts from admissions,							
	merchandise sold or services per-							
	formed, or facilities furnished in any activity that is related to the							
	organization's tax-exempt purpose							
3	Gross receipts from activities that							
	are not an unrelated trade or bus-							
	iness under section 513							
4	Tax revenues levied for the organ-							
•	ization's benefit and either paid to							
	·							
5	The value of services or facilities							
5	furnished by a governmental unit to							
	, .							
•	the organization without charge							
	Total. Add lines 1 through 5							
7a	Amounts included on lines 1, 2, and							
	3 received from disqualified persons							
b	Amounts included on lines 2 and 3 received from other than disqualified persons that							
	exceed the greater of \$5,000 or 1% of the							
	amount on line 13 for the year							
	Add lines 7a and 7b							
	Public support. (Subtract line 7c from line 6.)							
	ction B. Total Support		1					
	ndar year (or fiscal year beginning in) 🕨	<b>(a)</b> 2015	(b) 2016	(c) 2017	(d) 2018	(e)	2019	(f) Total
	Amounts from line 6							
10a	Gross income from interest,							
	dividends, payments received on securities loans, rents, royalties,							
	and income from similar sources							
b	Unrelated business taxable income							
	(less section 511 taxes) from businesses							
	acquired after June 30, 1975							
c	Add lines 10a and 10b							
	Net income from unrelated business							
	activities not included in line 10b,							
	whether or not the business is regularly carried on							
12	Other income. Do not include gain							
	or loss from the sale of capital							
40	assets (Explain in Part VI.)							
	Total support. (Add lines 9, 10c, 11, and 12.)		<u> </u>			501()	(0)	
14	First five years. If the Form 990 is for	the organization?	s first, second, thi	rd, fourth, or fifth	tax year as a section	on 501(c)	(3) organiz	zation,
200	check this box and stop here	ia Support Da				<u></u>	<u></u>	▶∟
	-							
	Public support percentage for 2019 (I					15		
16	Public support percentage from 2018					16		9
	ction D. Computation of Inves							
17	Investment income percentage for 20					17		(
18	Investment income percentage from 2					18		(
19a	1 33 1/3% support tests - 2019. If the	organization did I	not check the box	on line 14, and lin	ne 15 is more than :	33 1/3%	, and line 1	17 is not
	more than 33 1/3%, check this box a	nd <b>stop here.</b> The	organization qual	ifies as a publicly	supported organization	ation		▶∟
b	33 1/3% support tests - 2018. If the	organization did I	not check a box o	n line 14 or line 19	a, and line 16 is m	ore than	33 1/3%,	and
	line 18 is not more than 33 1/3%, che	ck this box and <b>s</b> t	t <b>op here.</b> The orga	anization qualifies	as a publicly supp	orted org	janization	
20	Private foundation. If the organizatio							
	23 09-25-19							0 or 990-EZ) 201
				15				-
271	L111 751751 616	20	19.05000	STRIVE IN	TERNATION	AL, ]	INC.	6161

1

2

3a

3b

3c

4a

4b

4c

5a

5b

5c

6

7

8

9a

9b

9c

10a

10b

Yes

No

#### 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.)

932024 09-25-19

Schedule A (Form 990 or 990-EZ) 2019

2019.05000 STRIVE INTERNATIONAL, INC.

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			X	
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)			
	below, the governing body of a supported organization?	11a		
	A family member of a person described in (a) above?	11b		
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c		
Sec	tion B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to			
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tax year? If "No," describe in <b>Part VI</b> how the supported organization(s) effectively operated, supervised, or			
	controlled the organization's activities. If the organization had more than one supported organization,			
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported			
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Sec	tion C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		
Sec	tion D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a	_		
-	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in <b>Part VI</b> the role the organization's			
	supported organizations played in this regard.	3		
Sec	tion E. Type III Functionally Integrated Supporting Organizations	•		
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the 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.			
c	The organization supported a governmental entity. Describe in <b>Part VI</b> how you supported a government entity (see insti	ructions	:)	
2	Activities Test. Answer (a) and (b) below.		Yes	No
a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of		100	110
	the supported organization(s) to which the organization was responsive? If "Yes," then in <b>Part VI identify</b>			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more	20		
D	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in <b>Part VI</b> the			
	reasons for the organization's position that its supported organization(s) would have engaged in these			
	activities but for the organization's involvement.	2b		
2	-	20		
3	Parent of Supported Organizations. <b>Answer (a) and (b) below.</b>			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or tructors of each of the supported organizations? <i>Provide details in Part VI</i>	20		
h	trustees of each of the supported organizations? <i>Provide details in</i> <b>Part VI.</b> Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each	3a		
U	of its supported organizations? If "Yes," describe in <b>Part VI</b> the role played by the organization in this regard.	3b		
02000			0.57	2010
932028	5 09-25-19 Schedule A (Form 99 17	00195	/U-EZ)	2019

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2019.05000 STRIVE INTERNATIONAL, INC. 616___1

Schedule A	(Form 990 or 990-EZ) 2019 $ { m STRIV}$	E INTERNATIONAL,	INC.
Part V	Type III Non-Functionally Int	egrated 509(a)(3) Suppo	rting Organizations

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

Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	1		
2 Recoveries of prior-year distributions	2		
3 Other gross income (see instructions)	3		
4 Add lines 1 through 3.	4		
5 Depreciation and depletion	5		
6 Portion of operating expenses paid or incurred for production or			
collection of gross income or for management, conservation, or			
maintenance of property held for production of income (see instructions)	6		
7 Other expenses (see instructions)	7		
8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Section B - Minimum Asset Amount	•	(A) Prior Year	(B) Current Year (optional)
1 Aggregate fair market value of all non-exempt-use assets (see			
instructions for short tax year or assets held for part of year):			
a Average monthly value of securities	1a		
b Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	1d		
e Discount claimed for blockage or other			
factors (explain in detail in <b>Part VI</b> ):			
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		
Section 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	y integrate	d Type III supporting or	anization (see

instructions).

Schedule A (Form 990 or 990-EZ) 2019

932026 09-25-19

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

Schedule A (Form 990 or 990-EZ) 2019

932027 09-25-19

Part VI	Form 990 or 990-EZ) 2019 STRIV Supplemental Information.	Provide the explanations re	equired by Par	t II, line 10; Part II, lir	ne 17a or 17b; Part III	, line 12;
	Part IV, Section A, lines 1, 2, 3b, 3c, line 1; Part IV, Section D, lines 2 and Section D, lines 5, 6, and 8; and Part	4b, 4c, 5a, 6, 9a, 9b, 9c, 1 ⁻ 3; Part IV, Section E, lines	1a, 11b, and 1 1c, 2a, 2b, 3a	1c; Part IV, Section I , and 3b; Part V, line	B, lines 1 and 2; Part 1; Part V, Section B,	IV, Section C, line 1e; Part V
	(See instructions.)					
32028 09-25-1	9			:	Schedule A (Form 99	90 or 990-EZ
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	I J T I J T U T U	70T2 • 07000	O T V T V L		JNATI' THAP	010

### Schedule B

(Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service

Name of the organization

### 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

2019

Employer identification number

ç	STRIVE INTERNATIONAL, INC.	13-3255679			
Organization type (check	< one):				
Filers of:	Section:				
Form 990 or 990-EZ	$\fbox$ 501(c)( 3 ) (enter number) organization				
	4947(a)(1) nonexempt charitable trust <b>not</b> 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	n 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 Ru	Ile. See instructions.			
General Rule					
	ion filing Form 900, 000 FZ, or 900 PE that received during the year, contributions totaling	\$5,000 or more (in menoy or			

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

X 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, II, and III.

