#### \*\* PUBLIC DISCLOSURE COPY \*\*

Return of Organization Exempt From Income Tax

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

Department of the Treasury

▶ Do not enter social security numbers on this form as it may be made public.

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

**Open to Public** 

OMB No. 1545-0047

2022 A For the 2021 calendar year, or tax year beginning OCT 1, 2021 and ending SEP Check if applicable: C Name of organization D Employer identification number INTERNATIONAL FOUNDATION FOR ELECTORAL Address change SYSTEMS Name change 52-1527835 Doing business as Initial return Number and street (or P.O. box if mail is not delivered to street address) E Telephone number Room/suite Final return/ termin-ated 202-350-6764 2011 CRYSTAL DR FL 10 86,728,936. City or town, state or province, country, and ZIP or foreign postal code G Gross receipts \$ Amended ARLINGTON, VA 22202-3709 H(a) Is this a group return Applica-tion pending F Name and address of principal officer: ANTHONY BANBURY Yes X No for subordinates? SAME AS C ABOVE **H(b)** Are all subordinates included? Yes Tax-exempt status: X 501(c)(3) 501(c) ( ) ◀ (insert no.) 4947(a)(1) or 527 If "No," attach a list. See instructions J Website: ► WWW.IFES.ORG **H(c)** Group exemption number ▶ K Form of organization: X Corporation Other > L Year of formation: 1987 M State of legal domicile: DC Trust Association Part I Summary Briefly describe the organization's mission or most significant activities: SEE SCHEDULE O **Activities & Governance** if the organization discontinued its operations or disposed of more than 25% of its net assets. 25 3 Number of voting members of the governing body (Part VI, line 1a) 25 Number of independent voting members of the governing body (Part VI, line 1b) 4 213 Total number of individuals employed in calendar year 2021 (Part V, line 2a) 5 Total number of volunteers (estimate if necessary) 6 7 a Total unrelated business revenue from Part VIII, column (C), line 12 **b** Net unrelated business taxable income from Form 990-T, Part I, line 11 7b 0. **Prior Year Current Year** 76,376,598. 86,640,396. Contributions and grants (Part VIII, line 1h) 8 0. 0. Program service revenue (Part VIII, line 2g) 208. 8,341. Investment income (Part VIII, column (A), lines 3, 4, and 7d) 10 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 0. 80,199. 11 76,376,806. 86,728,936. Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 12 3,207,058. 4,888,941 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 0. 0. 14 Benefits paid to or for members (Part IX, column (A), line 4) 33,769,966. Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 40,350,738. 15 Expenses 16a Professional fundraising fees (Part IX, column (A), line 11e) **b** Total fundraising expenses (Part IX, column (D), line 25) 39,052,611. 41,154,979. 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 76,029,635. 86,394,658. 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 347,171. 334,278. Revenue less expenses. Subtract line 18 from line 12 Beginning of Current Year End of Year 5 29,872,159. 27,072,489. Total assets (Part X, line 16) 22,216,729 25,350,677. 21 Total liabilities (Part X, line 26) 三年 4,521,482. 4,855,760 22 Net assets or fund balances. Subtract line 21 from line 20 ..... 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. Signature of officer Date Sign ANTHONY BANBURY, PRESIDENT & CEO Here Type or print name and title Date PTIN Check Print/Type preparer's name Preparer's signature 08/14/23 self-employed P02014004 AMANDA E. WATERHOUSE Paid Firm's EIN  $\blacktriangleright$  42-0714325 Firm's name ► RSM US LLP Preparer Firm's address ▶ 230 N ELM ST, STE 1100 Use Only Phone no. 336-272-4551 GREENSBORO, NC 27401

