

UNBOUND
FORM 990
PUBLIC
DISCLOSURE
TAX YEAR 2019

IRS e-file Signature Authorization for an Exempt Organization

For calendar year 2019, or fiscal year beginning 01/01, 2019, and ending 12/31, 2019

Department of the Treasury
Internal Revenue Service

▶ **Do not send to the IRS. Keep for your records.**
▶ **Go to www.irs.gov/Form8879EO for the latest information.**

2019

Name of exempt organization

Employer identification number

UNBOUND

43-1243999

Name and title of officer

SCOTT WASSERMAN, PRESIDENT/CEO

Part I Type of Return and Return Information (Whole Dollars Only)

Check the box for the return for which you are using this Form 8879-EO and enter the applicable amount, if any, from the return. If you check the box on line **1a**, **2a**, **3a**, **4a**, or **5a**, below, and the amount on that line for the return being filed with this form was blank, then leave line **1b**, **2b**, **3b**, **4b**, or **5b**, whichever is applicable, blank (do not enter -0-). But, if you entered -0- on the return, then enter -0- on the applicable line below. **Do not** complete more than one line in Part I.

1a Form 990 check here ▶ <input checked="" type="checkbox"/>	b Total revenue , if any (Form 990, Part VIII, column (A), line 12)	1b <u>139369940.</u>
2a Form 990-EZ check here ▶ <input type="checkbox"/>	b Total revenue , if any (Form 990-EZ, line 9)	2b _____
3a Form 1120-POL check here ▶ <input type="checkbox"/>	b Total tax (Form 1120-POL, line 22)	3b _____
4a Form 990-PF check here ▶ <input type="checkbox"/>	b Tax based on investment income (Form 990-PF, Part VI, line 5).	4b _____
5a Form 8868 check here ▶ <input type="checkbox"/>	b Balance Due (Form 8868, line 3c)	5b _____

Part II Declaration and Signature Authorization of Officer

Under penalties of perjury, I declare that I am an officer of the above organization and that I have examined a copy of the organization's 2019 electronic return and accompanying schedules and statements and to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the organization's electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the organization's return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the organization's federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the organization's electronic return and, if applicable, the organization's consent to electronic funds withdrawal.

Officer's PIN: check one box only

I authorize BKD, LLP to enter my PIN 8 6 2 4 8 as my signature
ERO firm name Enter five numbers, but do not enter all zeros

on the organization's tax year 2019 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the aforementioned ERO to enter my PIN on the return's disclosure consent screen.

As an officer of the organization, I will enter my PIN as my signature on the organization's tax year 2019 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I will enter my PIN on the return's disclosure consent screen.

Officer's signature ▶

Scott Wasserman

SIGN HERE

Date ▶ June 18, 2020

Part III Certification and Authentication

ERO's EFIN/PIN. Enter your six-digit electronic filing identification number (EFIN) followed by your five-digit self-selected PIN.

4 3 3 7 2 2 4 4 0 1 6

Do not enter all zeros

I certify that the above numeric entry is my PIN, which is my signature on the 2019 electronically filed return for the organization indicated above. I confirm that I am submitting this return in accordance with the requirements of **Pub. 4163**, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns.

ERO's signature ▶

[Handwritten Signature]

Date ▶ 6/18/2020

ERO Must Retain This Form - See Instructions
Do Not Submit This Form to the IRS Unless Requested To Do So

For Paperwork Reduction Act Notice, see back of form.

Form **8879-EO** (2019)

TP 990/FinCEN/990Tpaper/KSpaper

Form **990**

Department of the Treasury
Internal Revenue Service

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.
- ▶ Information about Form 990 and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2019

Open to Public Inspection

A For the **2019** calendar year, or tax year beginning , **2019**, and ending , **20**

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization UNBOUND			D Employer identification number 43-1243999
	Doing Business As			E Telephone number (800) 875-6564
	Number and street (or P.O. box if mail is not delivered to street address)		Room/suite	G Gross receipts \$ 161,852,547.
	1 ELMWOOD AVE			
City or town, state or province, country, and ZIP or foreign postal code KANSAS CITY, KS 66103			H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
F Name and address of principal officer: SCOTT WASSERMAN 1 ELMWOOD AVE, KANSAS CITY, KS 66103			H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No	
I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () ◀ (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527			If "No," attach a list. (see instructions)	
J Website: WWW.UNBOUND.ORG			H(c) Group exemption number ▶	
K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶			L Year of formation: 1981 M State of legal domicile: MO	

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: UNBOUND'S MISSION IS TO WALK WITH THE POOR AND MARGINALIZED OF THE WORLD. SEE SCHEDULE O.		
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3 Number of voting members of the governing body (Part VI, line 1a)	3	9.
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	9.
	5 Total number of individuals employed in calendar year 2019 (Part V, line 2a)	5	175.
	6 Total number of volunteers (estimate if necessary)	6	4,098.
	7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.
b Net unrelated business taxable income from Form 990-T, line 34	7b	0.	
Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
	9 Program service revenue (Part VIII, line 2g)	133,867,370.	137,342,200.
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	516,464.	483,712.
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	1,384,795.	1,531,261.
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	12,547.	12,767.
		135,781,176.	139,369,940.
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	110,792,392.	113,069,736.
	14 Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	12,097,780.	12,685,568.
	16a Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
	b Total fundraising expenses (Part IX, column (D), line 25) ▶ 5,149,475.		
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	7,239,133.	7,417,097.
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	130,129,305.	133,172,401.	
19 Revenue less expenses. Subtract line 18 from line 12	5,651,871.	6,197,539.	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Current Year	End of Year
	21 Total liabilities (Part X, line 26)	58,407,839.	66,631,551.
	22 Net assets or fund balances. Subtract line 21 from line 20.	2,179,194.	2,352,467.
	56,228,645.	64,279,084.	

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here	▶ Signature of officer	Date			
	▶ Type or print name and title				
Paid Preparer Use Only	Print/Type preparer's name MICHAEL J ENGLE	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed	PTIN P00482834
	Firm's name ▶ BKD, LLP	Firm's EIN ▶ 44-0160260		Phone no. 816-221-6300	
	Firm's address ▶ 1201 WALNUT, SUITE 1700 KANSAS CITY, MO 64106-2246				

May the IRS discuss this return with the preparer shown above? (see instructions) Yes No

For Paperwork Reduction Act Notice, see the separate instructions.

Form **990** (2019)

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

► **File a separate application for each return.**
► **Go to www.irs.gov/Form8868 for the latest information.**

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

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

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

Type or print File by the due date for filing your return. See instructions.	Name of exempt organization or other filer, see instructions. UNBOUND	Taxpayer identification number (TIN) 43-1243999
	Number, street, and room or suite no. If a P.O. box, see instructions. 1 ELMWOOD AVE	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. KANSAS CITY, KS 66103	

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

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

SCOTT WASSERMAN-PRESIDENT/CEO

- The books are in the care of ► 1 ELMWOOD AVE KANSAS CITY KS 66103

Telephone No. ► 913 384-6500 Fax No. ► 913 384-2211

- If the organization does not have an office or place of business in the United States, check this box
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) _____ . If this is for the whole group, check this box If it is for part of the group, check this box and attach a list with the names and TINs of all members the extension is for.

1 I request an automatic 6-month extension of time until 11/16, 2020, to file the exempt organization return for the organization named above. The extension is for the organization's return for:

- calendar year 2019 or
- tax year beginning _____, 20____, and ending _____, 20____.

2 If the tax year entered in line 1 is for less than 12 months, check reason: Initial return Final return Change in accounting period

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

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

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

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response or note to any line in this Part III Yes No

1 Briefly describe the organization's mission:

UNBOUND'S MISSION IS TO WALK WITH THE POOR AND MARGINALIZED OF THE WORLD.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? Yes No

If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes No

If "Yes," describe these changes on Schedule O.

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses \$ 119,107,938. including grants of \$ 109,156,517.) (Revenue \$ 483,712.)
SPONSORSHIP - SEE SCHEDULE O

4b (Code:) (Expenses \$ 4,274,036. including grants of \$ 3,913,219.) (Revenue \$ 0.)
SCHOLARSHIP - SEE SCHEDULE O

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

4d Other program services (Describe on Schedule O.)

(Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses ▶ 123,381,974.

Part IV Checklist of Required Schedules

Table with 3 columns: Question ID, Question Text, Yes, No. Rows include questions 1 through 21 regarding organizational requirements and reporting.

Part IV Checklist of Required Schedules (continued)

Table with 3 columns: Question, Yes, No. Rows 22-38 covering various organizational requirements and schedules.

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

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

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

Table with 3 columns: Question, Yes, No. Rows include questions 2a through 16 regarding employee counts, tax returns, business income, foreign accounts, prohibited transactions, and charitable contributions.

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

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

Section A. Governing Body and Management

Table with 3 columns: Question, Yes, No. Rows include 1a (governing body members), 1b (independent members), 2-7a (relationships and governance), 7b (reserved decisions), 8 (documentation), 8a (governing body), 8b (committees), 9 (unreachable officers).

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

Table with 3 columns: Question, Yes, No. Rows include 10a (local chapters), 10b (policies), 11a (Form 990 distribution), 12a (conflict of interest policy), 12b (disclosure requirements), 12c (monitoring), 13 (whistleblower policy), 14 (document retention), 15 (compensation review), 15a (CEO), 15b (other officers), 16a (joint ventures), 16b (joint venture policy).

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed ATTACHMENT 1
18 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (Section 501(c) (3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
[X] Own website [] Another's website [X] Upon request [] Other (explain on Schedule O)
19 Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
20 State the name, address, and telephone number of the person who possesses the organization's books and records

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

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

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.

(A) Name and title	(B) Average hours per week per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) SCOTT WASSERMAN PRESIDENT/CEO (NON-VOTING)	55.00 0.			X			228,073.	0.	41,845.	
(2) STEVE MCCLAIN DIRECTOR OF OUTREACH	45.00 0.					X	124,525.	0.	36,775.	
(3) ROB MCELROY LEAD SOFTWARE ARCHITECT	45.00 0.					X	127,554.	0.	33,374.	
(4) MARTIN KRAUS TREASURER (NON-VOTING)/DIR FIN	50.00 0.			X			128,337.	0.	28,203.	
(5) DAN WINHOLTZ-PEARSON DIRECTOR OF INTERNATIONAL PROG	45.00 0.					X	114,341.	0.	32,322.	
(6) MARY GEISZ DIRECTOR OF SPONSOR EXPERIENCE	45.00 0.					X	118,142.	0.	18,676.	
(7) JOHN DOUGHERTY DIRECTOR OF TECHNOLOGY SERVICE	45.00 0.					X	117,849.	0.	17,922.	
(8) WILLIAM HANSEN SECRETARY (NON-VOTING)/FIN MGR	45.00 0.			X			78,294.	0.	14,585.	
(9) ALISON AVAYU DIRECTOR	4.00 0.	X					0.	0.	0.	
(10) DAVID HERBISON CGO/DIRECTOR	6.00 0.	X	X				0.	0.	0.	
(11) RICH SWAN DIRECTOR	4.00 0.	X					0.	0.	0.	
(12) VICKI BERGER DEPUTY CGO/DIRECTOR	5.00 0.	X	X				0.	0.	0.	
(13) MONICA GOMEZ DIR (NON-VOTING)	2.00 0.	X					0.	0.	0.	
(14) DENNIS BERNARDO DIRECTOR	4.00 0.	X					0.	0.	0.	