**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).

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

STRIVE INTERNATIONAL, INC.

Name of organization

Employer identification number

13-3255679

Part I	Contributors (see instructions). Use duplicate copies of Part I if addit	ional space is needed.
(a) No.	(b) Name, address, and ZIP + 4	(c) (d) Total contributions Type of contribution
1	U.S. DEPARTMENT OF LABOR 200 CONSTITUTION AVENUE NE WASHINGTON, DC 20210	\$4,369,607. Person X Payroll □ Noncash □ (Complete Part II for noncash contributions.)
(a)	(b)	(c) (d)
No.	Name, address, and ZIP + 4         STRUCTURED EMPLOYMENT ECONOMIC         DEVELOPMENT CORPORATION         915 BROADWAY         NEW YORK, NY 10010	Total contributions     Type of contribution      \$
(a) No.	(b) Name, address, and ZIP + 4	(c) (d) Total contributions Type of contribution
3	MAYOR'S FUND 205 EAST 122ND STREET NEW YORK, NY 10035	\$
(a) No.	(b) Name, address, and ZIP + 4	(c) (d) Total contributions Type of contribution
4	NYC DEPARTMENT OF CORRECTIONS 7901 BROADWAY ELMHURST, NY 11373	\$       880,153.         Person       X         Payroll       Image: Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) (d) Total contributions Type of contribution
5	THE JP MORGAN CHASE FOUNDATION 270 PARK AVENUE NEW YORK, NY 10017	\$ 200,000.       Person X         Payroll       Noncash         (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) (d) Total contributions Type of contribution
6	THE HARRY AND JEANNETTE WEINBERG FOUNDATION	Person X Payroll
	7 PARK CENTER CT.	\$
923452 11-00	OWINGS MILLS, MD 21117	noncash contributions.) Schedule B (Form 990, 990-EZ, or 990-PF) (2019)

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22 2019.05000 STRIVE INTERNATIONAL, INC. 616___1

Employer identification number

13-3255679

### STRIVE INTERNATIONAL, INC.

Part I	Contributors (see instructions). Use duplicate copies of Part I if ad	ditional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7	BILL & MELINDA GATES FOUNDATION P.O BOX 23350 SEATTLE, WA 98102	\$ <u>830,000.</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
8	ROBIN HOOD FOUNDATION 826 BROADWAY NEW YORK, NY 10003	\$00.	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
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll On Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll On Complete Part II for noncash contributions.)
923452 11-0	⁶⁻¹⁹ 23	Schedule B (Form	990, 990-EZ, or 990-PF) (2019)

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2019.05000 STRIVE INTERNATIONAL, INC. 616___1

Page 3 Employer identification number

13-3255679

STRIVE INTERNATIONAL, INC.

Part II Noncash Property (see instructions). Use duplicate copies of Part 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
.   .			

15271111 751751 616

2019.05000 STRIVE INTERNATIONAL, INC.

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Page 4

art III	E INTERNATIONAL, INC • Exclusively religious, charitable, etc., contributions	s to organizations described in	section 501(c)(7) (8) or (1)	13 - 3255679
	from any one contributor. Complete columns (a) thra completing Part III, enter the total of exclusively religious, chari Use duplicate copies of Part III if additional spa	ough <b>(e) and</b> the following line e table, etc., contributions of <b>\$1,000 o</b>	ntry For organizations	
a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) De	scription of how gift is held
-	-	(e) Transfer of gi	 ft	
-	Transferee's name, address, and a	ZIP + 4	Relationship of t	ransferor to transferee
a) No				
a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) De:	scription of how gift is held
—				
		(e) Transfer of gi		
	Transferee's name, address, and a	ZIP + 4	Relationship of t	ransferor to transferee
a) No				
a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) De:	scription of how gift is held
—				
	· · ·	(e) Transfer of g		
	Transferee's name, address, and a	ZIP + 4	Relationship of t	ransferor to transferee
a) No. from				
Part I	(b) Purpose of gift	(c) Use of gift	(d) De:	scription of how gift is held
	-	(a) Transfor of vi		
	Transferee's name, address, and 2	(e) Transfer of gi ZIP + 4		ansferor to transferee

**SCHEDULE D** 

#### (Form 990)

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

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



Employer identification number

13-3255679

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STRIVE INTERNATIONAL, INC.