No

X Yes

May the IRS discuss this return with the preparer shown above? See instructions

Par	t III Statement of Program Service Accomplishments
	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission:
	IFES IS DEDICATED TO EXTENDING DEMOCRACY WORLDWIDE THROUGH PROVIDING
	TECHNICAL ASSISTANCE IN VOTER EDUCATION, ELECTION ADMINISTRATION,
	CIVIL SOCIETY, GOVERNANCE, RULE OF LAW AND POLITICAL PROCESSES.
2	Did the organization undertake any significant program services during the year which were not listed on the
	prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes X No
	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and
	revenue, if any, for each program service reported.
4a	(Code:) (Expenses \$ 7,622,497. including grants of \$) (Revenue \$)
	THE LIBYA ELECTIONS AND LEGISLATIVE STRENGTHENING ACTIVITY PROGRAM
	FOCUSES ON INCREASING THE CAPACITY OF THE COUNTRY'S ELECTION MANAGEMENT
	BODIES AND OTHER STAKEHOLDERS INVOLVED IN THE COUNTRY'S POLITICAL TRANSITION AND ELECTORAL PROCESSES TO EFFECTIVELY MANAGE AND CONDUCT
	ELECTIONS THAT ARE CONSIDERED TRANSPARENT AND CREDIBLE, AND TO ENHANCE
	CIVIC ENGAGEMENT AND PARTICIPATION IN LIBYA'S POLITICAL TRANSITION.
	CIVIC ENGAGEMENT AND PARTICIPATION IN DIBIA'S POLITICAL TRANSITION.
4b	(Code:) (Expenses \$ 6,389,916. including grants of \$) (Revenue \$)
	THE INTERNATIONAL FOUNDATION FOR ELECTORAL SYSTEMS (IFES) HAS BEEN
	IMPLEMENTING THE STRENGTHENING ADVANCES IN GOVERNANCE AND ELECTIONS
	(SAGE) PROJECT IN PAPUA NEW GUINEA. IFES ADVISES THE PNGEC AS IT
	COMPLETES POST-ELECTION ACTIVITIES, PREPARES FOR PRE-ELECTION
	OPERATIONAL PLANNING AND VOTER ENROLMENT, ENGAGES IN THE ELECTORAL
	REFORM PROCESS, AND IMPLEMENTS CROSS-CUTTING ACTIVITIES AIMED AT
	EXTERNAL STAKEHOLDER ENGAGEMENT AND INTERNAL PROFESSIONAL DEVELOPMENT.
	(Code: ) (Expenses \$ 5,734,743 • including grants of \$ ) (Revenue \$ )
4C	(Code:) (Expenses \$5, 734, 743. including grants of \$) (Revenue \$)  KESP'S OVERALL OBJECTIVE IS TO PROVIDE TECHNICAL ASSISTANCE TO KEY
	INSTITUTIONS SUCH AS THE INDEPENDENT ELECTORAL AND BOUNDARIES
	COMMISSION (IEBC) AND OTHER CRITICAL STAKEHOLDERS, AND TO SUPPORT
	INDEPENDENT OVERSIGHT OF THE ELECTORAL PROCESS.
	TIDELETINE OF THE PROPERTY OF
4d	Other program services (Describe on Schedule O.)
	(Expenses \$ 56,243,508 · including grants of \$ 4,888,941 · ) (Revenue \$ 80,199 · )
4e	Total program service expenses ► 75,990,664.
	Form <b>990</b> (2021)