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(15) EMMA MILLER ----- DIRECTOR	4.00 ----- 0.	X						0.	0.	0.
(16) PETER NDUNGO ----- DIR (NON-VOTING) (ENDED 6/19)	2.00 ----- 0.	X						0.	0.	0.
(17) JOE BARKER ----- DIRECTOR	4.00 ----- 0.	X						0.	0.	0.
(18) REV. GREG SCHMITT C.S.S.R. ----- PREACH REP(NON-VOTING)	2.00 ----- 0.	X						0.	0.	0.
(19) CINDY RICKS ----- DIRECTOR	4.00 ----- 0.	X						0.	0.	0.
(20) ABBY MARIE HARRIS ----- DIRECTOR (BEGAN 12/19)	4.00 ----- 0.	X						0.	0.	0.
(21) VINCENT MURMU ----- DIR (NON-VOTING) (BEG 6/19)	2.00 ----- 0.	X						0.	0.	0.
1b Sub-total								1,037,115.	0.	223,702.
c Total from continuation sheets to Part VII, Section A								0.	0.	0.
d Total (add lines 1b and 1c)								1,037,115.	0.	223,702.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **▶** 9

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

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation
ATTACHMENT 2		

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization **▶** 8

Part VIII Statement of Revenue

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

Table with columns: (A) Total revenue, (B) Related or exempt function revenue, (C) Unrelated business revenue, (D) Revenue excluded from tax under sections 512-514. Rows include Contributions, Gifts, Grants and Other Similar Amounts; Program Service Revenue; Other Revenue; and Miscellaneous Revenue.

Part IX Statement of Functional Expenses

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

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

Table with 5 columns: (A) Total expenses, (B) Program service expenses, (C) Management and general expenses, (D) Fundraising expenses. Rows include categories like Grants, Salaries, Pension, Advertising, etc.

Part X Balance Sheet

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

Table with columns for (A) Beginning of year, (B) End of year, and rows for Assets (1-16), Liabilities (17-26), and Net Assets or Fund Balances (27-33). Includes sub-rows 10a and 10b for land/equipment and 10c for accumulated depreciation.

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	139,369,940.
2	Total expenses (must equal Part IX, column (A), line 25)	2	133,172,401.
3	Revenue less expenses. Subtract line 2 from line 1	3	6,197,539.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	56,228,645.
5	Net unrealized gains (losses) on investments	5	1,871,463.
6	Donated services and use of facilities	6	0.
7	Investment expenses	7	0.
8	Prior period adjustments	8	0.
9	Other changes in net assets or fund balances (explain on Schedule O)	9	-18,563.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	64,279,084.

Part XII Financial Statements and Reporting

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

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

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

Form **990** (2019)

SCHEDULE A
(Form 990 or 990-EZ)

Public Charity Status and Public Support

OMB No. 1545-0047

2019

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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.

Name of the organization
UNBOUND

Employer identification number
43-1243999

Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.)

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

f Enter the number of supported organizations

g Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-10 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
(A)						
(B)						
(C)						
(D)						
(E)						
Total						

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

Schedule A (Form 990 or 990-EZ) 2019

JSA
9E1210 1.000

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)
(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Table with 7 columns: (a) 2015, (b) 2016, (c) 2017, (d) 2018, (e) 2019, (f) Total. Rows include: 1 Gifts, grants, contributions, and membership fees received; 2 Tax revenues levied for the organization's benefit; 3 The value of services or facilities furnished by a governmental unit; 4 Total. Add lines 1 through 3; 5 The portion of total contributions by each person; 6 Public support. Subtract line 5 from line 4.

Section B. Total Support

Table with 7 columns: (a) 2015, (b) 2016, (c) 2017, (d) 2018, (e) 2019, (f) Total. Rows include: 7 Amounts from line 4; 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources; 9 Net income from unrelated business activities; 10 Other income. Do not include gain or loss from the sale of capital assets; 11 Total support. Add lines 7 through 10; 12 Gross receipts from related activities; 13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here.

Section C. Computation of Public Support Percentage

Table with 2 columns: Line number, Percentage. Rows include: 14 Public support percentage for 2019 (line 6, column (f) divided by line 11, column (f)); 15 Public support percentage from 2018 Schedule A, Part II, line 14; 16a 33 1/3% support test - 2019; 16b 33 1/3% support test - 2018; 17a 10%-facts-and-circumstances test - 2019; 17b 10%-facts-and-circumstances test - 2018; 18 Private foundation.

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.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b.						
8 Public support. (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
9 Amounts from line 6.						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						

14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here**

Section C. Computation of Public Support Percentage

15 Public support percentage for 2019 (line 8, column (f), divided by line 13, column (f))	15	%
16 Public support percentage from 2018 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2019 (line 10c, column (f), divided by line 13, column (f)),	17	%
18 Investment income percentage from 2018 Schedule A, Part III, line 17	18	%

19a 33 1/3% support tests - 2019. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization .

b 33 1/3% support tests - 2018. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

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

	Yes	No
1 Are all of the organization's supported organizations listed by name in the organization's governing documents? <i>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.</i>		
2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>		
3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer (b) and (c) below.</i>		
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)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>		
c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>		
4a Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.</i>		
b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>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.</i>		
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)? <i>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.</i>		
5a Did the organization add, substitute, or remove any supported organizations during the tax year? <i>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).</i>		
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? <i>If "Yes," provide detail in Part VI.</i>		
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? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
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))? <i>If "Yes," provide detail in Part VI.</i>		
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? <i>If "Yes," provide detail in Part VI.</i>		
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? <i>If "Yes," provide detail in Part VI.</i>		
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)? <i>If "Yes," answer 10b below.</i>		
b Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)</i>		

Part IV Supporting Organizations (continued)

	Yes	No
11 Has the organization accepted a gift or contribution from any of the following persons?		
a 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?	11 a	
b A family member of a person described in (a) above?	11 b	
c A 35% controlled entity of a person described in (a) or (b) above? <i>If "Yes" to a, b, or c, provide detail in Part VI.</i>	11 c	

Section 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? <i>If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.</i>	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? <i>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.</i>	2	

Section 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)? <i>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).</i>	1	

Section 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? <i>If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).</i>	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? <i>If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.</i>	3	

Section E. Type III Functionally Integrated Supporting Organizations

1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).			
a <input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.			
b <input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.			
c <input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions).			
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 the supported organization(s) to which the organization was responsive? <i>If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.</i>	2a		
b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? <i>If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.</i>	2b		
3 Parent of Supported Organizations. Answer (a) and (b) below.			
a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>Provide details in Part VI.</i>	3a		
b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? <i>If "Yes," describe in Part VI the role played by the organization in this regard.</i>	3b		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting 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 Part VI):			
2 Acquisition indebtedness applicable to non-exempt-use assets	2		
3 Subtract line 2 from line 1d.	3		
4 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).	4		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6 Multiply line 5 by .035.	6		
7 Recoveries of prior-year distributions	7		
8 Minimum Asset Amount (add line 7 to line 6)	8		
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 <input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).			

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)

Section D - Distributions	Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	
4 Amounts paid to acquire exempt-use assets	
5 Qualified set-aside amounts (prior IRS approval required)	
6 Other distributions (describe in Part VI). See instructions.	
7 Total annual distributions. Add lines 1 through 6.	
8 Distributions to attentive supported organizations to which the organization is responsive (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	

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2019	(iii) Distributable Amount for 2019
1 Distributable amount for 2019 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2019 (reasonable cause required - explain in Part VI). See instructions.			
3 Excess distributions carryover, if any, to 2019			
a From 2014			
b From 2015			
c From 2016			
d From 2017			
e From 2018			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2019 distributable amount			
i Carryover from 2014 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4 Distributions for 2019 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2019 distributable amount			
c Remainder. Subtract lines 4a and 4b from 4.			
5 Remaining underdistributions for years prior to 2019, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions.			
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:			
a Excess from 2015			
b Excess from 2016			
c Excess from 2017			
d Excess from 2018			
e Excess from 2019			

Part VI Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

ATTACHMENT 1

SCHEDULE A, PART II - OTHER INCOME

DESCRIPTION	2015	2016	2017	2018	2019	TOTAL
OTHER REVENUE	90.	557.	105.	547.	766.	2,065.
TOTALS	<u>90.</u>	<u>557.</u>	<u>105.</u>	<u>547.</u>	<u>766.</u>	<u>2,065.</u>

SCHEDULE D (Form 990)

Supplemental Financial Statements

OMB No. 1545-0047

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.

2019

Attach to Form 990.

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

Name of the organization

Employer identification number

UNBOUND

43-1243999

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.

Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

Table with 3 columns: Line number, Description, (a) Donor advised funds, (b) Funds and other accounts. Includes rows for total number at end of year, aggregate values, and yes/no questions about donor advisement.

Part II Conservation Easements.

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

Table with 3 columns: Line number, Description, and Held at the End of the Tax Year. Includes rows for purpose of easements, total number, acreage, and monitoring expenses.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

Table with 3 columns: Line number, Description, and Amount. Includes rows for art collections, revenue included, and assets included.

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Schedule D (Form 990) 2019

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

- 3 Using the organization's acquisition, accession, and other records, check any of the following that make significant use of its collection items (check all that apply):
a Public exhibition
b Scholarly research
c Preservation for future generations
d Loan or exchange program
e Other
4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.
5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?

Part IV Escrow and Custodial Arrangements.

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

- 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?
b If "Yes," explain the arrangement in Part XIII and complete the following table:
Table with columns: Description, Amount
1c Beginning balance
1d Additions during the year
1e Distributions during the year
1f Ending balance
2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?
b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII

Part V Endowment Funds.

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

Table with 6 columns: (a) Current year, (b) Prior year, (c) Two years back, (d) Three years back, (e) Four years back. Rows include: 1a Beginning of year balance, b Contributions, c Net investment earnings, gains, and losses, d Grants or scholarships, e Other expenditures for facilities and programs, f Administrative expenses, g End of year balance.

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

- a Board designated or quasi-endowment %
b Permanent endowment %
c Term endowment %

The percentages on lines 2a, 2b, and 2c should equal 100%.

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

- (i) Unrelated organizations
(ii) Related organizations

Table with 2 columns: Yes, No. Rows: 3a(i), 3a(ii), 3b

b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?

4 Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment.

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

Table with 5 columns: (a) Cost or other basis (investment), (b) Cost or other basis (other), (c) Accumulated depreciation, (d) Book value. Rows include: 1a Land, b Buildings, c Leasehold improvements, d Equipment, e Other, Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)

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. (Column (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. (Column (b) must equal Form 990, Part X, col. (B) line 13.) . ▶		

Part IX Other Assets.

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

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

Part X Other Liabilities.

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

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) ANNUITY OBLIGATIONS	571,238.
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶	571,238.

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

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

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

Table with 5 main rows for revenue reconciliation. Row 1: Total revenue, gains, and other support per audited financial statements (141,221,918). Row 2: Amounts included on line 1 but not on Form 990, Part VIII, line 12. Sub-rows a-e: Net unrealized gains (losses) on investments (1,871,463), Donated services and use of facilities, Recoveries of prior year grants, Other (Describe in Part XIII.), Add lines 2a through 2d (1,871,463). Row 3: Subtract line 2e from line 1 (139,350,455). Row 4: Amounts included on Form 990, Part VIII, line 12, but not on line 1. Sub-rows a-c: Investment expenses not included on Form 990, Part VIII, line 7b, Other (Describe in Part XIII.), Add lines 4a and 4b (19,485). Row 5: Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) (139,369,940).

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

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

Table with 5 main rows for expense reconciliation. Row 1: Total expenses and losses per audited financial statements (133,170,032). Row 2: Amounts included on line 1 but not on Form 990, Part IX, line 25. Sub-rows a-e: Donated services and use of facilities, Prior year adjustments, Other losses, Other (Describe in Part XIII.), Add lines 2a through 2d (133,170,032). Row 3: Subtract line 2e from line 1 (133,170,032). Row 4: Amounts included on Form 990, Part IX, line 25, but not on line 1. Sub-rows a-c: Investment expenses not included on Form 990, Part VIII, line 7b, Other (Describe in Part XIII.), Add lines 4a and 4b (2,369). Row 5: Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) (133,172,401).

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.

SEE PAGE 5

Horizontal lines for providing supplemental information.

Part XIII Supplemental Information (continued)

SCHEDULE D, PART X, LINE 2

MANAGEMENT HAS EVALUATED THEIR INCOME TAX POSITIONS UNDER THE GUIDANCE INCLUDED IN ASC 740. BASED ON THEIR REVIEW, MANAGEMENT HAS NOT IDENTIFIED ANY MATERIAL UNCERTAIN TAX POSITIONS TO BE RECORDED OR DISCLOSED IN THE FINANCIAL STATEMENTS.