Part I Organizations Maintaining Donor A organization answered "Yes" on Form 990, Pa	dvised Funds or Other Similar Fund rt IV, line 6.	
	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate value of contributions to (during year)		
3 Aggregate value of grants from (during year)		
4 Aggregate value at end of year		
5 Did the organization inform all donors and donor advis		rised funds
are the organization's property, subject to the organiz	ation's exclusive legal control?	Yes
6 Did the organization inform all grantees, donors, and o		
for charitable purposes and not for the benefit of the	donor or donor advisor, or for any other purpos	e conferring
impermissible private benefit?		Yes
Part II Conservation Easements. Complete if	the organization answered "Yes" on Form 990	, Part IV, line 7.
1 Purpose(s) of conservation easements held by the org		
Preservation of land for public use (for example		of a historically important land area
Protection of natural habitat	Preservation of	of a certified historic structure
Preservation of open space		
2 Complete lines 2a through 2d if the organization held	a qualified conservation contribution in the form	n of a conservation easement on the la
day of the tax year.		Held at the End of the Tax
a Total number of conservation easements		
c Number of conservation easements on a certified hist		
d Number of conservation easements included in (c) ac		
listed in the National Register		
3 Number of conservation easements modified, transfer	rred, released, extinguished, or terminated by the	he organization during the tax
year		
4 Number of states where property subject to conserva		
5 Does the organization have a written policy regarding		
violations, and enforcement of the conservation ease		
6 Staff and volunteer hours devoted to monitoring, insp	ecting, handling of violations, and enforcing co	nservation easements during the year
<ul> <li>Amount of expenses incurred in monitoring, inspectin</li> </ul>	a bandling of violations, and enforcing concern	ation accoments during the year
<ul> <li>Amount of expenses incurred in monitoring, inspectin</li> <li>\$</li> </ul>	g, handling of violations, and enforcing conserv	ation easements during the year
<ul> <li>Φ</li> <li>Boes each conservation easement reported on line 2(</li> </ul>	(d) above satisfy the requirements of section 17	$\Omega(h)(A)(B)(i)$
and section 170(h)(4)(B)(ii)? 9 In Part XIII, describe how the organization reports cor		
balance sheet, and include, if applicable, the text of th		
organization's accounting for conservation easements		
Part III Organizations Maintaining Collection		Other Similar Assets.
Complete if the organization answered "Yes" of		
1a If the organization elected, as permitted under FASB		and balance sheet works
of art, historical treasures, or other similar assets held		
service, provide in Part XIII the text of the footnote to	its financial statements that describes these ite	ems.
<b>b</b> If the organization elected, as permitted under FASB <i>i</i>		
art, historical treasures, or other similar assets held fo	· · · · ·	
provide the following amounts relating to these items:	• • •	
(i) Revenue included on Form 990, Part VIII, line 1		\$
2 If the organization received or held works of art, histor		
the following amounts required to be reported under I		
a Revenue included on Form 990, Part VIII, line 1		> \$
<b>b</b> Assets included in Form 990, Part X		
HA For Paperwork Reduction Act Notice, see the Instr		Schedule D (Form 990)
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Sche		INTERNATIO						3-32			age <b>2</b>
Pa	t III Organizations Maintaining C	Collections of A	rt, Hist	torical Tr	easures,	or Othe	r Simila	r Asse	<b>ts</b> (contii	nued)	
3	Using the organization's acquisition, accessi	on, and other record	ds, checl	k any of the	following the	at make się	gnificant (	use of its			
	collection items (check all that apply):		. —								
a	Public exhibition	C			hange progra						
b	Scholarly research	e		Other							
c	Preservation for future generations										
4	Provide a description of the organization's co							se in Parl	t XIII.		
5	During the year, did the organization solicit of								<b>V</b>		]
Dai	to be sold to raise funds rather than to be ma t IV Escrow and Custodial Arran								Yes		No
1 0	reported an amount on Form 990, Pa		ete ii trie	organizatio	n answered	res on r	-0111 990	, Part IV,	ine 9, 0i		
1a	a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included										
	on Form 990, Part X?								Yes		No
b	If "Yes," explain the arrangement in Part XIII										
			-						Amoun	t	
с	Beginning balance						1c				
	Additions during the year										
	Distributions during the year										
f	Ending balance						1f		_		
2a	Did the organization include an amount on F	orm 990, Part X, line	e 21, for e	escrow or cu	ustodial acco	ount liabilit	y?	L	Yes		No
	If "Yes," explain the arrangement in Part XIII.										
Pa	t V Endowment Funds. Complete i	f the organization ar	nswered	"Yes" on Fo	1						
		(a) Current year	<b>(b)</b> P	rior year	(c) Two yea	rs back 🛛 🕻	<b>d)</b> Three ye	ears back	(e) Fou	years	back
1a	Beginning of year balance										
b	Contributions										
c	Net investment earnings, gains, and losses										
d	Grants or scholarships										
е	Other expenditures for facilities										
	and programs										
	Administrative expenses										
	End of year balance	rent veer and belong		a ooluma (a							
2	Provide the estimated percentage of the cur	rent year end baland	%	g, column (a	a)) Heiu as.						
a b	Board designated or quasi-endowment ►	%	70								
b C		%									
U	The percentages on lines 2a, 2b, and 2c sho										
3a	Are there endowment funds not in the posse		ation the	at are held a	nd administe	ered for th	e organiz	ation			
04	by:						e erganz		1	Yes	No
	(i) Unrelated organizations								3a(i)		
	(ii) Related organizations								3a(ii)		
b	If "Yes" on line 3a(ii), are the related organiza	ations listed as requi	red on S	chedule R?					3b		
4	Describe in Part XIII the intended uses of the										
Pa	t VI Land, Buildings, and Equipm										
	Complete if the organization answere	d "Yes" on Form 99	0, Part I\	/, line 11a. S	See Form 990	), Part X, li	ine 10.				
	Description of property	(a) Cost or c basis (investr		• •	or other (other)		cumulated reciation	b	( <b>d)</b> Boo	k value	Э
1a	Land										
	Buildings										
	Leasehold improvements				1,825.		54,54			7,2'	
d	Equipment			62	4,237.	3	89,26	55.	23	4,9'	72.
e	Other										
Tota	. Add lines 1a through 1e. (Column (d) must e	equal Form 990, Part	X, colun	nn (B), line 1	0c.)	<u></u>			46	2,2	50.

Schedule D (Form 990) 2019

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Schedule D (Form 990) 2019 STRIVE INTERNATIONAL, INC
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Part VII Investments - Other Securities.		
Complete if the organization answered "Yes"	on Form 990, Part IV, line	11b. See Form 990, Part X, line 12.
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely held equity interests		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)		
Part VIII Investments - Program Related.		
Complete if the organization answered "Yes"	on Form 990, Part IV, line	11c. See Form 990, Part X, line 13.
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)		
Part IX Other Assets.		
Complete if the organization answered "Yes"	on Form 990, Part IV, line	11d. See Form 990, Part X, line 15.
(a)	Description	(b) Book value

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

#### Part X Other Liabilities.

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

1.	( <b>a</b> ) Des	ription of liability	(b) Book value
(1) Federa	l income taxes		
(2) DEF	ERRED RENT	PAYABLE	208,420.
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column	(b) must equal Forr	990, Part X, col. (B) line 25.)	 208,420.
<b>•</b> • • • • • • •			 

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

Schedule D (Form 990) 2019

932053 10-02-19

Schedule D (Form 990) 2019 STRIVE INTERNATIONAL, J	INC.	13-	3255679 Page 4
Part XI Reconciliation of Revenue per Audited Financial Sta	atements With Reve		
Complete if the organization answered "Yes" on Form 990, Part IV, li	ne 12a.		
1 Total revenue, gains, and other support per audited financial statements		1	10,186,749.
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
a Net unrealized gains (losses) on investments	2a		
b Donated services and use of facilities	2b		
c Recoveries of prior year grants	2c		
d Other (Describe in Part XIII.)	2d		
e Add lines 2a through 2d		2e	0.
3 Subtract line 2e from line 1		3	10,186,749.
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
a Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b Other (Describe in Part XIII.)	4b		
c Add lines 4a and 4b			0.
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12			10,186,749.
Part XII Reconciliation of Expenses per Audited Financial St	-	enses per Retu	urn.
Complete if the organization answered "Yes" on Form 990, Part IV, li			
1 Total expenses and losses per audited financial statements		1	9,943,800.
2 Amounts included on line 1 but not on Form 990, Part IX, line 25:	1 1		
a Donated services and use of facilities	2a		
b Prior year adjustments	2b		
c Other losses	2c		
d Other (Describe in Part XIII.)	2d		
e Add lines 2a through 2d			0.
3 Subtract line 2e from line 1			9,943,800.
4 Amounts included on Form 990, Part IX, line 25, but not on line 1:			
a Investment expenses not included on Form 990, Part VIII, line 7b	4a		
<b>b</b> Other (Describe in Part XIII.)	4b		
c Add lines <b>4a</b> and <b>4b</b>		4c	0.
5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 1	8.)		9,943,800.
Part XIII Supplemental Information.			

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

#### PART X, LINE 2:

STRIVE IS EXEMPT FROM INCOME TAXES UNDER SECTION 501(C)(3) OF THE INTERNAL
REVENUE CODE. STRIVE HAS ANALYZED TAX POSITIONS TAKEN FOR FILING WITH THE
INTERNAL REVENUE SERVICE AND STATE JURISDICTIONS WHERE IT OPERATES. STRIVE
DOES NOT ANTICIPATE ANY SIGNIFICANT UNCERTAIN TAX POSITIONS THAT WOULD
REQUIRE RECOGNITION IN THE FINANCIAL STATEMENTS. PERIODS ENDING DECEMBER
31, 2016 AND SUBSEQUENT REMAIN SUBJECT TO EXAMINATION BY THE TAXING
AUTHORITIES.