INTERNATIONAL FOUNDATION FOR ELECTORAL

# Form 990 (2021) SYSTEMS Part IV Checklist of Required Schedules

Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(n) election in effect during the tax year? If "Yes," complete Schedule C, Part II 18 the organization ascent on 501(e)(4), 501(c)(6), 5				Yes	No
2 Is the organization required to complete Schedule & Schedule of Contributors? See instructions Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? #*.*Yes**, complete Schedule C, Part #*.  3 Is the organization account in a contributor of the campaign activities on behalf of or in opposition to candidates for public office? #*.*Yes**, complete Schedule C, Part #*.  5 Is the organization as section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Rev Price, 99(a) #*.  6 Did the organization assessments as defined in Rev Price, 99(a) #*.  7 Did the organization annual an	1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
3   John the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? "Press," complete Schedule C, Part II   4   3   3					_
public office? If '19's, 'complete Schedule C, Part I   Section 501(\$\text{in}\) complete Schedule C, Part II   Is the organization section \$01(\$\text{in}\) (\$\text{in}\)	2		2	<u> X</u>	
4 Section S01(c)3) organizations. Did the organization engage in lobbying activities, or have a section 501(t) election in effect during the tax year? If "Yes," complete Schedule C, Part II is the organization a section 501(c)(d), 501(c)(d), organization that receives membership dues, assessments, or similar amounts as defined in Rev. Proc. 98:197 If "Yes," complete Schedule C, Part II is Did the organization market any donor advised funds or any similar truds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts for which donors have the right to provide advice on the distribution or investment or accounts for the right of the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	3				l
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s the organization a section SO1(c)(4), SO1(c)(5), or SO1(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in five, Proc. 98-197 if "Yes," complete Schedule C, Part III Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? if "Yes," complete Schedule D, Part II Did the organization reserve in children easement, including assements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II Schedule D, Part II Times," complete Schedule D, Part II Times, "complete Schedule D, Part II Times," complete Schedule D, Part II Times," complete Schedule D, Part IV Times, "complete Schedule D, Part IV Times," complete Schedule D, Part IV Times," complete Schedule D, Part IV Times, "complete Schedule D, Part IV Times," complete Schedule D, Part IV Times, "complete Schedule D, Part IV Times," complete Schedule D, Part IV Times, "complete Schedule D, Part IV Times," complete Schedule D, Part IV Times, "complete Schedule D, Part IV Times," complete Schedule D, Part IV Times, "complete Schedule D, Part IV Times," complete Schedule D, Part IV Times, "complete Schedule D, Part IV	4				l
similar amounts as defined in Rev. Proc. 98-197 if "Yes," complete Schedule C, Part III  5 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II  7 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part II  8 Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services?  9 If "Yes," complete Schedule D, Part IV  10 Did the organization directly or though a related organization, hold assets in donor-restricted endowments or in quasi endowments? If "Yes," complete Schedule D, Part VI  10 Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VII  11 If the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VIII  12 Did the organization report an amount for investments - other securities in Part X, line 10? If "Yes," complete Schedule D, Part VIII  13 Did the organization report an amount for orive seasestin Flart X, line 16? If "Yes," complete Schedule D, Part VIII  14 Did the organization report an amount for orive seasestin Flart X, line 16 and 17 line 18 lin			4		X
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# "Yes," complete Schedule D, Part IV  10 Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? "I'ves," complete Schedule D, Part V  11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X, as applicable.  a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? # "Yes," complete Schedule D, Part VI  b Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? # "Yes," complete Schedule D, Part VII  c Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? # "Yes," complete Schedule D, Part VIII  d Did the organization report an amount for other liabilities in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? # "Yes," complete Schedule D, Part X III  d Did the organization report an amount for other liabilities in Part X, line 25? # "Yes," complete Schedule D, Part X  11e Z  2 Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's separate or consolidated financial statements for the tax year? # "Yes," complete Schedule D, Part X I and XII  2 Did the organization included in consolidated, independent audited financial statements for the tax year? # "Yes," complete Schedule D, Part X I and XII  b Was the organization included in consolidated, independent audited financial statements for the tax year?  If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts X and XII is optional  13 Is the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States	9				
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or in quasi endowments? If "Yes," complete Schedule D, Part V 1  11 if the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X, as applicable.  a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI 1  b Did the organization report an amount for investments - other securities in Part X, line 10? If "Yes," complete Schedule D, Part VII 1  c Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 1  d Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 1  d Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 1  d Did the organization is separate or consolidated financial statements for the tax year include a flootonte that addresses the organization is separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Part X 111 X 112  Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Part X II and XII 1  b Was the organization as school described in section 170(b)(T)(A)(II) If "Yes," complete Schedule D, Parts XI and XII is optional 1  12a X 1  Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts II and IV 1  15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of gargate grants or other assistance to			9		X
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b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV.  15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV.  16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV.  16 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions.  17 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1 to and 8a? If "Yes," complete Schedule G, Part II.  18 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III.  19 Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H.  20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H.  20a Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II.  21 X				v	X
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domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I. Parts I and II			200		
	۷۱		04	x	
		domestic government on Part IA, Column (A), line 19 IT "Yes," complete Schedule I, Parts I and II			(0.0.5.11

INTERNATIONAL FOUNDATION FOR ELECTORAL SYSTEMS

52-1527835 Page 4 Form 990 (2021) Part IV Checklist of Required Schedules (continued) Yes No Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III Х 22 23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes." complete Х 23 Schedule J 24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Х Schedule K. If "No," go to line 25a 24a **b** Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 24b Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? 24c d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 24d 25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I 25a Х b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Х 25b 26 Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% Х 26 controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III ....... Х 27 28 Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions): A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes." complete Schedule L, Part IV 28a **b** A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV 28b A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If 28c "Yes," complete Schedule L, Part IV ...... 29 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M 30 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I Х 31 31 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes." complete 32 Х Did the organization own 100% of an entity disregarded as separate from the organization under Regulations Х sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I 33 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and 34 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? 35a b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 35b Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? Х If "Yes," complete Schedule R, Part V, line 2 36 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI Х 37 Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? Х Note: All Form 990 filers are required to complete Schedule O 38 Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V X Yes No 78 **1a** Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 1a 0 Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable

Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming

(gambling) winnings to prize winners?