SCHEDULE D, PART XI, LINE 4B

CHANGE IN UNINSURED ANNUITY OBLIGATIONS \$ 18,564

UNBOUND COLOMBIA \$ 921

TOTAL \$ 19,485

SCHEDULE D, PART XII, LINE 4B

UNBOUND COLOMBIA \$ 2,369

**SCHEDULE F
(Form 990)**

Statement of Activities Outside the United States

OMB No. 1545-0047

2019

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16.

▶ Attach to Form 990.

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

Name of the organization

UNBOUND

Employer identification number

43-1243999

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

- 1 **For grantmakers.** Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? **Yes** **No**
- 2 **For grantmakers.** Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States.

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

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in the region	(d) Activities conducted in the region (by type) (such as, fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in the region	(f) Total expenditures for and investments in the region
(1) CENTRAL AMERICA AND THE CARIBB	0.	0.	GRANTMAKING		47,219,410.
(2) EAST ASIA AND THE PACIFIC	0.	0.	GRANTMAKING		17,265,807.
(3) NORTH AMERICA	0.	0.	GRANTMAKING		4,371,327.
(4) SOUTH AMERICA	0.	0.	GRANTMAKING		17,549,812.
(5) SOUTH ASIA	0.	0.	GRANTMAKING		10,931,764.
(6) SUB-SAHARAN AFRICA	0.	0.	GRANTMAKING		15,731,617.
(7) CENTRAL AMERICA AND THE CARIBB	0.	1.	PROGRAM SERVICES	PROJ MENTOR & MONITOR	263,037.
(8) EAST ASIA AND THE PACIFIC	0.	0.	PROGRAM SERVICES	PROJ MENTOR & MONITOR	54,417.
(9) NORTH AMERICA	0.	0.	PROGRAM SERVICES	PROJ MENTOR & MONITOR	13,100.
(10) SOUTH AMERICA	0.	0.	PROGRAM SERVICES	PROJ MENTOR & MONITOR	56,303.
(11) SOUTH ASIA	0.	0.	PROGRAM SERVICES	PROJ MENTOR & MONITOR	35,880.
(12) SUB-SAHARAN AFRICA	0.	0.	PROGRAM SERVICES	PROJ MENTOR & MONITOR	50,911.
(13) CENTRAL AMERICA AND THE CARIBB	1.	0.	PROGRAM SERVICES	REGIONAL CENTER	1,138,234.
(14)					
(15)					
(16)					
(17)					
3a Subtotal	1.	1.			114,681,619.
b Total from continuation sheets to Part I					
c Totals (add lines 3a and 3b)	1.	1.			114,681,619.

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

Schedule F (Form 990) 2019

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

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)			CENT. AMERICA/CARIBBEAN	SEE PART V	2,501,740.	WIRE			
(2)			EAST ASIA/PACIFIC	SEE PART V	845,572.	WIRE			
(3)			NORTH AMERICA	SEE PART V	348,515.	WIRE			
(4)			SOUTH AMERICA	SEE PART V	829,724.	WIRE			
(5)			SOUTH ASIA	SEE PART V	206,733.	WIRE			
(6)			SUB-SAHARAN AFRICA	SEE PART V	775,136.	WIRE			
(7)									
(8)									
(9)									
(10)									
(11)									
(12)									
(13)									
(14)									
(15)									
(16)									

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter **26.**

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

Part III **Grants and Other Assistance to Individuals Outside the United States.** Complete if the organization answered "Yes" on Form 990, Part IV, line 16.
Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of noncash assistance	(g) Description of noncash assistance	(h) Method of valuation (book, FMV, appraisal, other)
(1) NUTRITION, EDUCATION, HEALTH, & FAMILY	CENT. AMERICA/CARIBBEAN	122875.	44,717,670.	WIRE			
(2) NUTRITION, EDUCATION, HEALTH, & FAMILY	EAST ASIA/PACIFIC	46167.	16,420,235.	WIRE			
(3) NUTRITION, EDUCATION, HEALTH, & FAMILY	NORTH AMERICA	11114.	4,022,812.	WIRE			
(4) NUTRITION, EDUCATION, HEALTH, & FAMILY	SOUTH AMERICA	47767.	16,720,088.	WIRE			
(5) NUTRITION, EDUCATION, HEALTH, & FAMILY	SOUTH ASIA	30440.	10,725,031.	WIRE			
(6) NUTRITION, EDUCATION, HEALTH, & FAMILY	SUB-SAHARAN AFRICA	43192.	14,956,481.	WIRE			
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							
(13)							
(14)							
(15)							
(16)							
(17)							
(18)							

Part IV Foreign Forms

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

Part V Supplemental Information

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

SCHEDULE F, PART I, LINE 2

UNBOUND SENDS A WIRE TRANSFER TO PROJECTS ON A MONTHLY BASIS. THE MONTHLY TRANSFER INCLUDES THE PROJECT'S ALLOCATION OF SPONSORSHIP FUNDS IN THREE CATEGORIES: CHILDREN, AGING AND VOCATIONS (WHERE APPLICABLE). THE MONTHLY TRANSFER ALSO INCLUDES BIRTHDAY FUNDS.

MONEY IS SENT AT THE APPROPRIATE TIMES FOR SCHOLARSHIPS AND CHRISTMAS.

THERE MIGHT BE ADDITIONAL RESTRICTED FUNDS SENT AS UNBOUND GRANTS OR BECAUSE OF SPONSORS' EXTRA DONATIONS FOR SPECIFIC FAMILY OR PROJECT NEEDS BEYOND WHAT THE SPONSORSHIP PROGRAM COVERS. UNBOUND MONITORS THE PROJECTS' USE OF THESE FUNDS IN A VARIETY OF WAYS.

PROJECTS ARE REQUIRED TO PROVIDE MONTHLY FINANCIAL INFORMATION TO

UNBOUND'S OFFICE IN KANSAS CITY, KANSAS, INCLUDING:

- A. TRANSACTION-LEVEL FINANCIAL DETAIL WHICH INCLUDE THE BALANCE SHEET AND INCOME STATEMENT
- B. PROJECT BANK STATEMENTS AND BANK RECONCILIATIONS
- C. CASH RESERVES REPORT

THE PROJECTS ARE ALSO REQUIRED TO SUBMIT OR MAKE AVAILABLE THE FOLLOWING

DOCUMENTS ON AN ANNUAL BASIS:

- A. ANNUAL BUDGET
- B. ASSET LISTING
- C. GOVERNMENT-REQUIRED EXTERNAL AUDIT
- D. ANY OTHER FINANCIAL REPORTS FILED WITH THEIR GOVERNMENTS

Part V Supplemental Information

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

FOR SPECIAL MONEY GIFTS OVER \$100, PROJECTS ARE REQUIRED TO ACKNOWLEDGE THE EXPENDITURES TO THE DONORS.

THERE ARE FIVE REGIONAL ACCOUNTANTS IN THE INTERNATIONAL PROGRAMS DEPARTMENT AT UNBOUND. EACH HAS RESPONSIBILITY FOR A NUMBER OF PROJECTS, AND REVIEWS THE MONTHLY TRANSACTIONS AND REPORTS ON A REGULAR BASIS FOR TIMELINESS, ACCURACY, COMPLETENESS, AND COMPLIANCE WITH UNBOUND FINANCIAL AND PROGRAM POLICY. REGULAR FEEDBACK IS GIVEN TO THE PROJECTS. STAFF REPRESENTATIVES FROM THE UNBOUND HEADQUARTERS OFFICE VISIT EACH PROJECT AT LEAST ONCE PER YEAR TO ASSESS PROGRAM AND ADMINISTRATIVE PERFORMANCE, VISIT PROGRAM BENEFICIARIES IN THEIR HOMES, AND PROVIDE SUPPORT AND TRAINING TO PROJECT TEAMS. FORMAL PERFORMANCE AUDITS ARE PERFORMED PERIODICALLY, TYPICALLY ONCE EVERY THREE YEARS.

IN ADDITION, THE UNBOUND FINANCE DEPARTMENT HAS A TEAM OF FINANCIAL AUDITORS WHO REGULARLY AUDIT THE PROJECTS' INTERNAL CONTROLS, PROCESSES AND PROCEDURES, AND THE ACCURACY OF THEIR RECORDKEEPING. THEY HAVE ESTABLISHED A SCHEDULE FOR AUDITING EACH PROJECT ON A REGULAR BASIS.

THERE ARE OTHER PROCESSES, TOO, THROUGH WHICH UNBOUND IS ABLE TO MONITOR THE PROJECT PERFORMANCE AND ADHERENCE TO UNBOUND POLICIES. UNBOUND REQUIRES AN UPDATED ANNUAL PHOTO OF EACH SPONSORED MEMBER, AND HAS PROCESSES TO ASSURE THE AUTHENTICITY OF EVERY PHOTO.

Part V Supplemental Information

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

UNBOUND REQUIRES EACH SPONSORED MEMBER TO WRITE TO HIS OR HER SPONSOR AT LEAST TWICE EACH YEAR. THE LETTERS ARE REGULARLY REVIEWED ON A SAMPLE BASIS BEFORE BEING SENT TO SPONSORS. SPONSORS EAGERLY ANTICIPATE LETTERS FROM THEIR SPONSORED FRIENDS.

UNBOUND ORGANIZES GROUP TRIPS CALLED AWARENESS TRIPS AND FACILITATES INDIVIDUAL SPONSOR VISITS TO A NUMBER OF THE PROJECTS EACH YEAR. UNBOUND ENCOURAGES ALL SPONSORS TO VISIT THEIR SPONSORED FRIENDS AND VIEW FIRSTHAND THE WORK OF THE PROJECTS. IN 2019, 933 SPONSORED CHILDREN AND ELDERLY WERE VISITED

SCHEDULE F, PART II, LINES 1(1)-(6), COLUMN D
PURPOSE OF GRANTS FOR ALL REGIONS IS PROJECT INFRASTRUCTURE, EMERGENCY, SCHOLARSHIP, AND OTHER ASSISTANCE.

**SCHEDULE J
(Form 990)**

Compensation Information

OMB No. 1545-0047

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

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

▶ Attach to Form 990.

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

2019

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization

UNBOUND

Employer identification number

43-1243999

Part I Questions Regarding Compensation

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

Schedule J (Form 990) 2019

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

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

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

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
1 SCOTT WASSERMAN PRESIDENT/CEO (NON-VOTING)	(i)	227,299.	0.	774.	18,068.	23,777.	269,918.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
2 MARTIN KRAUS TREASURER (NON-VOTING)/DIR FIN	(i)	127,533.	0.	804.	9,696.	18,507.	156,540.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
3 ROB MCELROY LEAD SOFTWARE ARCHITECT	(i)	127,284.	0.	270.	12,585.	20,789.	160,928.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
4 STEVE MCCLAIN DIRECTOR OF OUTREACH	(i)	123,751.	0.	774.	12,998.	23,777.	161,300.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
5	(i)							
	(ii)							
6	(i)							
	(ii)							
7	(i)							
	(ii)							
8	(i)							
	(ii)							
9	(i)							
	(ii)							
10	(i)							
	(ii)							
11	(i)							
	(ii)							
12	(i)							
	(ii)							
13	(i)							
	(ii)							
14	(i)							
	(ii)							
15	(i)							
	(ii)							
16	(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, PART I, LINE 1A

IN 2019, ANABELLA WASSERMAN, WIFE OF SCOTT WASSERMAN, PRESIDENT/CEO OF UNBOUND, TRAVELED INTERNATIONALLY WITH MR. WASSERMAN AND OTHER UNBOUND STAFF TO PARTICIPATE IN PROJECT MENTORING/MONITORING AND SPONSOR AWARENESS TRIPS TO VARIOUS UNBOUND PROJECTS. UNBOUND COMPENSATED MS. WASSERMAN FOR HER TIME AS AN INDEPENDENT CONTRACTOR AND PAID FOR HER AIRFARE BECAUSE HER PARTICIPATION WAS FOR BONA FIDE BUSINESS PURPOSES. MS. WASSERMAN'S LONG STANDING RELATIONSHIP WITH UNBOUND, PREVIOUS INVOLVEMENT LEADING SEVERAL CHURCH MISSION TRIPS, BEING A NATIVE OF GUATEMALA AND BEING BI-LINGUAL ARE JUST A FEW OF THE MANY ATTRIBUTES THAT ENABLE HER TO WORK SUCCESSFULLY AND TO HELP UNBOUND BUILD MEANINGFUL RELATIONSHIPS WITH PROJECT STAFF, AWARENESS TRIP PARTICIPANTS AND SPONSORED FAMILIES.