932054 10-02-19

SCHEDULE G	Suppleme	ntal Information Regarding	, Fun	drais	ing or Gaming	Acti	vities	OMB No. 1545-0047
(Form 990 or 990-EZ)	Complete if the organization answered "Yes" on Form 990, Part IV, line 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.							2019
Depertment of the Tueseum	Attach to Form 990 or Form 990-EZ.							Open to Public
Department of the Treasury Internal Revenue Service	► Go	to www.irs.gov/Form990 for instr				ion.		Inspection
Name of the organization		INTERNATIONAL, INC					Employer ide	ntification number 679
		Complete if the organization answe	ered "Y	'es" o	n Form 990, Part IV,	line 1	7. Form 990-E2	I filers are not
<ol> <li>Indicate whether the</li> <li>a Mail solicitate</li> <li>b Internet and</li> <li>c Phone solicitate</li> <li>d In-person social</li> <li>2 a Did the organization</li> <li>key employees list</li> </ol>	tions email solicitations tations blicitations on have a written o ted in Form 990, P	sed funds through any of the followi e X Solicita	tion of tion of fundra l (inclue profess	non-g gover aising ding o ional 1	overnment grants nment grants events fficers, directors, trus fundraising services?	stees	Yes	
compensated at le								
(i) Name and addres or entity (fund		(ii) Activity	(iii) fundr have c or cor contrib	ustody itrol of	(iv) Gross receipts from activity	to (	Amount paid or retained by) fundraiser ted in col. (i)	<b>(vi)</b> Amount paid to (or retained by) organization
			Yes	No				
3 List all states in wh or licensing.	ich the organizatio	on is registered or licensed to solicit	contrib	oution	s or has been notified	d it is	exempt from r	egistration
	aduation Act Not	ico, coo the Instructions for Form	000 or	000	<b>-7</b> 0	Soho	dula C (Earm C	00 or 000 EZ) 2010

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

Schedule G (Form 990 or 990-EZ) 2019

932081 09-11-19

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

		(a) Event #1 GALA	(b) Event #2 WOMEN ' S EMPOWERMENT	(c) Other events NONE	(d) Total events (add col. (a) through
2		(event type)	(event type)	(total number)	- col. <b>(c)</b> )
	1 Gross receipts	941,464.	322,210.		1,263,674
	2 Less: Contributions	850,761.	266,583.		1,117,344
	3 Gross income (line 1 minus line	90,703.	55,627.		146,330
	4 Cash prizes				
	5 Noncash prizes				
	6 Rent/facility costs	69,677.	37,631.		107,308
	<b>7</b> Food and beverages				
	<ul><li>8 Entertainment</li><li>9 Other direct expenses</li></ul>		17,996.		39,022
			,	•	146,330
	11 Net income summary. Subtrac				0
a	<b>Gaming.</b> Complete if the \$15,000 on Form 990-EZ, I	e organization answered "Yes" on Forn line 6a	1 990, Part IV, line 19, or i	reported more than	
	410,000 011 0111 000 EE, 1	(a) Bingo	<b>(b)</b> Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (ad col. (a) through col. (d
	1 Gross revenue				
	2 Cash prizes				
	<b>3</b> Noncash prizes				
_	4 Rent/facility costs				
	5 Other direct expenses				
Ι		Yes %	Yes%	Yes%	
	6 Volunteer labor	No	└── No	No	
	7 Direct expense summary. Add	lines 2 through 5 in column (d)		►	
	9 Not coming income summary	Subtract line 7 from line 1 column (d)		•	
_	8 Net gaming income summary.	Subtract line 7 from line 1, column (d)			
	Enter the state(s) in which the orga	anization conducts gaming activities:			
	If UNLS, U.S. Saladia	duct gaming activities in each of these			Yes N
b					
		ning licenses revoked, suspended, or to	erminated during the tax	year?	Yes N
а	If "Vec " evolein:				
a	If "Vec " evolein:				
a b	If "Vec " evolein:			Sabedula O (Fa	rm 990 or 990-EZ) 2

15271111 751751 616

31 2019.05000 STRIVE INTERNATIONAL, INC. 616___1

Sche	dule G (Form 990 or 990-EZ) 2019 STRIVE INTERNATIONAL, INC.	13-3	255679	Page
	Does the organization conduct gaming activities with nonmembers?		Yes	
	Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed			
	to administer charitable gaming?		Yes	<b>N</b>
3	Indicate the percentage of gaming activity conducted in:			
	The organization's facility		13a	
b	An outside facility		13b	
14	Enter the name and address of the person who prepares the organization's gaming/special events books and record	ds:		
	Name			
	Address 🕨			
	Does the organization have a contract with a third party from whom the organization receives gaming revenue?		Yes	
	If "Yes," enter the amount of gaming revenue received by the organization <b>&gt;</b> \$ and the amount of gaming revenue received by the organization <b>&gt;</b> \$	INT		
	of gaming revenue retained by the third party ▶\$ If "Yes," enter name and address of the third party:			
C	in res, entername and address of the third party.			
	Name			
	Address ►			
16	Gaming manager information:			
	Name			
	Gaming manager compensation 🕨 \$			
	Description of services provided 🕨			
	Director/officer Employee Independent contractor			
17	Mandatory distributions:			
а	Is the organization required under state law to make charitable distributions from the gaming proceeds to			
	retain the state gaming license?		Yes	<u> </u>
b	Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent i	n the		
	organization's own exempt activities during the tax year 🕨 \$			
Par	t IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v);	and Par	t III, lines 9	, 9b, 10b
	15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.			
3208	3 09-11-19 Schedule 32	G (Form	990 or 990	)-EZ) 20
71		TNO	610	
1Τ	111 751751 616 2019.05000 STRIVE INTERNATIONAL,	TNC.	616	

Schedule G	G (Form 990 or 990-EZ)	STRIVE	INTERNATIONAL,	INC.
Part IV	Supplemental Infor	mation (cont	inued)	

				Schedule G	(Form 990 or 990-EZ)
2084 04-01-19		22		-	
71111 751751 616	2019.05000	33 STRIVE	INTERNATION	AL, INC.	. 616 1