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

					Yes	No		
<b>2</b> a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,							
	filed for the calendar year ending with or within the year covered by this return	2a	213					
b	If at least one is reported on line 2a, did the organization file all required federal employment tax return			2b	X			
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. See instructions	3				37		
				3a		X		
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule			3b				
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other a		•	4-	Х			
h	financial account in a foreign country (such as a bank account, securities account, or other financial a If "Yes," enter the name of the foreign country <b>SEE SCHEDULE</b> O	ccoun	9?	4a	72			
b	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Ac	count	s (FRAR)					
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?							
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction.			_5a_ 5b		X		
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?			5c				
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the							
	any contributions that were not tax deductible as charitable contributions?			6a		Х		
b	If "Yes," did the organization include with every solicitation an express statement that such contribution							
	were not tax deductible?			6b				
7	Organizations that may receive deductible contributions under section 170(c).							
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and ser	vices pr	rovided to the payor?	7a		Х		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b				
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	s requ	ired					
	to file Form 8282?			7c		X		
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d						
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit co		?	7e		X		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contra			7f		X		
g								
h	3							
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the							
0	sponsoring organization have excess business holdings at any time during the year?							
9 a	Did the second control of the second control of the first second control of the second c							
b				9a 9b				
10	Section 501(c)(7) organizations. Enter:			0.0				
а	Initiation fees and capital contributions included on Part VIII, line 12	10a						
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b						
11	Section 501(c)(12) organizations. Enter:							
а	Gross income from members or shareholders	11a						
b	Gross income from other sources. (Do not net amounts due or paid to other sources against							
	amounts due or received from them.)	11b						
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form	l I	•	12a				
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b						
13	Section 501(c)(29) qualified nonprofit health insurance issuers.							
а	Is the organization licensed to issue qualified health plans in more than one state?			13a				
<b>L</b>	<b>Note:</b> See the instructions for additional information the organization must report on Schedule O.							
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b						
c	Enter the amount of reserves on hand	13c						
14a				14a		х		
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedul			14b				
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuner							
	excess parachute payment(s) during the year?			15		x		
	If "Yes," see the instructions and file Form 4720, Schedule N.							
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment	incom	ne?	16		Х		
	If "Yes," complete Form 4720, Schedule O.							
17	Section 501(c)(21) organizations. Did the trust, any disqualified person, or mine operator engage in	any						
	activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953?			17				
	If "Yes," complete Form 6069.							

Form 990 (2021)

SYSTEMS

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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.

800	tion A. Coverning Rody and Management			Δ
Sec	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year			
	If there are material differences in voting rights among members of the governing body, or if the governing			
	body delegated broad authority to an executive committee or similar committee, explain on Schedule O.			
b	Enter the number of voting members included on line 1a, above, who are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			
	officer, director, trustee, or key employee?	2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors, trustees, or key employees to a management company or other person?	3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		Х
6	Did the organization have members or stockholders?	6		Х
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or			
	more members of the governing body?	7a		Х
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			
	persons other than the governing body?	7b		х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	Х	
h	Each committee with authority to act on behalf of the governing body?	8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the	- 00		
3	organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9		х
Sec	tion R. Policies The Control Brown and it control to the flames and addresses on Schedule O	9		21
	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)		Yes	No
100	Did the organization have local chapters, branches, or affiliates?	10a	163	X
		IUa		-23
D	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,	10b		
44-	and branches to ensure their operations are consistent with the organization's exempt purposes?		Х	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Λ	
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990.	40-	X	
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe	١	v	
	on Schedule O how this was done	12c	X	
13	Did the organization have a written whistleblower policy?	13	X	
14	Did the organization have a written document retention and destruction policy?	14	Х	
15	Did the process for determining compensation of the following persons include a review and approval by independent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	X	
b	Other officers or key employees of the organization	15b	Х	
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
	taxable entity during the year?	16a		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's			
	exempt status with respect to such arrangements?	16b		
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ►CA, CO, CT, DC, FL, IL, MD, NY, OH	, PA	RI,	,VA
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)	availal	ole
	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	l financ	cial	
	statements available to the public during the tax year.			
20	State the name, address, and telephone number of the person who possesses the organization's books and records			
	MICHAEL MEENAN, CFO - 202-350-6764			
	2011 CRYSTAL DR FL 10, ARLINGTON, VA 22202-3709			