**SCHEDULE M
(Form 990)**

Noncash Contributions

OMB No. 1545-0047

2019

**Open to Public
Inspection**

Department of the Treasury
Internal Revenue Service

- ▶ Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.
- ▶ Attach to Form 990.
- ▶ Go to www.irs.gov/Form990 for instructions and the latest information.

Name of the organization

UNBOUND

Employer identification number

43-1243999

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art - Works of art				
2 Art - Historical treasures				
3 Art - Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles.				
7 Boats and planes				
8 Intellectual property				
9 Securities - Publicly traded	X	34 .	164,986 .	FAIR MARKET VALUE
10 Securities - Closely held stock				
11 Securities - Partnership, LLC, or trust interests				
12 Securities - Miscellaneous				
13 Qualified conservation contribution - Historic structures				
14 Qualified conservation contribution - Other				
15 Real estate - Residential				
16 Real estate - Commercial				
17 Real estate - Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ▶ ()				
26 Other ▶ ()				
27 Other ▶ ()				
28 Other ▶ ()				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement **29**

	Yes	No
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period?		X
b If "Yes," describe the arrangement in Part II.		
31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?	X	
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?		X
b If "Yes," describe in Part II.		
33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.		

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

Schedule M (Form 990) 2019

JSA

9E1298 1.000

Part II **Supplemental Information.** Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

SCHEDULE M, PART I, COLUMN B

THE AMOUNTS LISTED IN COLUMN B REPRESENTS THE NUMBER OF CONTRIBUTIONS.

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

Department of the Treasury
Internal Revenue Service

Name of the organization

UNBOUND

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.

▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2019

**Open to Public
Inspection**

Employer identification number

43-1243999

FORM 990, PART I, LINE 1

UNBOUND'S MISSION IS TO WALK WITH THE POOR AND MARGINALIZED OF THE
WORLD.

1. WE PROVIDE PERSONAL ATTENTION AND DIRECT BENEFITS TO CHILDREN, YOUTH,
AGING AND THEIR FAMILIES SO THEY MAY LIVE WITH DIGNITY, ACHIEVE THEIR
DESIRED POTENTIAL AND PARTICIPATE FULLY IN SOCIETY.

2. WE INVITE PEOPLE OF GOODWILL TO LIVE IN DAILY SOLIDARITY WITH THE
WORLD'S POOR THROUGH ONE-TO-ONE SPONSORSHIP.

3. WE BUILD COMMUNITY BY FOSTERING RELATIONSHIPS OF MUTUAL RESPECT,
UNDERSTANDING AND SUPPORT THAT ARE CULTURALLY DIVERSE, EMPOWERING AND
WITHOUT RELIGIOUS OR OTHER PREJUDICE.

GROUNDING IN THE GOSPEL CALL TO SERVE THE POOR, UNBOUND IS A LAY CATHOLIC
ORGANIZATION WORKING WITH PERSONS OF ALL FAITH TRADITIONS TO CREATE A
WORLDWIDE COMMUNITY OF COMPASSION AND SERVICE.

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TOTAL GRANTS FOR THE SPONSORSHIP PROGRAM WERE \$109 MILLION IN 2019.

AT THE END OF 2019, A TOTAL OF 301,555 INDIVIDUALS IN LATIN AMERICA, ASIA
AND AFRICA WERE SPONSORED THROUGH UNBOUND. THEY INCLUDED 268,421 CHILDREN
AND YOUTH, 32,895 ELDERS AND 239 CANDIDATES STUDYING FOR THE PRIESTHOOD
OR RELIGIOUS LIFE.

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FOLLOWING ARE EXAMPLES OF ACHIEVEMENTS IN THE SPONSORSHIP PROGRAM, AS SPONSORED INDIVIDUALS AND THEIR FAMILIES PARTNERED WITH UNBOUND TO IDENTIFY THE SPECIFIC CHALLENGES THEY MUST OVERCOME, SET THEIR OWN GOALS AND FORMULATE PLANS TO ACHIEVE THEM.

UNBOUND'S SPONSORSHIP PROGRAM CONNECTS CHILDREN, YOUTH, ELDERS AND THEIR FAMILIES WITH INDIVIDUAL SPONSORS AND SUPPORTIVE LOCAL COMMUNITIES OF STAFF MEMBERS AND OTHER FAMILIES. THROUGH SPONSORSHIP, INDIVIDUALS AND FAMILIES HAVE RESOURCES AND A SOLID SUPPORT NETWORK TO BEGIN TO CHART THEIR OWN COURSE OUT OF POVERTY. IN 2019, UNBOUND HAD PROGRAMS IN 18 COUNTRIES, INCLUDING BOLIVIA, CHILE, COLOMBIA, COSTA RICA, THE DOMINICAN REPUBLIC, ECUADOR, EL SALVADOR, GUATEMALA, HONDURAS, INDIA, KENYA, MADAGASCAR, MEXICO, NICARAGUA, PERU, THE PHILIPPINES, TANZANIA AND UGANDA. IN 2019, UNBOUND ALSO STARTED A PROGRAM IN RWANDA AND SPONSORSHIP LAUNCHED IN JANUARY 2020.

SPONSORS - THROUGH THE MONTHLY FINANCIAL CONTRIBUTIONS THEY MAKE AND LETTERS THEY RECEIVE FROM THEIR SPONSORED FRIENDS - EXPERIENCE A SENSE OF CONNECTION WITH SOMEONE IN ANOTHER PART OF THE WORLD AND SATISFACTION KNOWING THEY ARE HELPING ANOTHER HUMAN BEING REACH THEIR POTENTIAL. SPONSORS ALSO HAVE THE OPPORTUNITY TO WRITE TO THEIR SPONSORED FRIENDS TO OFFER THEIR ENCOURAGEMENT AND BUILD REWARDING RELATIONSHIPS. UNBOUND HAD 252,222 SPONSORS FROM THE U.S. AND AROUND THE WORLD AT THE END OF 2019.

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SPONSORED INDIVIDUALS AND THEIR FAMILIES PARTNER WITH UNBOUND TO MAKE PROGRAM AND BENEFIT DECISIONS THAT HELP THEM MEET THEIR BASIC NEEDS AND DEVELOP THEIR POTENTIAL OVER THE COURSE OF THEIR TIME IN THE PROGRAM, WHICH IS SOMETIMES 18 YEARS OR MORE. SPONSORED INDIVIDUALS AND THEIR FAMILIES USE FINANCIAL ASSISTANCE TO HELP MEET NEEDS SUCH AS EDUCATION, NUTRITION, HOUSING IMPROVEMENTS, TRANSPORTATION AND HEALTH CARE. THEY ALSO HAVE ACCESS TO LEADERSHIP AND ECONOMIC DEVELOPMENT OPPORTUNITIES RELATED TO FINANCIAL LITERACY, SKILL DEVELOPMENT AND INCOME GENERATION.

SPONSORSHIP REQUIRES ACTIVE PARTICIPATION FROM FAMILIES AS THE PROGRAM IS HIGHLY PERSONALIZED. WITH SUPPORT FROM SOCIAL WORKERS AND OTHER LOCAL UNBOUND STAFF, FAMILIES TAKE A CENTRAL ROLE IN DETERMINING SPONSORSHIP BENEFITS, AND IN FORMING SUPPORT NETWORKS IN WHICH THEY ENCOURAGE EACH OTHER AND HOLD EACH OTHER ACCOUNTABLE. SMALL SUPPORT GROUPS OF PARENTS AND GUARDIANS, MOSTLY MADE UP OF MOTHERS, ARE KEY IN THE SPONSORSHIP PROGRAM'S SUCCESS.

FAMILIES, PARTICULARLY MOTHERS, ARE THE PRIMARY LEADERS IN UNBOUND. THEY KNOW BEST WHEN IT COMES TO MEETING THEIR CHILDREN'S NEEDS, AND UNBOUND LISTENS TO THEM AND LEARNS FROM THEM. MOTHERS PARTICIPATING IN UNBOUND HAVE TAKEN ADVANTAGE OF MICRO-SAVINGS AND CREDIT OPPORTUNITIES TO MEET URGENT FAMILY NEEDS, OR TO START OR BOOST SMALL BUSINESSES TO GENERATE INCOME, PARENTS HAVE ALSO FORMED COOPERATIVES TO MEET COMMUNITY NEEDS AND PROVIDE INCOME FOR MEMBERS.

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OUTCOMES OF SPONSORSHIP VARY BUT TYPICALLY RELATE TO EDUCATION, LEADERSHIP DEVELOPMENT, IMPROVED HEALTH AND NUTRITION STATUS, DIGNIFIED HOUSING, SKILL DEVELOPMENT AND INCREASED INCOME THROUGH LIVELIHOOD OPPORTUNITIES FOR FAMILIES.

MONITORING PROGRAM SUCCESS

MONITORING AND EVALUATION OF PROGRAMS

UNBOUND IS COMMITTED TO LEARNING FROM OUR WORK AND ENSURING THAT IT MAKES A POSITIVE IMPACT IN THE LIVES OF CHILDREN, YOUTH, ELDERS AND FAMILIES AROUND THE WORLD. THE ORGANIZATION ASKS TWO BASIC QUESTIONS TO EARN DONOR TRUST AND BE AT OUR BEST FOR THOSE WE WORK WITH:

1. DID WE DO WHAT WE SAID WE WERE GOING TO DO? THIS IS PROGRAM MONITORING.
2. DID IT MAKE A DIFFERENCE? THIS IS PROGRAM EVALUATION.

UNBOUND DISTINGUISHES BETWEEN MONITORING AND EVALUATION AND MAINTAINS SEPARATE BUT COMPLEMENTARY STRATEGIES.

MONITORING:

THE PRINCIPAL PURPOSE OF MONITORING IS ACCOUNTABILITY. REGULAR PROGRAM MONITORING IS CONDUCTED TO ENSURE FIDELITY IN THE ORGANIZATIONAL STRUCTURE, DEVELOPMENT OF PROGRAMS, IMPLEMENTATION OF POLICIES AND THE APPROPRIATE USE OF FINANCES.

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SOME OF THIS MONITORING HAPPENS ACROSS DISTANCE WITH REGULAR REPORTING, EMAILS AND PHONE CALLS. MUCH OF IT HAPPENS WITH PERSONAL, ON-SITE VISITS FROM UNBOUND'S KANSAS CITY HEADQUARTERS STAFF.

UNBOUND'S MONITORING STRATEGY INCLUDES:

1. VISITS MADE ANNUALLY TO EACH PROJECT FOR STAFF DEVELOPMENT, PROGRAM SUPPORT AND ASSESSMENTS
2. FINANCIAL AUDITS CONDUCTED IN EACH PROJECT
3. PROGRAM AUDITS CONDUCTED IN EACH PROJECT
4. AWARENESS TRIPS AND INDIVIDUAL SPONSOR VISIT OPPORTUNITIES
5. THIRD-PARTY LEGAL ASSESSMENTS OF PROJECTS

EVALUATION:

LEARNING IS THE FOCUS OF PROGRAM EVALUATION. UNBOUND'S PERSONALIZED APPROACH TO SPONSORSHIP REQUIRES A UNIQUE AND CREATIVE APPROACH TO EVALUATION.

THE ORGANIZATION HAS DEVELOPED A THREE-TIER SYSTEM TO EVALUATE THE OUTCOMES OF THE UNBOUND SPONSORSHIP PROGRAM TO ADDRESS THE LEARNING AND DECISION-MAKING NEEDS AT ALL LEVELS: INDIVIDUAL, PROJECT/PROGRAM AND GLOBAL.

INDIVIDUAL OUTCOMES:

LETTERS FROM SPONSORED INDIVIDUALS TO THEIR SPONSORS PROVIDE DIRECT

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FEEDBACK ABOUT HOW THE RELATIONSHIPS AND SUPPORT MAKE A DIFFERENCE.