SCHEDULE I (Form 990) Department of the Treasury	Go	Grants and Oth vernments, and lete if the organization	nd Individual	<b>s in the Ŭn</b> i on Form 990, Pa	ted States		OMB No. 1545-0047 <b>2019</b> Open to Public
Internal Revenue Service		Go to www.i	rs.gov/Form990 fo		nation.		Inspection
Name of the organization STRIVE IN	TERNATION	IAL, INC.					Employer identification number 13-3255679
Part I General Information on Grants a	and Assistance						
<ol> <li>Does the organization maintain records criteria used to award the grants or assi</li> <li>Describe in Part IV the organization's pr</li> </ol>	stance?						tion X Yes No
Part II Grants and Other Assistance to					anization answered "	(es" on Form 990, Par	IV. line 21. for any
recipient that received more than							,
<b>1 (a)</b> Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
SAN DIEGO SECOND CHANCE PROGRAM 6145 IMPERIAL AVENUE SAN DIEGO, CA 92114	33-0539640	501(C)(3)	529,215.	0.			TO IMPLEMENT, RUN, AND ADMINISTER EMPLOYMENT RELATED PROGRAMS.
WESTCHESTER-PUTNAM WORKFORCE DEVELOPMENT BOARD - 120 BLOOMINGDALE ROAD - WHITE PLAINS, NY 10605	13-6007353	501(C)(3)	247,352.	0.			TO IMPLEMENT, RUN, AND ADMINISTER EMPLOYMENT RELATED PROGRAMS.
CAREER RESOURCES, INC. 350 FAIRFIELD AVENUE BRIDGEPORT, CT 06604	06-1427945	501(C)(3)	404,900.	0.			TO IMPLEMENT, RUN, AND ADMINISTER EMPLOYMENT RELATED PROGRAMS.
FOUNDATION FOR LOUISIANA 4354 S. SHERWOOD FOREST BLVD BATON ROUGE, LA 70816	20-3399944	501(C)(3)	187,759.	0.			TO IMPLEMENT, RUN, AND ADMINISTER EMPLOYMENT RELATED PROGRAMS.
JUSTICE RESOURCE INSTITUTE, INC. 160 GOULD STREET, SUITE 300 NEEDHAM, MA 02494	04-2526357	501(C)(3)	164,561.	0.			TO IMPLEMENT, RUN, AND ADMINISTER EMPLOYMENT RELATED PROGRAMS.
CENTER FOR URBAN FAMILIES, INC. 2201 N. MONROE STREET BALTIMORE, MD 21217	52-2142708		411,478.	0.			TO IMPLEMENT, RUN, AND ADMINISTER EMPLOYMENT RELATED PROGRAMS.
<ul> <li>2 Enter total number of section 501(c)(3) a</li> <li>3 Enter total number of other organization</li> </ul>	and government o	rganizations listed in t	h a Bara at Arabata			1	· · · · · · · · · · · · · · · · · · ·

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

Schedule I (Form 990) (2019)

## Schedule I (Form 990) STRIVE INTERNATIONAL, INC.

13-2	3255679	Page 1
т <u>э</u> ,	5255075	Pager

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)							
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
L.I.F.E. OF NORTH CAROLINA 600 WEST THIRD STREET GREENVILLE, NC 27834	56-2132240	501(C)(3)	163,714.	0.			TO IMPLEMENT, RUN, AND ADMINISTER EMPLOYMENT RELATED PROGRAMS.
PUBLIC HEALTH MANAGEMENT CORPORATION - 1500 MARKET STREET - PHILADELPHIA, PA 19102	23-7221025	501(C)(3)	383,014.	0.			TO IMPLEMENT, RUN, AND ADMINISTER EMPLOYMENT RELATED PROGRAMS.
PROSPERITY NOW 1200 G STREET NW NO 400 WASHINGTON , DC 20005	52-1141804	501(C)(3)	20,733.	0.			TO IMPLEMENT, RUN, AND ADMINISTER EMPLOYMENT RELATED PROGRAMS.

Schedule I (Form 990)

13-3255679

Page 2

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

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

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

SCHEDULE J Compensation Information		1	OMB No.	1545-00	47	
		For certain Officers, Directors, Trustees, Key Employees, and Highest	Γ	20	10	
	Compensated Employees Complete if the organization answered "Yes" on Form 990, Part IV, line 23.				IJ	,
Depa	Partment of the Treasury Attach to Form 990.				o Publ	
Intern	ernal Revenue Service Go to www.irs.gov/Form990 for instructions and the latest information.				ection	
Nan	ne of the organizatio		Employer i			mber
		STRIVE INTERNATIONAL, INC.	13-3	325567	9	
Pa	rt I Question	s Regarding Compensation				
4-	Obeels the energy	inte les (as) if the even institute succided any of the following to autom or several listed on Four	- 000		Yes	No
а		iate box(es) if the organization provided any of the following to or for a person listed on Forn	1990,			
	First-class or o	line 1a. Complete Part III to provide any relevant information regarding these items.				
	Travel for com	, j				
		cation and gross-up payments I Health or social club dues or initiation fee				
		spending account Personal services (such as maid, chauffe				
			ur, onory			
b	If any of the boxes	on line 1a are checked, did the organization follow a written policy regarding payment or				
		provision of all of the expenses described above? If "No," complete Part III to explain		1b		
2		n require substantiation prior to reimbursing or allowing expenses incurred by all directors,				
		rs, including the CEO/Executive Director, regarding the items checked on line 1a?		2	Х	
	,					
3	Indicate which, if a	ny, of the following the organization used to establish the compensation of the organization?	S			
	CEO/Executive Dire	ector. Check all that apply. Do not check any boxes for methods used by a related organizat	tion to			
	establish compens	ation of the CEO/Executive Director, but explain in Part III.				
	Compensation	n committee Written employment contract				
	X Independent	compensation consultant Compensation survey or study				
	Form 990 of o	ther organizations	committee			
4		any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing				
	organization or a re					v
a		e payment or change-of-control payment?				X X
b		ceive payment from, a supplemental nonqualified retirement plan?				X
С		ceive payment from, an equity-based compensation arrangement?		4c		
	If Yes to any of III	nes 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		on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensati	on			
5	contingent on the r					
а	•			5a		x
		ation?				X
		or 5b, describe in Part III.				
6		on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensati	on			
	contingent on the r					
а		~		6a		Х
b		ation?				X
		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 payment	.S			
		nes 5 and 6? If "Yes," describe in Part III		7		X
8	Were any amounts	reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to	the			
		ption described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III		8		X
9		id the organization also follow the rebuttable presumption procedure described in				
		ז 53.4958-6(c)?				
LHA	For Paperwork R	eduction Act Notice, see the Instructions for Form 990.	Sched	dule J (Fori	n 990	) 2019

932111 10-21-19

Schedule J (Form 990) 2019

#### 13-3255679

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

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

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

(A) Name and Title		(B) Breakdown of	W-2 and/or 1099-M	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(i)-(D)	in column (B) reported as deferred on prior Form 990
(1) PHILIP WEINBERG	(i)	250,000.	0.	0.	4,990.	0.	254,990.	0.
PRESIDENT & CEO	(ii)	0.	0.	0.		0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i) (ii)							
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	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

#### Part III Supplemental Information

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

Schedule J (Form 990) 2019

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

Supplemental Information to Form 990 or 990-EZ Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information. Attach to Form 990 or 990-EZ. Go to www.irs.gov/Form990 for the latest information.



13-3255679

STRIVE INTERNATIONAL, INC.

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

OVERCOME CHALLENGING CIRCUMSTANCES, FIND SUSTAINED EMPLOYMENT, AND

BECOME VALUABLE CONTRIBUTORS TO THEIR FAMILIES, THEIR EMPLOYERS, AND

THEIR COMMUNITIES. STRIVE SPECIALIZES IN SERVING AT-RISK INDIVIDUALS

FROM HIGH POVERTY COMMUNITIES WHO HAVE MULTIPLE BARRIERS TO EMPLOYMENT.