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

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

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

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

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

Check this box if neither the organization n  (A)	(B)	Jiga	. 11201			.pci1	Juic	(D)	(E)	(F)
(A) Name and title			<b>(C)</b> Position			Reportable	( <b>c</b> ) Reportable	(F) Estimated		
ivallie allu title	Average hours per				ck more than one person is both an			compensation	compensation	amount of
	week		officer and a direc					from	from related	other
	(list any	ctor						the	organizations	compensation
	hours for	r dire				ted		organization	(W-2/1099-MISC/	from the
	related	stee o	ruste			ensa		(W-2/1099-MISC/	1099-NEC)	organization
	organizations	al tru	onal t		oloye	comp		1099-NEC)		and related
	below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			organizations
(1) PETER ERBEN	40.00	드	드	Ð	3	E E	윤			
COUNTRY DIRECTOR	40.00	1				x		428,797.	0.	19,399.
(2) ANTHONY BANBURY	40.00							22077570		
PRESIDENT & CEO		1		Х				315,035.	0.	47,295.
(3) WILLIAM ROWLAND	40.00							,	-	,
COUNTRY DIRECTOR						Х		296,114.	0.	19,399.
(4) PAUL GEURIN	40.00							-		-
COUNTRY DIRECTOR						Х		291,026.	0.	19,399.
(5) GENET MENELIK	40.00									
DEPUTY COUNTRY DIRECTOR (UNTIL 1/202						X		291,337.	0.	15,780.
(6) ANNA WIKTOROWSKA	40.00									
COUNTRY DIRECTOR						X		294,641.	0.	8,212.
(7) MICHAEL MEENAN	40.00									
CFO				X				231,832.	0.	45,727.
(8) CHAD VICKERY	40.00								_	
VP, GLOBAL STRATEGY & TECH LEAD				X				222,133.	0.	44,090.
(9) N CATHERINE BARNES	40.00	1								
VP, GLOBAL GROWTH & OUTREACH				X				237,459.	0.	28,417.
(10) MICHAEL SVETLIK	40.00	-						225 262		
VP, PROGRAMS (UNTIL 9/2022)	10.00			X				227,362.	0.	24,434.
(11) KATHERINE ELLENA	40.00							4== = 44		04 04 =
VP, PROGRAMS	1 00			X				177,541.	0.	21,915.
(12) J. KENNETH BLACKWELL	1.00	ļ							•	
CO-CHAIRMAN, DIRECTOR	1 00	Х						0.	0.	0.
(13) WILLIAM C. EACHO	1.00								_	_
CO-CHAIRMAN, DIRECTOR	1 00	Х						0.	0.	0.
(14) JUNE L. DEHART	1.00	٦,							<u> </u>	_
VICE CHAIRMAN, DIRECTOR	1 00	X	Н					0.	0.	0.
(15) THEODORE SEDGWICK	1.00							_	_	_
VICE CHAIRMAN, DIRECTOR	1 00	Х						0.	0.	0 .
(16) GARVIN BROWN	1.00	Х						0.	0.	^
TREASURER, DIRECTOR (17) RANDAL C. TEAGUE	1.00	^	$\vdash\vdash$					<b>U</b> •	U •	0.
	1.00	Х						0.	0.	0.
SECRETARY, DIRECTOR	l	Λ						ı	0.	Form <b>990</b> (202)

SYSTEMS 52-1527835 Page 8 Form 990 (2021) Part VII | Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued) (A) (B) (C) (D) (E) (F) Position Average Reportable Name and title Reportable Estimated (do not check more than one hours per compensation compensation amount of box, unless person is both an officer and a director/trustee) week from from related other (list any organizations compensation ndividual trustee or director the hours for organization (W-2/1099-MISC/ from the lighest compensated related nstitutional trustee (W-2/1099-MISC/ 1099-NEC) organization organizations ey employee 1099-NEC) and related below organizations line) (18) THOMAS A. DEVINE 1.00 DIRECTOR Х 0. 0. 0. (19) DONALD R. SWEITZER 1.00 X 0. 0. 0. DIRECTOR 1.00 (20) KENNETH A. CUTSHAW X 0. DIRECTOR 0. 0. (21) IRENA HADZIABDIC 1.00 DIRECTOR X 0. 0. 0. (22) STENY HOYER 1.00 DIRECTOR Х 0. 0. 0. (23) WILLIAM J. HYBL 1.00 DIRECTOR Х 0. 0. 0. (24) TOM MCDONALD 1.00 Х 0. 0. 0. DIRECTOR (25) M. PETER MCPHERSON 1.00 0. DIRECTOR 0. 0. (26) DENISE L. NAPPIER 1.00 DIRECTOR (UNTIL 12/2021) 0 0. 0. 3,013,277. 294,067. 0. 1b Subtotal 0. 0. c Total from continuation sheets to Part VII, Section A 3.013.277. 0. 294.067. Total (add lines 1b and 1c) Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable 64 compensation from the organization Yes No

Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on Х 3 line 1a? If "Yes," complete Schedule J for such individual For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual Х 4

Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes." complete Schedule J for such person