SPONSORED CHILDREN AND YOUTH, FOR EXAMPLE, OFTEN WRITE ABOUT HOW THEY ARE PROGRESSING IN SCHOOL OR HOW THE BENEFITS OF THE PROGRAM IMPACT THEM AND THEIR FAMILIES.

PROGRAM OUTCOMES:

PROGRAMS AT THE PROJECT LEVEL ARE TAILORED TO THE NEEDS OF SPONSORED INDIVIDUALS AND THEIR FAMILIES AND THE INITIATIVES OF UNBOUND IN THEIR COMMUNITIES. FAMILIES WORK WITH PROGRAM STAFF TO DEFINE AND MEASURE OUTCOMES AND UTILIZE THE RESULTS FOR CONTINUOUS PROGRAM IMPROVEMENT. WITH TRAINING AND TECHNICAL SUPPORT FROM THE EVALUATION TEAM, THESE LOCALLY DIRECTED EVALUATIONS ASK QUESTIONS LIKE: WHAT IS THE PROGRAM ACCOMPLISHING? HOW ARE FAMILIES DIFFERENT NOW? WHAT COULD WE DO BETTER?

GLOBAL OUTCOMES:

AS AN INTERNATIONAL ORGANIZATION, UNBOUND ALSO RECOGNIZES THE NEED TO STEP BACK PERIODICALLY AND LOOK AT THE BIG PICTURE. GLOBAL EVALUATIONS EXPLORE QUESTIONS OF ORGANIZATIONAL OUTCOMES FOR ALL PROGRAM PARTICIPANTS ACROSS BORDERS AND IN EVERY REGION. THESE BROAD ASSESSMENTS HELP US TELL OUR COLLECTIVE STORY AND UNDERSTAND THE EFFECTIVENESS OF OUR APPROACH IN KEY AREAS SUCH AS EDUCATIONAL ATTAINMENT, ECONOMIC SELF-SUFFICIENCY, EMPOWERMENT OF MOTHERS AND COMMUNITY PARTICIPATION.

EACH TIER OF OUR EVALUATION FRAMEWORK IS IMPORTANT TO UNDERSTANDING THE WHOLE OF UNBOUND'S IMPACT AND ITS COMPLEX CONTRIBUTION TO INDIVIDUAL

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GOALS AROUND THE WORLD.

GOVERNING BOARD'S ROLE IN MONITORING OUTCOMES

ON BEHALF OF SPONSORED INDIVIDUALS, THEIR FAMILIES AND SPONSORS, THE UNBOUND GOVERNING BOARD MONITORS THE INTEGRITY AND ACCOUNTABILITY OF THE ORGANIZATION'S OPERATIONS. THE BOARD PROACTIVELY DEFINES THE OUTCOMES EXPECTED FROM THE ORGANIZATION. MANAGEMENT MUST THEN PRODUCE VERIFIABLE DATA PROVING PROGRESS TOWARD THE EXPECTED OUTCOMES.

MANAGEMENT CHOOSES THE MEANS TO ACHIEVE THE BOARD'S ENDS. HOWEVER, THE BOARD SETS ETHICAL AND PRUDENT LIMITS ON WHICH MEANS MANAGEMENT MAY USE.

THE BOARD SYSTEMATICALLY MONITORS COMPLIANCE WITH THESE EXECUTIVE LIMITATIONS. AS A RESULT, THE BOARD CONFIDENTLY ASSURES DONORS THAT THEIR CONTRIBUTIONS ACHIEVE THEIR PROMISED OBJECTIVES, AND THAT THE ORGANIZATION REMAINS TRANSPARENT AND ETHICAL.

MONITORING ACTIVITIES AND EVALUATION METHODS

UNBOUND CONDUCTS FINANCIAL AND PROGRAM AUDITS OF PROJECTS ON A REGULAR BASIS TO ENSURE FINANCIAL RESOURCES PROVIDE INTENDED BENEFITS AND SERVICES AND SPONSORED MEMBERS ARE EMPOWERED TO DIRECT THEIR OWN DEVELOPMENT. IN ADDITION, ALMOST ALL PROJECTS RECEIVE AT LEAST ONE VISIT BY HEADQUARTERS STAFF EVERY YEAR. STAFF MEMBERS ALSO ACCOMPANY SPONSORS ON UNBOUND AWARENESS TRIPS VISITING PROJECTS AND FAMILIES IN THE PROGRAM. IN 2019, HEADQUARTERS STAFF COLLECTIVELY SPENT MORE THAN 1,400 DAYS IN

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THE FIELD MONITORING AND SUPPORTING PROGRAMS.

IN ADDITION, THE ORGANIZATION PERFORMS QUALITY CHECKS ON LETTERS AND PHOTOS FROM SPONSORED FRIENDS TO THEIR SPONSORS, AND MONITORS MEMBER RETIREMENT RATES AND SPONSOR RETENTION RATES. UNBOUND COLLECTS EDUCATIONAL ATTENDANCE AND PERFORMANCE DATA AND DOCUMENTS THE FINAL EDUCATION LEVEL ACHIEVED BY SPONSORED MEMBERS LEAVING THE PROGRAM.

UNBOUND PROJECTS AROUND THE WORLD CONDUCT EVALUATIONS IN THEIR LOCAL CONTEXTS TO DETERMINE OUTCOMES FOR SPONSORED MEMBERS AND THEIR FAMILIES. METHODS INCLUDE SURVEYS OF SPONSORED MEMBERS ON INCOME AND SKILL DEVELOPMENT, FOCUS GROUPS ON ATTITUDES AND BEHAVIORAL CHANGES, AND INTERVIEWS TO DOCUMENT EMPOWERMENT.

ORGANIZATION-WIDE PROGRAM EVALUATIONS FOCUS ON FOUR KEY DOMAINS: EDUCATION, ECONOMIC STATUS, COMMUNITY PARTICIPATION AND EMPOWERMENT. EMPOWERMENT REFERS TO ONE'S ABILITY TO MAKE DECISIONS FOR ONESELF AND ACT FREELY IN A WAY THAT IS INTENTIONAL AND GOAL-ORIENTED.

EXAMPLES OF PROGRAM SUCCESS

CASH TRANSFERS

WITH THE INTRODUCTION AND ADOPTION OF INDIVIDUAL BANK ACCOUNT MODELS, A MAJORITY OF SPONSORED MEMBERS NOW HAVE MORE DIRECT ACCESS TO THEIR PERSONAL BENEFITS. WHILE A MAJOR CONCERN SURROUNDING CASH TRANSFER

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PROGRAMS HAS BEEN MISUSE OF FUNDS, UNBOUND SEEKS TO ANSWER THESE CONCERNS BY CONDUCTING AN EVALUATION THAT STUDIES THE PURCHASING BEHAVIOR OF THE FAMILIES PARTICIPATING IN THE SPONSORSHIP PROGRAM.

EVALUATIONS WERE CONDUCTED IN INDIA IN 2018 AND GUATEMALA IN 2019 TO DETERMINE IF A LACK OF SUPERVISION MECHANISMS - SUCH AS SUBMISSION OF RECEIPTS - HAS ANY IMPACT ON THE WAYS FAMILIES USE THEIR BENEFIT AMOUNTS. THE FINDINGS FROM THIS EVALUATION DID NOT INDICATE THAT SUPERVISION MECHANISMS LEAD TO A DECREASE IN PURCHASING TEMPTATION GOODS. THIS MEANS THAT FAMILIES WHO WEREN'T SUBMITTING RECEIPTS WERE NO MORE LIKELY TO PURCHASE TEMPTATION GOODS THAN THE FAMILIES THAT WERE SUBMITTING RECEIPTS.

FINALLY, VARIOUS PROJECT (COMMUNITY) LEVEL EVALUATIONS ARE ONGOING AND LED BY PROGRAM STAFF IN EACH COUNTRY. THE PRIMARY PURPOSE OF EVALUATIONS AT THE PROJECT LEVEL IS TO ENSURE CONTINUOUS PROGRAM IMPROVEMENTS AND ADAPTATIONS TO THE EVER-CHANGING WORLD AROUND THE PROGRAM.

FOR EXAMPLE, A 2019 EVALUATION CONDUCTED IN DELHI, INDIA, ON A TUTORING PROGRAM SHOWED 73% OF THE MOTHERS OF THE TUTORED CHILDREN HAVE SEEN IMPROVED PERFORMANCE IN THE STUDIES OF THEIR CHILDREN. FURTHERMORE, 73% OF THE MOTHERS MENTIONED THAT THE LEVEL OF CONFIDENCE IN THE CHILDREN HAS INCREASED.

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A 2019 EVALUATION IN GUATEMALA REVEALED HOW FAMILIES ARE SPENDING THEIR BENEFIT FUNDS. THIS INFORMATION WILL BE USED TO ENHANCE THE PROGRAM TO SUPPORT FINANCIAL PLANNING FOR THE ACHIEVEMENT OF GOALS.

EDUCATION

SPONSORSHIP HELPS CHILDREN ACHIEVE A LEVEL OF EDUCATION THAT PREPARES THEM TO COMPETE WITH PEERS FOR JOBS AND BE EDUCATED COMMUNITY MEMBERS, PARENTS AND LEADERS.

AT A GLOBAL LEVEL, AT THE POINT OF LEAVING THE PROGRAM, 75% OF SPONSORED CHILDREN ACHIEVED A LEVEL OF SCHOOLING COMPARABLE TO OR ABOVE NATIONAL PEER AVERAGES, ACCORDING TO DATA GATHERED FROM 2011-2014. THIS MEANS THAT UNBOUND STUDENTS - DESPITE MARGINALIZATION BASED ON ECONOMIC, SOCIAL AND GEOGRAPHIC FACTORS - WERE ABLE TO COMPETE AND EXCEL ALONGSIDE STUDENTS FROM ALL SOCIOECONOMIC BRACKETS AND AREAS WITHIN THEIR COUNTRIES. OF THESE FORMER SPONSORED CHILDREN, 51% ACHIEVED EDUCATIONAL LEVELS A YEAR OR MORE ABOVE THEIR NATIONAL PEER AVERAGES. THE NUMBER JUMPED TO 59% ACHIEVING A YEAR OR MORE ABOVE THEIR NATIONAL PEER AVERAGES WHEN LOOKING AT THE EXPERIENCE OF SPONSORED GIRLS. THIS, ALONG WITH COUNTRY-LEVEL ANALYSIS, INDICATED A SPECIFIC IMPACT ON GIRLS' EDUCATION AND A CLOSING OR REVERSING OF THE PROMINENT GENDER GAP PRESENT IN MANY COMMUNITIES.

IN GUATEMALA, FOR EXAMPLE, SPONSORED CHILDREN, ON AVERAGE, ACHIEVED ALMOST THREE YEARS OF SCHOOLING MORE THAN THE NATIONAL AVERAGE FOR THEIR PEERS. AND IN UNBOUND'S QUEZON PROGRAM IN THE PHILIPPINES, 57% OF

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SPONSORED YOUTH PURSUED POST-SECONDARY EDUCATION COMPARED TO 30% OF THEIR PEERS.

FAMILIES

SPONSORSHIP IMPACTS THE SPONSORED CHILD AND THE ENTIRE FAMILY. UNBOUND'S DIRECT WORK THROUGH A PERSONALIZED BENEFIT MODEL AND PARENT GROUPS MEANS FAMILIES ARE ABLE TO BEST ALLOCATE RESOURCES FOR THEIR CHILDREN AND DIRECT HOW THE PROGRAM SUPPORTS THEIR DEVELOPMENT AS FAMILIES. MOST SPONSORED CHILDREN HAVE REPRESENTATION IN THE PROGRAM THROUGH SMALL PARENT/GUARDIAN GROUPS. THESE GROUPS PROVIDE THE SPACE FOR FAMILIES TO HAVE A VOICE IN THE PROGRAM AND BE PART OF A SUPPORTIVE COMMUNITY, ADDRESSING TWO SIGNIFICANT COMPONENTS OF POVERTY: LACK OF CHOICES AND ISOLATION.