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION: HARLEM IN 1984, STRIVE HAS BEEN A FIXTURE OF NEW YORK CITY FOR THIRTY-FIVE YEARS. STRIVE TARGETS MEN AND WOMEN WHO FACE SIGNIFICANT BARRIERS TO BECOMING EMPLOYED. STRIVE SERVES YOUTH WHO ARE OUT OF SCHOOL AND UNEMPLOYED, THE FORMERLY INCARCERATED, PUBLIC ASSISTANCE RECIPIENTS, NON-CUSTODIAL PARENTS, THE HOMELESS, AND RECOVERING SUBSTANCE ABUSERS. STRIVE'S CLIENTS COME FROM LOW-INCOME NEIGHBORHOODS FROM ALL BOROUGHS OF NEW YORK CITY. TODAY, THE PROGRAM INCLUDES VOCATIONAL SKILLS TRAINING AND WRAP-AROUND SUPPORTS. STRIVE MODEL IS HIGHLY REPLICABLE ACROSS LOCATIONS AND CULTURES AND IS ADMINISTERED BY A NETWORK OF COMMUNITY-BASED ORGANIZATIONS, KNOWN AS STRIVE AFFILIATES, IN COMMUNITIES NATIONWIDE.

FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS: REMOVE THE OBSTACLES THAT STAND IN THE WAY OF THEIR SUCCESS IN THE WORKPLACE. FOLLOWING COMPLETION OF CAREER PATH, STRIVE PROVIDES JOB PLACEMENT ASSISTANCE FOR STUDENTS THROUGH DEEP PARTNERSHIPS WITH LOCAL EMPLOYERS, SECURING JOBS THAT ARE A GOOD MATCH FOR STUDENTS' INTERESTS AND SKILLS AND HAVE A FUTURE FOR GROWTH. ALL STRIVE STUDENTS ARE OFFERED LIFETIME SERVICES OF FOLLOW-UP AND SUPPORT. THOUGH THEY MAY LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Schedule O (Form 990 or 990-EZ) (2019) 932211 09-06-19

15271111 751751 616

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2019.05000 STRIVE INTERNATIONAL, INC. 616___1

Schedule O (Form 990 or 990-EZ) (2019)	Page 2			
Name of the organization STRIVE INTERNATIONAL, INC.	Employer identification number 13-3255679			
GRADUATE AND BEGIN THEIR CAREERS, STRIVE CONTINUES TO STA	ND BY ALL OF			
ITS STUDENTS.				
STRIVE ALSO RUNS EMPLOYMENT PROGRAMS FOR SPECIFIC POPULA	TIONS,			
INCLUDING FOR REENTRY POPULATIONS AND FOR PARENTS. ALL PR	OGRAMS FOLLOW			
OUR FIVE-PILLAR MODEL, BUT INCLUDE ADDITIONAL SUPPORTS RA	NGING FROM			
PARENTING WORKSHOPS TO PRE- AND POST-RELEASE CLASSES. THE FOCUS IS ON				
ECONOMIC STABILITY, JOB PLACEMENTS AND SUPPORT.				

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

NETWORK, 2) CAPACITY-BUILDING FORUMS FOR STRIVE AFFILIATES TO

STRENGTHEN PROGRAM QUALITY AND DEVELOP LEADERSHIP WITHIN THE NETWORK,

SUCH AS THE ANNUAL STRIVE INSTITUTE, 3) A NATIONAL PERFORMANCE

MANAGEMENT SYSTEM, 4) PROGRAM MANUALS PREDICATED ON EVIDENCE-BASED

PRACTICES, AND 5) ACTIVELY SOLICITING AND SECURING NATIONAL GRANTS FROM

PUBLIC AND PRIVATE FUNDERS.

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

THE BOARD FINANCE COMMITTEE REVIEWS THE FORM PRIOR TO FILING WITH THE IRS. THE FINAL FORM 990 IS DISTRIBUTED TO ALL BOARD MEMBERS.

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

POTENTIAL CONFLICTS OF INTEREST ARE ASSESSED BY THE CEO AND CFO AT THE

POINT OF PROCUREMENT.

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

ANNUALLY, THE EXECUTIVE COMMITTEE EVALUATES THE CEO'S PERFORMANCE AND

OBTAINS RESEARCH AND INFORMATION TO MAKE A RECOMMENDATION TO THE FULL BOARD

FOR HIS/HER COMPENSATION BASED ON A REVIEW OF COMPARABILITY DATA.

932212 09-06-19

Schedule O (Form 990 or 990-EZ) (2019)

15271111 751751 616

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2019.05000 STRIVE INTERNATIONAL, INC. 616 1 Name of the organization

STRIVE INTERNATIONAL, INC.

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

THE ORGANIZATION MAKES IT GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY,

AND FINANCIAL STATEMENTS AVAILABLE UPON REQUEST.

FORM 990, PART XII, LINE 2C

THE ORGANIZATION'S REVIEW PROCESS HAS NOT CHANGED FROM THE PRIOR YEAR.

932212 09-06-19

Schedule O (Form 990 or 990-EZ) (2019) 42 2019.05000 STRIVE INTERNATIONAL, INC. 616____1

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(Rev. January 2020)

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

Department of the Treasury Internal Revenue Service File a separate application for each return.

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

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

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

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

Туре с	r Name of exempt organization or other filer, see instr		Taxpayer identification number (TIN)			
print STRIVE INTERNATIONAL, INC.			13-3255679		55679	
File by th			tions		10-02	55075
due date filing you return. Se	205 EAST 122ND STREET 3RE					
instructio		foreign adc	Iress, see instructions.			
Enter t	ne Return Code for the return that this application is for (	ile a separa	ate application for each return)			01
Applic	ation	Return	Application			Return
ls For		Code	Is For			Code
Form 9	90 or Form 990-EZ	01	Form 990-T (corporation)			07
Form 9	90-BL	02	Form 1041-A			08
Form 4	720 (individual)	03	Form 4720 (other than individual)			09
Form 9	90-PF	04	Form 5227			10
Form 9	90-T (sec. 401(a) or 408(a) trust)	05	Form 6069			11
Form 9	90-T (trust other than above) HILDA ROMERO	06	Form 8870			12
● If th box ▶ 1 I t	e organization does not have an office or place of busine is is for a Group Return, enter the organization's four digi 	t Group Exe and atta <u>NOVEJ</u> ganization's	emption Number (GEN) I uch a list with the names and TINs of MBER 16, 2020 , to file s return for: d ending	f this is fo f all memb	r the whole lers the exten npt organiza 	group, check this
	this application is for Forms 990-BL, 990-PF, 990-T, 472 ny nonrefundable credits. See instructions.	0, or 6069,	enter the tentative tax, less	3a	\$	0.
-	f this application is for Forms 990-PF, 990-T, 4720, or 606	9, enter an	y refundable credits and			
	estimated tax payments made. Include any prior year overpayment allowed as a credit.					0.
c Balance due. Subtract line 3b from line 3a. Include your payme		ayment wit	h this form, if required, by			
using EFTPS (Electronic Federal Tax Payment System). See instructions.		ons.	3c	\$	0.	
Cautio instruc	n: If you are going to make an electronic funds withdrawa tions. For Privacy Act and Paperwork Reduction Act Notice	-	•	453-EO a		79-EO for payment <b>3868</b> (Rev. 1-2020)

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NYS Annual Filing for Charitable Organizations www.CharitiesNYS.com