**Section B. Independent Contractors** 

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

(A) Name and business address	(B) Description of services	(C) Compensation
RILEY RISK INC, 2011 CRYSTAL DRIVE STE		
400, ARLINGTON , VA 22202	SECURITY SERVICES	462,770.
GARDAWORLD, 5870 TRINITY PARKWAY #300,		
CENTREVILLE, VA 20120	SECURITY SERVICES	329,775.
CAKTUS CONSULTING GROUP		
108 MORRIS STREET SUITE 2, DURHAM, NC 27701	HOSTING FEES	238,462.
BLENDERBOX INC, 228 PARK AVENUE S STE		
92796, NEW YORK, NY 10003	WEBSITE DESIGN	234,125.
LOVE FRANKIE LTD, 55 PHAHONYOTHIN ALLEY,		
BANGKOK, KHWAENG SAMSEN NA KHET PHAYA	CONSULTING	201,672.
Total number of independent contractors (including but not limited to those listed	d above) who received more than	
\$100,000 of compensation from the organization   19		

Х

Form 990 SYSTEMS 52-1527835

Form 990 SYSTEM	.ప								22-132	7033
Part VII   Section A. Officers, Directors	s, Trustees, Key Er	nplo	yee	s, ar	nd H	lighe	est (	Compensated Employ	ees (continued)	
(A)	(B)			(C				(D)	(E)	(F)
Name and title Average				Posi				Reportable	Reportable	Estimated
Trains and the	hours	(cl		all t			ly)	compensation	compensation	amount of
	per	(	· · · ·				,,, 	from	from related	other
	week					99/		the	organizations	compensation
	(list any	ctor				nploy		organization	(W-2/1099-MISC)	from the
	hours for	rdire				ed en		(W-2/1099-MISC)	,	organization
	related	tee o	ustee			ensat				and related
	organizations	Individual trustee or director	Institutional trustee		Key employee	Highest compensated employee				organizations
	below	vidua	itutio	Officer	emp	hesto	Former			
	line)	Ind	Inst	0#!	Key	Hig	Fon			
(27) ANDRES PASTRANA	1.00									
DIRECTOR		Х						0.	0.	0 .
(28) ROB PORTMAN	1.00									
DIRECTOR		х						0.	0.	0 .
(29) DANIEL F. RUNDE	1.00	-25						•	•	
DIRECTOR	1.00	Х						0.	0.	0 .
	1 00	Λ		$\vdash$				0.	0.	U .
(30) FRANK J. DONATELLI	1.00									•
DIRECTOR		Х						0.	0.	0
(31) ROB NAROBS	1.00	1							_	_
DIRECTOR (UNTIL 12/2021)		Х						0.	0.	0 .
(32) JUDITH KELLY	1.00									
DIRECTOR		X						0.	0.	0 .
(33) MARGOT WALLSTROM	1.00									
DIRECTOR		Х						0.	0.	0 .
(34) MARGARET BIGGS	1.00			Н						
DIRECTOR	1.00	х						0.	0.	0 .
	1.00			$\vdash$				•	0.	0
(35) CHARLES DOLAN, JR	1.00	٠,								
DIRECTOR	1 00	X						0.	0.	0
(36) ATTAHIRU MUHAMMADU JEGA	1.00									
DIRECTOR		Х		$\sqcup$				0.	0.	0
(37) GREGORI LEBEDEV	1.00									
DIRECTOR		Х						0.	0.	0 .
(38) SARAH TINSLEY	1.00									
DIRECTOR		X						0.	0.	0 .
		1								
		1								
		-								
				$\vdash$						
		_								
		1								
				H						
		1								
				$\vdash$						
		1					ĺ			
							<u> </u>	-		
Total to Part VII, Section A, line 1c										
	<del></del>									

Form 990 (2021) **Part VIII** S

Statement of Revenue

		Check if Schedule O contains a response of	or note to any line	e in this Part VIII			
				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	( <b>D</b> ) Revenue excluded from tax under sections 512 - 514
လ လ	1 a	a Federated campaigns 1a					
ant		Membership dues 1b					
2, 5		Fundraising events 1c					
ifts Ir A		d Related organizations 1d					
nij.		Government grants (contributions) 1e	59,131,847.				
Sir		All other contributions, gifts, grants, and	, ,				
outi her	-	similar amounts not included above <b>1f</b>	27,508,549.				
ÖĔ		Noncash contributions included in lines 1a-1f					
Contributions, Gifts, Grants and Other Similar Amounts	_	Total. Add lines 1a-1f	▶	86,640,396.			
<u> </u>			Business Code				
o l	2 a	ı					
ķ	- k						
Program Service Revenue							
am							
Be	•						
Pro	f	All other program service revenue					
		Total. Add lines 2a-2f					
	3	Investment income (including dividends, interes					
		other similar amounts)		8,341.			8,341.
	4	Income from investment of tax-exempt bond pr					
	5	Royalties					
		(i) Real	(ii) Personal				
	6 a	Gross rents 6a					
	k	Less: rental expenses 6b					
		Rental income or (loss) 6c					
	(	Net rental income or (loss)					
	7 a	Gross amount from sales of (i) Securities	(ii) Other				
		assets other than inventory 7a					
	k	Less: cost or other basis					
e		and sales expenses					
/en	(	Gain or (loss) 7c					
Re	(	d Net gain or (loss)					
ther Revenue	8 8	Gross income from fundraising events (not including \$ of					
0		contributions reported on line 1c). See					
		Part IV, line 188a					
	ŀ	Less: direct expenses 8b					
		Net income or (loss) from fundraising events	<b>•</b>				
		a Gross income from gaming activities. See					
		Part IV, line 199a					
	ŀ	Less: direct expenses 9b					
		Net income or (loss) from gaming activities					
		Gross sales of inventory, less returns	,				
		and allowances10a					
	k	Less: cost of goods sold 10b					
		Net income or (loss) from sales of inventory					
		, ,	Business Code				
Miscellaneous Revenue	11 a	OTHER REVENUE	900099	80,199.	80,199.		
ine Due	k			•	•		
ella							
Si		d All other revenue					
Σ	•	e Total. Add lines 11a-11d		80,199.			
		Total revenue. See instructions		86,728,936.	80,199.	0.	8,341.