IN 2019, A LOCAL EVALUATION IN KISUMU, KENYA, FOCUSED ON UNDERSTANDING THE FACTORS THAT WERE STOPPING THE MEMBERS OF THE PARENT GROUPS FROM TAKING LOANS FROM THEIR GROUP'S COOPERATIVES CALLED BORNEKA SACCO. THEY FOUND OUT THAT 54% OF THE RESPONDENTS HAD NEVER TAKEN A LOAN FROM THE SACCO, MOSTLY BECAUSE THEY FELT LIKE THE REGULATION THAT QUALIFIES THE MEMBERS FOR LARGER LOANS LIMITED THEM IN TERMS OF WHEN AND HOW MUCH THEY COULD WITHDRAW FOR A LOAN. THE TEAM AND THE SACCO MEMBERS ARE REVIEWING AS WELL AS EDUCATING THE MEMBERS ON THE GUIDELINES AND REGULATIONS OF THE LOANING PROCESS TO HELP MORE MEMBERS IN NEED.

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IN 2017, AN EVALUATION MEASURING THE EMPOWERMENT OF MOTHERS OF SPONSORED CHILDREN WAS PERFORMED. IT COMPARED THOSE MOTHERS TO MOTHERS WHO ARE WAITING FOR THEIR CHILDREN TO BE SPONSORED. THE EVALUATION FOUND THAT PARENTS OF CHILDREN SPONSORED THROUGH UNBOUND DISPLAYED A STRONGER LEVEL OF OWNERSHIP OF PSYCHOLOGICAL ASSETS - SUCH AS HAPPINESS, CONTROL, GOAL SETTING AND SELF-ESTEEM - THAN THE WAIT-LIST PARENTS DID. UNBOUND MOTHERS WERE MEMBERS IN COMMUNITY GROUPS, ORGANIZATIONS, NETWORKS OR ASSOCIATIONS AS WELL.

MOTHERS AND GUARDIANS IN UNBOUND REPORTED FEELING THEY ARE HAVING A GREATER IMPACT ON THEIR COMMUNITIES. THIRTY PERCENT OF UNBOUND MOTHERS SAID THEY WERE INVOLVED IN MAKING DECISIONS WITHIN THEIR COMMUNITIES COMPARED TO 16% OF MOTHERS IN THE COMPARISON GROUP. EVALUATION RESULTS SHOWED HOW MORE WOMEN IN UNBOUND ARE TAKING ECONOMIC RISKS STARTING SMALL BUSINESSES TO ENACT CHANGE. MORE WOMEN IN THE UNBOUND PROGRAM HAVE THEIR OWN BUSINESSES, AND FEWER WOMEN IN THE PROGRAM ARE UNEMPLOYED THAN MOTHERS IN THE COMPARISON GROUP. MORE MOTHERS IN UNBOUND ALSO REPORTED HAVING COMPLETE CHOICE IN DECIDING OR CHANGING THEIR OCCUPATIONS. THIS EVALUATION WAS A FOLLOW-UP TO A 2013 GLOBAL EVALUATION ON THE SAME TOPIC. THE 2017 STUDY REVEALED THAT 9% OF MOTHERS OF SPONSORED CHILDREN BELIEVED THEY HAD THE POWER TO CHANGE THEIR FAMILY'S SITUATION, AND 63% REPORTED THEY WERE ACTIVE IN SOLVING PROBLEMS IN THEIR COMMUNITIES, AMONG OTHER FINDINGS ON PARTICIPATION AND EMPOWERMENT INDICATORS.

UNBOUND IS NOW IN THE FINAL YEAR OF A SIX-YEAR LONGITUDINAL DATA

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COLLECTION ON ECONOMIC OUTCOMES FOR SPONSORED MEMBERS AND THEIR FAMILIES.
THE EVALUATION INCLUDES BOTH QUANTITATIVE AND QUALITATIVE DATA AND
FOLLOWS FAMILIES FROM THE TIME THEY BEGIN THE PROGRAM.

ELDERS

ELDERS IN COMMUNITIES WHERE UNBOUND WORKS FACE CHALLENGES RELATED TO
HEALTH, ACCESS TO CARE AND MEDICINE, AND LONELINESS. UNBOUND SEEKS TO
OVERCOME THESE CHALLENGES THROUGH MONTHLY BENEFITS SUCH AS FOOD
ASSISTANCE, HELP WITH HEALTH AND MEDICAL EXPENSES, HOME VISITS AND GROUP
ACTIVITIES. IN 2018, AN EVALUATION WAS CONDUCTED TO MEASURE UNBOUND'S
IMPACT WITH ELDERS IN RELATION TO OVERCOMING THESE CHALLENGES. THE
RESULTS WERE OVERWHELMINGLY POSITIVE. SPONSORED ELDERS EXPERIENCE A LOWER
SENSE OF EMPTINESS, ENCOUNTERED LESS FREQUENT FEELINGS OF REJECTION, AND
UNDERWENT FEWER MOMENTS OF MISSING HAVING PEOPLE AROUND THAN THE ELDERLY
POPULATION WHO LIVE IN SIMILAR CIRCUMSTANCES BUT ARE NOT PART OF THE
UNBOUND SPONSORSHIP PROGRAM.

ADDITIONALLY, SPONSORED ELDERS FEEL THEY CAN RELY ON OTHER INDIVIDUALS
WHEN THEY HAVE PROBLEMS, BELIEVE THEY CAN TRUST OTHERS IN THEIR LIVES,
AND CONSIDER THEMSELVES CLOSE TO OTHERS IN CONTRAST TO THOSE ELDERS WHO
WERE WAITING TO PARTICIPATE IN THE UNBOUND SPONSORSHIP PROGRAM. SPONSORED
ELDERS FELT AT EASE WHEN TALKING WITH MORE PEOPLE ABOUT PRIVATE MATTERS,
AND THEY HAVE MORE CLOSE FRIENDS TO CALL ON FOR HELP COMPARED TO
NON-SPONSORED ELDERS. SPONSORED ELDERS DID NOT WORRY AS FREQUENTLY ABOUT

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INSUFFICIENT FOOD INTAKE, DID NOT HAVE TO LIMIT VARIETY OF FOOD, AND DID NOT GO AS HUNGRY COMPARED TO ELDERS OUTSIDE OF THE PROGRAM WHO MORE FREQUENTLY EXPERIENCED THESE CONDITIONS. LASTLY, THE STUDY REVEALED THAT SPONSORED ELDERS HAD GREATER ACCESS TO MEDICINE AND MEDICAL CARE THAN THOSE ELDERS WHO WERE WAITING TO BE SPONSORED BY UNBOUND. ACCORDING TO THE SURVEY, 66% OF SPONSORED ELDERS SAID THEY RECEIVED NEEDED MEDICAL CARE, COMPARED TO 40% ON THE WAITING LIST.

THE RESULTS OF THIS EVALUATION AID IN OUR UNDERSTANDING OF THE EFFECTIVENESS OF THE UNBOUND PROGRAM'S GLOBAL IMPACT WITH ELDERS AND HELP US MAKE DECISIONS TO IMPROVE HOW THE PROGRAM SERVES ELDERS GLOBALLY.

FEEDBACK FROM SPONSORS

UNBOUND RECOGNIZES SPONSORS AND OTHER BENEFACTORS NOT MERELY AS DONORS BUT, FIRST AND FOREMOST, AS HIGHLY VALUED AND RESPECTED MEMBERS OF THE UNBOUND COMMUNITY. BOTH SPONSORS AND SPONSORED PERSONS HAVE SOMETHING TO GAIN FROM THE SPONSORSHIP RELATIONSHIP, AND TOWARD THAT END UNBOUND IS COMMITTED TO HELPING SPONSORS BECOME MORE AWARE OF THE REALITIES OF GLOBAL POVERTY AND GROW IN HUMAN SOLIDARITY.

THE STAFF AT UNBOUND TAKE EXCEPTIONAL CARE IN COMMUNICATIONS WITH SPONSORS, WHETHER DEALING WITH ROUTINE ACCOUNT MATTERS OR IN THE PRODUCTION OF PUBLICATIONS AND DIGITAL CONTENT. THE GOAL IS FOR SPONSORS TO BE INFORMED ABOUT WHAT HAPPENS IN PROGRAMS SO THEY UNDERSTAND HOW THEIR CONTRIBUTIONS ARE BEING USED AND BECOME MORE INVESTED IN THE LIVES

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OF THOSE THEY HELP.

ON AN ONGOING BASIS, UNBOUND SURVEYS SPONSORS WHOSE SPONSORSHIP RELATIONSHIPS HAVE COME TO AN END. RESPONDENTS ARE ASKED HOW THEY FEEL ABOUT THEIR SPONSORSHIP EXPERIENCE AND HOW LIKELY THEY WOULD BE TO RECOMMEND UNBOUND. IN 2019, THE RESULTS WERE:

1. NINETY PERCENT INDICATE THEY WERE EITHER VERY SATISFIED (59%) OR SATISFIED (31%).
2. MORE THAN 92% INDICATED THEY WERE EITHER VERY LIKELY (65.3%) OR SOMEWHAT LIKELY (27%) TO RECOMMEND UNBOUND.

IN OCTOBER THROUGH DECEMBER OF 2017, UNBOUND CONDUCTED A SURVEY TO DETERMINE WHAT SPONSORS VALUE ABOUT THE SPONSORSHIP RELATIONSHIP AND WHERE COMMUNICATION FITS INTO IT. RESPONDENTS WERE ASKED ABOUT WAYS THEY ENGAGE WITH UNBOUND. AMONG THE FINDINGS WERE:

1. EIGHTY-FIVE PERCENT OF RESPONDENTS REPORTED THEY READ PRINTED MATERIAL THEY RECEIVE IN THE MAIL FROM UNBOUND (INCLUDING PUBLICATIONS AND INFORMATION INCLUDED WITH PAYMENT RECEIPTS).
2. FIFTY-TWO PERCENT REPORTED THAT THEY READ EMAILS FROM UNBOUND.
3. TWENTY-FIVE PERCENT OF SURVEY RESPONDENTS REPORTED THEY VISIT THE UNBOUND WEBSITE.
4. OF THOSE WHO REPORTED VISITING THE WEBSITE, A LARGE MAJORITY, 85%, STATED THE REASON THEY VISIT IS TO SEND ELETTERS TO THEIR SPONSORED FRIENDS. SECONDARY REASONS WERE TO MAKE PAYMENTS OR LEARN MORE ABOUT

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UNBOUND.

5. FOURTEEN PERCENT OF SPONSORS TAKING THE SURVEY REPORTED THAT THEY CALL UNBOUND FOR QUESTIONS, COMMENTS OR NEEDS RELATED TO THEIR SPONSORSHIP.

6. NINE PERCENT OF SURVEY RESPONDENTS REPORTED THEY HAVE HOSTED OR VOLUNTEERED AT AN EVENT PROMOTING UNBOUND.

7. FIVE PERCENT OF RESPONDENTS REPORTED THEY READ UNBOUND'S BLOG OR SOCIAL MEDIA UPDATES.

PERHAPS THE MOST SIGNIFICANT INDICATOR OF A QUALITY SPONSOR EXPERIENCE IS THAT UNBOUND MAINTAINS A HIGH SPONSOR RETENTION RATE. UNBOUND ENDED 2019 WITH A RETENTION RATE OF 92.3%.

ANOTHER INDICATOR OF A QUALITY SPONSOR EXPERIENCE IS THE NUMBER OF PEOPLE, 31,974 IN 2019, WHO SPONSOR MORE THAN ONE CHILD OR ELDERLY PERSON THROUGH THE ORGANIZATION.

SPONSORS WHO TRAVEL ON UNBOUND AWARENESS TRIPS HAVE A SPECIAL OPPORTUNITY TO DEEPEN THEIR EXPERIENCE BY MEETING THEIR SPONSORED FRIENDS, LEARNING ABOUT THEIR SPONSORED FRIENDS' LIVES AND CULTURES, AND SEEING FIRSTHAND THE CHANGE INDIVIDUALS AND FAMILIES ARE CREATING WITH THEIR SUPPORT. IN 2019, 643 PEOPLE PARTICIPATED IN 28 AWARENESS TRIPS IN 12 COUNTRIES.