Open to Public Inspection

1.General Informatio		0010		0010	
For Fiscal Year Beginning		2019 and Ending (	mm/dd/yyyy) 12/31/		
Check if Applicable:	Name of Organization: STRIVE INTERNA	TIONAL, INC.		Employer Identification Number (EIN): 13-3255679	
Name Change       Mailing Address:         Initial Filing       205 EAST 122ND STREET, 3RD FLOOR		FLOOR	NY Registration Number: 03-66-06		
	City / State / ZIP: NEW YORK , NY	10035-2038		Telephone: 212 360-1100	
Reg ID Pending	Website: WWW • STRIVE • ORG	}		Email: HROMERO@STRIVE.ORG	
Check your organization's	· · · · · · · · · · · · · · · · · · ·				
registration category:	7A only EPTL	only X DUAL (7A 8		Confirm your Registration Category in the Charities Registry at www.CharitiesNYS.com.	
2. Certification					
See instructions for certific two signatories.	ation requirements. Imprope	er certification is a violation	of law that may be subjec	t to penalties. The certification requires	
	enalties of perjury that we rev true, correct and complete i			e best of our knowledge and belief, applicable to this report.	
President or Authorized C	Officer:		PHILIP WEI PRESIDENT/		
	Signature		HILDA ROME		
Chief Financial Officer or				NCIAL OFFI	
	Signature		Print Nam	e and Title Date	
3. Annual Reporting	Exemption				
Check the exemption(s) the	at apply to your filing. If your	organization is claiming a	n exemption under one cat	egory (7A or EPTL only filers) or both	
categories (DUAL filers) that	at apply to your registration,	complete only parts 1, 2, a	and 3, and submit the certi	fied Char500. No fee, schedules, or	
additional attachments are	required. If you cannot clair	n an exemption or are a DI	JAL filer that claims only o	ne exemption, you must file applicable	
schedules and attachment	ts and pay applicable fees.				
exceed \$25	· · · · ·			government agencies, etc. did not I raising counsel (FRC) to solicit	
<u>3b. EPTL fil</u> during the f		ts did not exceed \$25,000	and the market value of as	ssets did not exceed \$25,000 at any time	
4. Schedules and At	tachments				
See the following page					
for a checklist of 🛛 🔀 Yes 🔲 No 4a. Did your organization use a professional fund raiser, fund raising counsel or commercial co-venturer					
schedules and for fund raising activity in NY State? If yes, complete Schedule 4a.					
attachments to					
complete your filing.	Yes No 4b. Did t	he organization receive go	vernment grants? If yes, c	omplete Schedule 4b.	
5. Fee					
See the checklist on the	7A filing fee:	EPTL filing fee:	Total fee:		
next page to calculate your				Make a single check or money order	
fee(s). Indicate fee(s) you				payable to: <b>"Department of Law"</b>	
are submitting here:	\$	\$ <u>250.</u>	\$		

CHAR500 Annual Filing for Charitable Organizations (Updated January 2020)

*The "Exempt" category refers to an organization's NYS registration status. It does not refer to its IRS tax designation.

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2019.05000 STRIVE INTERNATIONAL, INC.

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### STRIVE INTERNATIONAL, INC.

CHAR500	Simply submit the certified CHAR500 wit		
UTANJUU	- Your organization is registered as 7A on		
Annual Filing Checklist	- Your organization is registered as EPTL		
Annual I ling Checklist	- Your organization is registered as DUAL		

Simply submit the certified CHAR500 with no fee, schedule, or additional attachments IF:
Your organization is registered as 7A only and you marked the 7A filing exemption in Part 3.
Your organization is registered as EPTL only and you marked the EPTL filing exemption in Part 3.
Your organization is registered as DUAL and you marked both the 7A and EPTL filing exemption in Part 3.

## **Checklist of Schedules and Attachments**

- Check the schedules you must submit with your CHAR500 as described in Part 4:
- LX If you answered "yes" in Part 4a, submit Schedule 4a: Professional Fund Raisers (PFR), Fund Raising Counsel (FRC), Commercial Co-Venturers (CCV)
- X If you answered "yes" in Part 4b, submit Schedule 4b: Government Grants

Check the financial attachments you must submit with your CHAR500:

- IRS Form 990, 990-EZ, or 990-PF, and 990-T if applicable
- X All additional IRS Form 990 Schedules, including Schedule B (Schedule of Contributors). Schedule B of public charities is exempt from disclosure and will not be available for public review.
- Our organization was eligible for and filed an IRS 990-N e-postcard. Our revenue exceeded \$25,000 and/or our assets exceeded \$25,000 in the filing year. We have included an IRS Form 990-EZ for state purposes only.

If you are a 7A only or DUAL filer, submit the applicable independent Certified Public Accountant's Review or Audit Report:

Review Report if you received total revenue and support greater than \$250,000 and up to \$750,000.

X Audit Report if you received total revenue and support greater than \$750,000

No Review Report or Audit Report is required because total revenue and support is less than \$250,000

We are a DUAL filer and checked box 3a, no Review Report or Audit Report is required

## **Calculate Your Fee**

For 7A and DUAL filers, calculate the 7A fee:

- \$0, if you checked the 7A exemption in Part 3a
- X \$25, if you did not check the 7A exemption in Part 3a

For EPTL and DUAL filers, calculate the EPTL fee:

\$0, if you checked the EPTL exemption in Part 3b
\$25, if the NET WORTH is less than \$50,000
\$50, if the NET WORTH is \$50,000 or more but less than \$250,000
\$100, if the NET WORTH is \$250,000 or more but less than \$1,000,000
X \$250, if the NET WORTH is \$1,000,000 or more but less than \$10,000,000
50,000,000 s750, if the NET WORTH is \$10,000,000 or more but less than \$50,000,000
\$1500, if the NET WORTH is \$50,000,000 or more

## Send Your Filing

Send your CHAR500, all schedules and attachments, and total fee to:

NYS Office of the Attorney General Charities Bureau Registration Section 28 Liberty Street New York, NY 10005

Need Assistance?

Visit: www.CharitiesNYS.com Call: (212) 416-8401 Email: Charities.Bureau@ag.ny.gov

#### Is my Registration Category 7A, EPTL, DUAL or EXEMPT?

Organizations are assigned a Registration Category upon registration with the NY Charities Bureau:

**7A** filers are registered to solicit contributions in New York under Article 7-A of the Executive Law ("7A")

**EPTL** filers are registered under the Estates, Powers & Trusts Law ("EPTL") because they hold assets and/or conduct activities for charitable purposes in NY.

DUAL filers are registered under both 7A and EPTL.

**EXEMPT** filers have registered with the NY Charities Bureau and meet conditions in <u>Schedule E - Registration</u> <u>Exemption for Charitable Organizations</u>. These organizations are not required to file annual financial reports but may do so voluntarily.

Confirm your Registration Category and learn more about NY law at <u>www.CharitiesNYS.com.</u>

#### Where do I find my organization's NET WORTH?

NET WORTH for fee purposes is calculated on:

- IRS Form 990 Part I, line 22
- IRS Form 990 EZ Part I, line 21
- IRS Form 990 PF, calculate the difference between Total Assets at Fair Market Value (Part II, line 16(c)) and Total Liabilities (Part II, line 23(b)).