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INTERNATIONAL FOUNDATION FOR ELECTORAL SYSTEMS

Form 990 (2021)

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 (**D**) Fundraising (C) Management and general expenses Do not include amounts reported on lines 6b. Program service expenses Total expenses expenses 7b, 8b, 9b, and 10b of Part VIII. Grants and other assistance to domestic organizations 1,083,276. 1,083,276. and domestic governments. See Part IV, line 21 Grants and other assistance to domestic individuals. See Part IV, line 22 Grants and other assistance to foreign organizations, foreign governments, and foreign 3,805,665. individuals. See Part IV, lines 15 and 16 ...... 3,805,665. Benefits paid to or for members Compensation of current officers, directors, 1,129,056. 1,623,239. 494,183. trustees, and key employees ..... Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Other salaries and wages 29,900,714. 25,117,443. 4,783,271. 7 Pension plan accruals and contributions (include 1,016,770. 865,762. 151,008. section 401(k) and 403(b) employer contributions)  $6,375,\overline{313}$ 1,037,886. 5,337,427. Other employee benefits 9 1,434,702. 1,196,310. 238,392. 10 Payroll taxes 11 Fees for services (nonemployees): Management 470,865. 407,051. 63,814. Legal 249,091. 95,669. 153,422. Accounting Lobbying Professional fundraising services. See Part IV, line 17 Investment management fees Other. (If line 11g amount exceeds 10% of line 25, 13,487,398. 1,373,018. 26,228. column (A), amount, list line 11g expenses on Sch O.) 14,886,644. Advertising and promotion 12 1,276,644. 519,024. 736,616. 21,004. Office expenses 13 Information technology 14 Royalties 15 1,802,087. 1,517,218. 284,869. 16 Occupancy 4,813,487. 4,511,959. 301,260. 268. 17 Travel Payments of travel or entertainment expenses 18 for any federal, state, or local public officials Conferences, conventions, and meetings 19 20 Payments to affiliates 21 294,303. 245,401. 48,902. Depreciation, depletion, and amortization 22 492,362. 410,550. 81,812. 23 Other expenses. Itemize expenses not covered 24 above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.) 6,318,644. 6,066,167. 165,641. 86,836. SEMINARS AND TRAINING 4,240,977. SUBRECIPIENTS 4,240,977. 0. 0. 2,959,512. 2,957,678. 1,834.FIELD OFFICE EXPENSE 0. d COMMODITIES 1,669,923. 1,669,923. 0. 1,680,440. 1,326,710. 353,730. e All other expenses \_ 75,990,664. 134,336. 86,394,658. 10,269,658. Total functional expenses. Add lines 1 through 24e 25 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here if following SOP 98-2 (ASC 958-720)