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FOLLOWING ARE EXAMPLES OF ACHIEVEMENTS IN EDUCATION AS UNBOUND WORKS WITH STUDENTS IN OUR SCHOLARSHIP PROGRAM.

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EDUCATIONAL SUPPORT PROVIDED BY UNBOUND'S SCHOLARSHIP PROGRAM HELPS TALENTED OLDER STUDENTS WHO, BECAUSE OF ECONOMIC CIRCUMSTANCES, ARE STRUGGLING TO CONTINUE THEIR EDUCATIONS. THE PROGRAM IS BASED ON PRINCIPLES OF PERSEVERANCE, LEADERSHIP AND SERVICE TO THE COMMUNITY.

THE SCHOLARSHIP PROGRAM COMPLEMENTS THE EDUCATIONAL SUPPORT PROVIDED BY THE UNBOUND SPONSORSHIP PROGRAM, WITH 46.8% OF SCHOLARSHIP STUDENTS ALSO SPONSORED. UNBOUND SCHOLARSHIPS HAVE HELPED STUDENTS IN COMMUNITIES AROUND THE WORLD ACHIEVE THEIR EDUCATIONAL GOALS. STUDENTS ARE ABLE TO COMPLETE THEIR EDUCATIONS, FOLLOW THEIR CHOSEN CAREER PATHS AND BE OF SERVICE TO THE LARGER COMMUNITY.

SCHOLARSHIPS ARE USED FOR NEEDS SUCH AS SECONDARY, POST-SECONDARY AND VOCATIONAL SCHOOL TUITION; TRANSPORTATION; SCHOOL SUPPLIES AND BOOKS. STUDENTS ARE SELECTED BY LOCAL PROGRAM STAFFS BASED ON ECONOMIC NEED, COMMITMENT TO COMPLETING THEIR EDUCATIONS, DEMONSTRATED LEADERSHIP POTENTIAL AND INTEREST IN COMMUNITY SERVICE.

SCHOLARSHIP STUDENTS PARTICIPATE IN SERVICE PROJECTS AS A REQUIREMENT OF THE PROGRAM. SCHOLARSHIPS ARE INTENDED AS SUPPLEMENTAL ASSISTANCE, AND STUDENTS AND THEIR FAMILIES CONTRIBUTE WHAT THEY CAN TOWARD EDUCATIONAL COSTS.

IN 2019, SCHOLARSHIP GRANTS TO UNBOUND FIELD OFFICES TOTALED MORE THAN \$3.9 MILLION. SCHOLARSHIPS WERE AWARDED TO 9,086 STUDENTS IN BOLIVIA,

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CHILE, COLOMBIA, COSTA RICA, THE DOMINICAN REPUBLIC, ECUADOR, EL SALVADOR, GUATEMALA, HONDURAS, INDIA, KENYA, MADAGASCAR, MEXICO, NICARAGUA, PERU, THE PHILIPPINES, TANZANIA AND UGANDA.

MANY SCHOLARS ARE SPONSORED YOUTH WHO NEED EXTRA FINANCIAL HELP IN ADDITION TO SPONSORSHIP SUPPORT TO COMPLETE THEIR EDUCATIONS. QUALIFIED NON-SPONSORED STUDENTS IDENTIFIED BY LOCAL UNBOUND STAFFS AS BEING IN NEED OF EDUCATIONAL ASSISTANCE ARE ALSO ELIGIBLE FOR SCHOLARSHIPS AND REPRESENT 53.2% OF THOSE RECEIVING AWARDS.

THE SERVICE REQUIREMENT IS AN IMPORTANT COMPONENT OF THE PROGRAM. SERVICE MAY INCLUDE TUTORING, HELPING CHILDREN IN THE SPONSORSHIP PROGRAM WRITE LETTERS TO THEIR SPONSORS IN THE U.S., TRANSLATING LETTERS OR PERFORMING WORK RELATED TO THEIR FIELDS OF STUDY.

A NUMBER OF FORMER SCHOLARS WORK FOR UNBOUND AS STAFF MEMBERS AFTER THEY GRADUATE. THEY BRING TO THEIR WORK A WEALTH OF KNOWLEDGE AND A UNIQUE PERSPECTIVE ON THE PROGRAM AND THEIR COMMUNITIES.

MONITORING PROGRAM SUCCESS

SCHOLARS ARE REQUIRED TO MAINTAIN GOOD GRADES IN ADDITION TO FULFILLING SERVICE REQUIREMENTS. LOCAL UNBOUND STAFFS MONITOR STUDENTS TO MAKE SURE THEY ARE MEETING PROGRAM REQUIREMENTS, AND THEY PROVIDE ANNUAL REPORTS ON THE SCHOLARSHIP PROGRAMS.

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EXAMPLES OF PROGRAM SUCCESS

AT VARIOUS LOCATIONS AROUND THE WORLD, COMMUNITY-LEVEL EVALUATIONS ARE ONGOING AND BEING LED BY PROGRAM STAFF IN EACH COUNTRY. THE PRIMARY PURPOSE OF EVALUATIONS AT THE LOCAL LEVEL IS TO ENSURE CONTINUOUS PROGRAM IMPROVEMENTS AND ADAPTATIONS TO THE EVER-CHANGING WORLD AROUND THE PROGRAM. IN 2019, 14 LOCAL-LEVEL EVALUATIONS WERE CONDUCTED, INCLUDING THE FOLLOWING THREE EXAMPLES.

IN HONDURAS, 99% OF SCHOLARS STATED THAT THEY BELIEVE THEY ARE ACHIEVING THEIR ACADEMIC GOALS. BEYOND THEIR PERSONAL ACADEMIC ACCOMPLISHMENTS, THE EVALUATION IN HONDURAS MEASURED HOW SCHOLARS WERE LEADERS IN THEIR COMMUNITIES. OF THE SCHOLARS WHO TOOK THE SURVEY, 94% BELIEVE THEIR ACTIONS IN THE UNBOUND SCHOLARSHIP PROGRAM EARN THEM RESPECT IN THE COMMUNITY, AND 91% BELIEVE THEY CAN TAKE ACTION TO IMPROVE THEIR COMMUNITY.

IN GUATEMALA, 98% OF THE SCHOLARS REPORT HAVING A GOAL FOR WHICH THEY ARE WORKING TO ACHIEVE. THE GOALS WERE EDUCATION-RELATED FOR 84% OF THE SCHOLARS. THE EVALUATION IN GUATEMALA ALSO FOCUSED ON RESULTS FROM STUDENTS RECEIVING TUTORING FROM THE SCHOLARS. IT FOUND THAT 95% OF PARENTS OF STUDENTS RECEIVING TUTORING REPORTED A POSITIVE CHANGE IN THE ATTITUDE OF THEIR CHILD.

IN MADAGASCAR, YOUNG PEOPLE IN THE SCHOLARSHIP PROGRAM WERE DROPPING OUT OF SCHOOL. THE EVALUATION HIGHLIGHTED THE MAIN REASON AS LACK OF SPECIFIC

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OBJECTIVES OR GOALS THAT WOULD MOTIVATE THEM TO CONTINUE. BASED ON THE FINDING, STAFF IN MADAGASCAR RECOMMENDED THAT IDENTIFYING AND SETTING GOALS BE PART OF THE INTERVIEW PROCESS, AND THAT THESE EFFORTS BE NURTURED THROUGH SESSIONS THAT GIVE SCHOLARS A WAY TO MOTIVATE THEMSELVES AND EACH OTHER TO ACHIEVE THEIR DREAMS.

UNBOUND HAS ALSO INITIATED QUALITATIVE EVALUATION OF THE SCHOLARSHIP PROGRAM WITH ALUMNI, UTILIZING A GROUP MIND-MAPPING PROCESS AND INDIVIDUAL INTERVIEWS TO EXPLORE LONG-TERM OUTCOMES.

UNBOUND CONDUCTED RIPPLE-EFFECT MAPPING (REM) IN 2015 WITH 32 PROGRAM ALUMNI FROM RURAL COMMUNITIES IN GUATEMALA AND IN 2013 WITH MORE THAN 80 PROGRAM ALUMNI IN THE METRO MANILA AREA OF THE PHILIPPINES. REM IS A PARTICIPATORY AND QUALITATIVE EVALUATION METHOD USED TO LEARN THE INTENDED AND UNINTENDED RESULTS OF THE PROGRAM. WHILE THE CONTEXTS OF GROUPS WERE DRAMATICALLY DIFFERENT, WITH DIFFERENT GEOGRAPHIES AND SIGNIFICANT CULTURAL DIFFERENCES, THE SIMILARITIES BETWEEN THE OUTCOMES STRENGTHEN THE ARGUMENT FOR WHAT MIGHT BE UNBOUND'S CONTRIBUTION THROUGH THE SCHOLARSHIP AND SPONSORSHIP PROGRAMS.

ALUMNI PARTICIPATING IN THE QUALITATIVE EVALUATION IN THE PHILIPPINES, ON AVERAGE THREE YEARS OUT OF THE PROGRAM, WERE PURSUING CAREERS SUCH AS TEACHING, NURSING, ACCOUNTING AND ARCHITECTURAL DESIGN. ALUMNI PARTICIPATING IN THE EVALUATION IN GUATEMALA, ON AVERAGE SIX YEARS OUT OF THE PROGRAM, MENTIONED EMPLOYMENT AS TEACHERS, POLICE OFFICERS, BAKERS

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AND SMALL-BUSINESS OWNERS. MOST OF THE EVALUATION PARTICIPANTS WERE EMPLOYED ON A FULL-TIME BASIS.

AMONG THE KEY FINDINGS WERE:

1. GRATITUDE AND GIVING BACK: THE FEELING OF GRATITUDE AND ACTIVELY GIVING BACK WERE BOTH CONNECTED AND COMMON ACROSS THE RIPPLE MAPS IN GUATEMALA AND THE PHILIPPINES. PARTICIPANTS EXPRESSED HOW INDIVIDUALS AND COMMUNITIES IN POVERTY CAN FOCUS INTERNALLY ON WHAT LITTLE THEY HAVE, BUT THROUGH UNBOUND THEY BEGAN TO SEE THEIR STRENGTHS AND ASSETS. THIS GRATITUDE FOR WHAT THEY HAD AND FOR WHAT WAS SHARED THROUGH UNBOUND SPURRED A DESIRE TO HELP OTHERS, WHETHER FAMILY, FRIENDS OR STRANGERS.
2. PRIDE: A DEEP SENSE OF PRIDE AND PERSONAL ACCOMPLISHMENT CAME FORWARD IN THE MAPS OF BOTH COUNTRIES. IT IS A PRIDE THAT COMES FROM EDUCATIONAL ACCOMPLISHMENTS AND THE ABILITY TO SUSTAIN ONE'S FAMILY. HOWEVER, IT ALSO COMES FROM BEING PART OF, OR ASSOCIATED WITH, THE UNBOUND PROGRAM ITSELF (PHILIPPINES) OR HAVING A SPONSOR (GUATEMALA).
3. EDUCATION: EDUCATION AND ACADEMIC ACHIEVEMENT SHOW UP IN ALL RIPPLE-EFFECT MAPS CREATED IN GUATEMALA AND THE PHILIPPINES; HOWEVER, THEIR POSITIONING AND VALUE DIFFER BETWEEN THE TWO COUNTRIES. GUATEMALANS VIEWED EDUCATION AS A KEY OUTCOME AND MEANS TO THEIR MOST SIGNIFICANT OUTCOMES. ATTAINING AN EDUCATION MEANT GAINING ACCESS TO PROFESSIONAL EMPLOYMENT AND CARING FOR THEIR FAMILIES. IT BROUGHT ABOUT SATISFACTION AND PRIDE. IN THE PHILIPPINES, HOWEVER, ALUMNI EMPHASIZED EDUCATION AS AN END IN ITSELF. HAVING AN EDUCATION WAS THE OUTCOME.