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Schedule 4a: Professional Fund Raisers, Fund Raising Counsels, Commercial Co-Venturers www.CharitiesNYS.com

2019

If you checked the box in question 4a in Part 4 on the CHAR500 Annual Filing for Charitable Organizations, complete this schedule for EACH Professional Fund Raiser (PFR), Fund Raising Counsel (FRC) or Commercial Co-Venturer (CCV) that the organization engaged for fund raising activity in NY State. The PFR or FRC should provide its NY Registration Number to you. Include this schedule with your certified CHAR500 NYS Annual Filing for Charitable Organizations and use additional pages if necessary.

#### Definitions

A Professional Fund Raiser (PFR), in addition to other activities, conducts solicitation of contributions and/or handles the donations (Article 7A, 171-a.4). A Fund Raising Counsel (FRC) does not solicit or handle contributions but limits activities to advising or assisting a charitable organization to perform such functions for itself (Article 7A, 171-a.9).

A **Commercial Co-Venturer (CCV)** is an individual or for-profit company that is regularly and primarily engaged in trade or commerce other than raising funds for a charitable organization and who advertises that the purchase or use of goods, services, entertainment or any other thing of value will benefit a charitable organization (Article 7A, 171-a.6).

**Professional fund raising** does not include activities by an organization's development staff, volunteers, or a grantwriter who has been hired solely to draft applications for funding from a government agency or tax exempt organization.

#### 1. Organization Information

Name of Organization:	NY Registration Number:	
STRIVE INTERNATIONAL,	INC.	03-66-06

#### 2. Professional Fund Raiser, Fund Raising Counsel, Commercial Co-Venturer Information

Fund Raising Professional type:	Name of FRP:	NY Registration Number:
Professional Fund Raiser	NGK GLOBAL LLC	42-47-67
	Mailing Address:	Telephone:
X Fund Raising Counsel		
	25 EAST 67TH STREET, SUITE 5C	212-650-0007
Commercial Co-Venturer	City / State / ZIP:	
	NEW YORK, NY 10065	

### **3. Contract Information**

	Contract End Date: 07/15/2020
--	----------------------------------

#### 4. Description of Services

Services provided by FRP: TO MANAGE EVENT LOGISTICS, THEMES, AND DEVELOP INTERESTING PROGRAMS/CONTENT FOR EVENTS. ASSSIST IN MANAGING OF EVENTS HELD. ASSIST IN DEVELOPMENT OF FUNDRAISING ACTIVITIES.

### 5. Description of Compensation

Compensation arrangement with FRP: 5,000 PER MONTH

Amount Paid to FRP:

30,000.

#### 6. Commercial Co-Venturer (CCV) Report

Yes No If services were provided by a CCV, did the CCV provide the charitable organization with the interim or closing report(s) required by Section 173(a) part 3 of the Executive Law Article 7A?

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1019 CHAR500 Schedule 4a: Professional Fund Raisers, Fund Raising Counsels, Commercial Co-Venturers (Updated January 2020) Page 1

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Schedule 4a: Professional Fund Raisers, Fund Raising Counsels, Commercial Co-Venturers www.CharitiesNYS.com

2019

If you checked the box in question 4a in Part 4 on the CHAR500 Annual Filing for Charitable Organizations, complete this schedule for EACH Professional Fund Raiser (PFR), Fund Raising Counsel (FRC) or Commercial Co-Venturer (CCV) that the organization engaged for fund raising activity in NY State. The PFR or FRC should provide its NY Registration Number to you. Include this schedule with your certified CHAR500 NYS Annual Filing for Charitable Organizations and use additional pages if necessary.

#### Definitions

A Professional Fund Raiser (PFR), in addition to other activities, conducts solicitation of contributions and/or handles the donations (Article 7A, 171-a.4). A Fund Raising Counsel (FRC) does not solicit or handle contributions but limits activities to advising or assisting a charitable organization to perform such functions for itself (Article 7A, 171-a.9).

A **Commercial Co-Venturer (CCV)** is an individual or for-profit company that is regularly and primarily engaged in trade or commerce other than raising funds for a charitable organization and who advertises that the purchase or use of goods, services, entertainment or any other thing of value will benefit a charitable organization (Article 7A, 171-a.6).

**Professional fund raising** does not include activities by an organization's development staff, volunteers, or a grantwriter who has been hired solely to draft applications for funding from a government agency or tax exempt organization.

#### 1. Organization Information

Name of Organization:	NY Registration Number:
STRIVE INTERNATIONAL, INC.	03-66-06

#### 2. Professional Fund Raiser, Fund Raising Counsel, Commercial Co-Venturer Information

Fund Raising Professional type:	Name of FRP:	NY Registration Number:
Professional Fund Raiser	CONSTELLATION ADVANCEMENT LLC	42-07-22
	Mailing Address:	Telephone:
X Fund Raising Counsel	HARRISON HOUSE, 17 VILLAGE RD	917-584-9920
Commercial Co-Venturer	City / State / ZIP:	517-504-5520
	NEW VERNON, NJ 07976	

#### **3. Contract Information**

Contract Start Date: Contract End Date:

### 4. Description of Services

Services provided by FRP: CONSULTING ON FUNDRAISING ACTIVITIES

### 5. Description of Compensation

Compensation arrangement with FRP: BASED ON PREARRANGED HOURLY RATE Amount Paid to FRP:

13,369.

#### 6. Commercial Co-Venturer (CCV) Report

Yes No If services were provided by a CCV, did the CCV provide the charitable organization with the interim or closing report(s) required by Section 173(a) part 3 of the Executive Law Article 7A?

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1019 CHAR500 Schedule 4a: Professional Fund Raisers, Fund Raising Counsels, Commercial Co-Venturers (Updated January 2020) Page 1 4

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Schedule 4b: Government Grants www.CharitiesNYS.com

Open to Public Inspection

If you checked the box in question 4b in Part 4, complete this schedule and list EACH government grant award by a domestic (federal, state or local) agency; interstate or intergovernmental agency (for example Port Authority of New York and New Jersey); and state or local authorities. **Use additional pages if necessary.** Include this schedule with your certified CHAR500 NYS Annual Filing for Charitable Organizations.

1. Organization Information		
Name of Organization:	NY Registration Number:	
STRIVE INTERNATIONAL, INC.	03-66-06	
2. Government Grants	_	
Name of Government Agency	Amount of Grant	
1. MAYORS FUND	1.	224,019.
2. NYC DEPARTMENT OF CORRECTIONS	2.	880,153.
3. HARLEMT COMMUNITY DEVELOPMENT CORPORATION	3.	37,500.
4. NYC DEPARTMENT OF SMALL BUSINESS SERVICES	4.	22,445.
5. NYC HUMAN RESOURCES ADMINISTRATION	5.	69,686.
6. CITY OF NEW YORK	6.	150.
7. UNION SETTLEMENT	7.	15,000.
8. RESEARCH FOUNDATION OF CUNY	8.	181,244.
9. CONSORTIUM FOR WORKER EDUCATION, INC.	9.	105,997.
10.NYS OFFICE OF TEMPORARY AND DISABILITY ASSISTANCE	10.	123,625.
11.NYS OFFICE OF TEMPORARY AND DISABILITY ASSISTANCE	11.	22,750.
12.NYS DEPARTMENT OF LABOR	12.	99,653.
13.STRUCTURED EMPLOYMENT ECONOMIC DEVELOPMENT CORPORATION	O 13.	354,655.
14.US DEPARTMENT OF LABOR	14.	4,369,607.
15.	15.	
Total Government Grants:	Total:	6,506,484.

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