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THE MOST SIGNIFICANT, LONG-TERM OUTCOMES OF THE UNBOUND PROGRAM WERE OVERWHELMINGLY BOTH REAL AND INTANGIBLE. HOUSING AND HEALTH, EDUCATION AND WORK WERE ALL PRESENT IN THE LIVES OF UNBOUND ALUMNI, YET THE CORE OF THE IMPACT REMAINING FOR FORMERLY SPONSORED MEMBERS LIES IN A MORAL, CHARACTER-CENTERED, REFLECTIVE AND GOAL-ORIENTED WORLDVIEW. THIS INTANGIBLE CORE APPEARS TO OFFER A FOUNDATION FOR THE ALUMNI TO CONTINUE TO BUILD THEIR OWN TANGIBLE RIPPLES IN PROVIDING FOR THEIR FAMILIES AND ASSISTING COMMUNITY MEMBERS.

ONE BENEFIT OF THE RIPPLE-EFFECT-MAPPING METHOD, OVER SEPARATE EVALUATIONS OF EACH OUTCOME DOMAIN, IS THAT WE CAN SEE MORE CLEARLY THAT THERE ARE LINKS BETWEEN PHYSICAL AND PSYCHO-SOCIAL-SPIRITUAL DEVELOPMENT. THIS MAKES AN EXCELLENT CASE FOR THE PERSONALIZED ATTENTION, PROGRAM ACTIVITIES AND RELATIONSHIPS THAT COMPLEMENT TANGIBLE SPONSORSHIP BENEFITS. THESE COMPONENTS CAN ALSO BE CALLED BENEFITS.

"THE BEAUTY IS THAT EACH FAMILY CAN CHOOSE WHAT IS NEEDED IN EACH MOMENT," SAID ONE PARTICIPANT IN GUATEMALA. EACH INDIVIDUAL TELLS A DIFFERENT STORY, BUT ALL ARE UNITED IN THEIR EXPERIENCE WITH UNBOUND. SO, WHILE THESE EXPERIENCES DO CAUSE US TO RECOGNIZE THE SIGNIFICANT INFLUENCES OF EXTERNAL FACTORS IN THE LIVES OF INDIVIDUALS, THEY ALSO EMPHASIZE THE REMARKABLE FLEXIBILITY OF THE UNBOUND PROGRAM. IT HAS THE POTENTIAL TO CONTRIBUTE TO AN INDIVIDUAL'S PATH OUT OF POVERTY IN WAYS UNLIKE A STANDARD AID-DISTRIBUTION OR COMMUNITY-BASED DEVELOPMENT APPROACH.

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

AN INDEPENDENT ACCOUNTING FIRM PREPARES THE 990. THE 990 IS THEN REVIEWED BY THE ORGANIZATION'S PRESIDENT/CEO AND ACCOUNTING PERSONNEL. ANY QUESTIONS AND CONCERNS THE ORGANIZATION'S PRESIDENT/CEO AND ACCOUNTING PERSONNEL HAVE ARE ADDRESSED AND ANY CORRECTIONS OR CLARIFICATIONS THAT NEED TO BE MADE ARE MADE. THE 990 IS THEN PROVIDED TO THE FULL BOARD FOR THEIR REVIEW. ANY QUESTIONS AND CONCERNS OF THE BOARD ARE ADDRESSED AND CORRECTIONS OR CLARIFICATIONS ARE MADE PRIOR TO FILING THE 990.

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

ALL BOARD MEMBERS ANNUALLY DISCLOSE THEIR INVOLVEMENT WITH OTHER ORGANIZATIONS, COMMUNITIES, EMPLOYMENT, STAFF, VENDORS OR ANY OTHER ASSOCIATIONS THAT MIGHT POTENTIALLY PRODUCE A CONFLICT, REGARDLESS OF THE LIKELIHOOD OF AN ACTUAL CONFLICT ARISING. NEW BOARD NOMINEES ALSO COMPLETE A DISCLOSURE FORM. WHEN THE BOARD IS TO DECIDE AN ISSUE THAT PRESENTS AN UNAVOIDABLE CONFLICT OF INTEREST FOR A MEMBER, THE MEMBER WITH THE CONFLICT ABSTAINS FROM PARTICIPATION IN BOTH THE DELIBERATION AND VOTE.

ALL EMPLOYEES ANNUALLY SIGN A RECEIPT AND ACKNOWLEDGEMENT OF UNBOUND'S EMPLOYEE MANUAL. THE CODE OF CONDUCT WHICH FORBIDS A CONFLICT OR THE APPEARANCE OF A CONFLICT BETWEEN THE EMPLOYEE'S PERSONAL INTERESTS AND THOSE OF UNBOUND IS PART OF THAT REVIEW. THE EMPLOYEE'S SIGNATURE ACKNOWLEDGES THEIR AGREEMENT TO ADHERE TO THIS CODE AND TO IMMEDIATELY DISCLOSE A SUSPECTED CONFLICT OF INTEREST TO A STAFF DIRECTOR, MEMBER OF THE HUMAN RESOURCES DEPARTMENT OR CONFIDENTIALLY THROUGH UNBOUND'S

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INDEPENDENT REPORTING SERVICE.

FORM 990, PART VI, SECTION B, LINES 15A & 15B

THE COMPENSATION OF THE PRESIDENT/CEO FOR JUNE 2019-JUNE 2020 WAS DETERMINED AT THE JUNE 2019 GOVERNING BOARD OF DIRECTORS MEETING. PRIOR TO THIS DISCUSSION, THE PRESIDENT/CEO AND THE NON-VOTING MEMBERS OF THE BOARD EXCUSED THEMSELVES FROM THE BOARD MEETING. THE VOTING MEMBERS MET WITH THE DIRECTOR OF HUMAN RESOURCES WHO PROVIDED THEM WITH THE FOLLOWING INFORMATION WHICH THEY USED TO DETERMINE THE COMPENSATION AMOUNT.

USING PAYSCALE, WHICH IS AN INDEPENDENT COMPENSATION CONSULTANT SUBSCRIPTION PROGRAM, MARKET DATA RESEARCH WAS REVIEWED BASED ON CURRENT MARKET PAY FOR SIMILAR POSITIONS. OUR PHILOSOPHY IS TO TARGET THE 25TH TO 50TH PERCENTILE OF THE RANGE WHERE THE JOB HAS BEEN MATCHED. IT IS ALSO BASED ON CURRENT MARKET DATA WITHIN THE PROFIT AND NON-PROFIT INDUSTRIES, CONTAINING UP TO 500 EMPLOYEES AND MATCHED ON JOB RESPONSIBILITIES IN THE MARKET PLACE.

THE BOARD CONSIDERED OTHER FACTORS SUCH AS A COMPARISON OF COMPENSATION OF EXECUTIVES FROM SIMILAR SPONSORSHIP ORGANIZATIONS AND A FORMAL EVALUATION OF JOB PERFORMANCE TO DETERMINE THE PRESIDENT/CEO'S JUNE 2018 - JUNE 2019 COMPENSATION.

THE VOTING MEMBERS THEN APPROVED THE ANNUAL SALARY FOR THE PRESIDENT/CEO. SUBSTANTIATION OF THE DECISION OF THE BOARD'S DETERMINATION WAS MAINTAINED BY THE DIRECTOR OF HUMAN RESOURCES.

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THE COMPENSATION OF THE OTHER OFFICERS (TREASURER AND SECRETARY) AND ALL OTHER EMPLOYEES WERE APPROVED BY THEIR RESPECTIVE SUPERVISOR AT UNBOUND. IT WAS BASED ON BOTH A WRITTEN PERFORMANCE EVALUATION AS WELL AS THE ORGANIZATION'S COMPENSATION FRAMEWORK AND PLANNING SYSTEM. COMPENSATION CHANGE DECISIONS ARE PLANNED AND DOCUMENTED IN THE ADP WORKFORCE NOW COMPENSATION MODULE.

FORM 990, PART VI, SECTION C, LINE 19

UNBOUND'S ARTICLES OF INCORPORATION, AUDITED FINANCIAL STATEMENTS, BY-LAWS AND CONFLICT OF INTEREST POLICY ALONG WITH IRS FORMS 1023, 990 AND 990-T ARE AVAILABLE FOR INSPECTION AT OUR OFFICES. UNBOUND'S AUDITED FINANCIAL STATEMENTS AND IRS FORMS 990 AND 990-T ARE POSTED ON OUR WEBSITE (WWW.UNBOUND.ORG). PRINTED COPIES ARE AVAILABLE UPON REQUEST.

FORM 990, PART XI, LINE 9

CHANGE IN UNINSURED ANNUITY OBLIGATIONS \$(18,563)

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ATTACHMENT 1FORM 990, PART VI, LINE 17 - STATES

AL, AK, AR, CA, CO, CT,

FL, GA, HI, IL, KS, KY, MD, MA, MI,

MN, MS, NH, NJ, NM, NY, OH, OK, OR, PA,

RI, SC, TN, UT, VA, WV, WI,

ATTACHMENT 2990, PART VII- COMPENSATION OF THE FIVE HIGHEST PAID IND. CONTRACTORS

<u>NAME AND ADDRESS</u>	<u>DESCRIPTION OF SERVICES</u>	<u>COMPENSATION</u>
TF/BOK-FINANCIAL PO BOX 443 TULSA, OK 74101	MERCHANT SERVICES	955,230.
BOK-FINANCIAL 7500 COLLEGE BLVD., SUITE 1450 OVERLAND PARK, KS 66210	BANKING SERVICES	284,783.
GOOGLE INC. 1600 AMPHITHEATRE PKWY MOUNTAIN VIEW, CA 94043	ADVERTISING	181,722.
AMERICAN EXPRESS 200 VESEY STREET NEW YORK, NY 10285	MERCHANT SERVICES	173,189.
ARADIUS GROUP 4700 F. STREET OMAHA, NE 68117	PRINTING	121,290.

**SCHEDULE R
(Form 990)**

Related Organizations and Unrelated Partnerships

OMB No. 1545-0047

2019

**Open to Public
Inspection**

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

▶ Attach to Form 990.

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

Department of the Treasury
Internal Revenue Service

Name of the organization

UNBOUND

Employer identification number

43-1243999

Part I Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					

Part II Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related tax-exempt organizations during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No
(1) UNBOUND COLOMBIA 901091198 CALLE 50 NO. 65-42 CENTRO CONT MEDELLIN ANTIOQUIA, CO	PRJT SUPPORT	CO	501(C)(3)		UNBOUND	X	
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							

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

Schedule R (Form 990) 2019

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512 - 514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V - UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	
(1)												
(2)												
(3)												
(4)												
(5)												
(6)												
(7)												

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?	
								Yes	No
(1)									
(2)									
(3)									
(4)									
(5)									
(6)									
(7)									

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

Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

	Yes	No
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?		
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity.		X
b Gift, grant, or capital contribution to related organization(s)	X	
c Gift, grant, or capital contribution from related organization(s)		X
d Loans or loan guarantees to or for related organization(s)		X
e Loans or loan guarantees by related organization(s)		X
f Dividends from related organization(s)		X
g Sale of assets to related organization(s)		X
h Purchase of assets from related organization(s)		X
i Exchange of assets with related organization(s)		X
j Lease of facilities, equipment, or other assets to related organization(s)		X
k Lease of facilities, equipment, or other assets from related organization(s)		X
l Performance of services or membership or fundraising solicitations for related organization(s)		X
m Performance of services or membership or fundraising solicitations by related organization(s)		X
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)		X
o Sharing of paid employees with related organization(s)		X
p Reimbursement paid to related organization(s) for expenses.		X
q Reimbursement paid by related organization(s) for expenses		X
r Other transfer of cash or property to related organization(s)		X
s Other transfer of cash or property from related organization(s)		X

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1) UNBOUND COLOMBIA	B	71,500.	CASH
(2)			
(3)			
(4)			
(5)			
(6)			

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

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

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(e) Are all partners section 501(c)(3) organizations?		(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V - UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
				Yes	No			Yes	No		Yes	No	
(1)													
(2)													
(3)													
(4)													
(5)													
(6)													
(7)													
(8)													
(9)													
(10)													
(11)													
(12)													
(13)													
(14)													
(15)													
(16)													

Part VII **Supplemental Information**

Provide additional information for responses to questions on Schedule R. See instructions.