Pal	rt X	Balance Sneet					
		Check if Schedule O contains a response or note	to an	y line in this Part X			
					<b>(A)</b> Beginning of year		<b>(B)</b> End of year
	1	Cash - non-interest-bearing	188.	1	188.		
	2	Savings and temporary cash investments			20,712,046.	2	14,501,654.
	3	Pledges and grants receivable, net	5,046,005.	3	8,516,158.		
	4	Accounts receivable, net		4			
	5	Loans and other receivables from any current or					
		trustee, key employee, creator or founder, substa					
		controlled entity or family member of any of these	e perso	ons		5	
	6	Loans and other receivables from other disqualifi					
		under section 4958(f)(1)), and persons described	in sec	tion 4958(c)(3)(B)		6	
ţ	7	Notes and loans receivable, net				7	
Assets	8	Inventories for sale or use				8	
Ř	9	Prepaid expenses and deferred charges			940,018.	9	779,685.
	10a	Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D	10a	5,688,515.	A 445 545		0.454.040
	b				2,147,747.	10c	2,174,910.
	11	Investments - publicly traded securities		11			
	12	Investments - other securities. See Part IV, line 1		12			
	13	Investments - program-related. See Part IV, line 1				13	
	14	Intangible assets		1 006 155	14	1 000 004	
	15	Other assets. See Part IV, line 11	1,026,155. 29,872,159.	15	1,099,894. 27,072,489.		
	16	Total assets. Add lines 1 through 15 (must equa	8,369,693.	16	9,363,097.		
	17	Accounts payable and accrued expenses	0,309,093.	17	9,303,097.		
	18	Grants payable	ı	13,381,088.	18 19	9,439,945.	
	19 20	Deferred revenue			13,301,000.	20	J, 43J, J43•
	21	Tax-exempt bond liabilities  Escrow or custodial account liability. Complete F				21	
	22	Loans and other payables to any current or former				21	
Liabilities	~~	trustee, key employee, creator or founder, substa					
i		controlled entity or family member of any of these		T I		22	
Lia	23	Secured mortgages and notes payable to unrelate				23	
	24	Unsecured notes and loans payable to unrelated				24	
	25	Other liabilities (including federal income tax, pay					
		parties, and other liabilities not included on lines					
		of Schedule D	,	······ [	3,599,896.	25	3,413,687.
	26	<b>=</b>			25,350,677.		22,216,729.
		Organizations that follow FASB ASC 958, chec					
Ses		and complete lines 27, 28, 32, and 33.					
anc	27	Net assets without donor restrictions			4,090,795.	27	4,444,169. 411,591.
Ba	28	Net assets with donor restrictions			430,687.	28	411,591.
nd		Organizations that do not follow FASB ASC 95	8, che	eck here 🕨 🗌			
Ę		and complete lines 29 through 33.					
S	29	Capital stock or trust principal, or current funds				29	
set	30	Paid-in or capital surplus, or land, building, or equ				30	
Net Assets or Fund Balances	31	Retained earnings, endowment, accumulated inc				31	
Set	32	Total net assets or fund balances			4,521,482.	32	4,855,760.
	33	Total liabilities and net assets/fund balances	<u></u>		29,872,159.	33	27,072,489.
							Form 990

## INTERNATIONAL FOUNDATION FOR ELECTORAL

Form 990 (2021) SYSTEMS 52-1527835 Page **12** 

Pa	T XI Reconciliation of Net Assets								
	Check if Schedule O contains a response or note to any line in this Part XI	·····							
1	Total revenue (must equal Part VIII, column (A), line 12)	1	86,72	8 9	36.				
		2							
2	Total expenses (must equal Part IX, column (A), line 25)	224 270							
3	Revenue less expenses. Subtract line 2 from line 1		4,52						
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	4,54	1,4	04.				
5	Net unrealized gains (losses) on investments	5							
6	Donated services and use of facilities	6							
7	Investment expenses	7							
8	Prior period adjustments	8			0.				
9 Other changes in net assets or fund balances (explain on Schedule O) 9									
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,								
	column (B))	10	4,85	<u>5,7</u>	<u>60.</u>				
Pa	t XII Financial Statements and Reporting								
	Check if Schedule O contains a response or note to any line in this Part XII								
				Yes	No				
1	Accounting method used to prepare the Form 990: Cash X Accrual Other		_						
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule	Ο.							
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		<u> </u>				
	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?		2b	X					
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate								
	consolidated basis, or both:								
	X Separate basis Consolidated basis Both consolidated and separate basis								
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	audit,							
	review, or compilation of its financial statements and selection of an independent accountant?		2c	Х					
	If the organization changed either its oversight process or selection process during the tax year, explain on Scho	edule 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?	-	За	X					
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	ed audit							
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b	X	1				

Form **990** (2021)

#### **SCHEDULE A**

(Form 990)

Total

Department of the Treasury Internal Revenue Service

Name of the organization

### **Public Charity Status and Public Support**

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

Attach to Form 990 or Form 990-EZ.

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

INTERNATIONAL FOUNDATION FOR ELECTORAL

OMB No. 1545-0047

**Employer identification number** 

Open to Public

SYSTEMS 52-1527835 Reason for Public Charity Status. (All organizations must complete this part.) See instructions. Part I The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). X An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or 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.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 11 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 on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. 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. 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. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations Provide the following information about the supported organization(s). (i) Name of supported (ii) EIN (iii) Type of organization (v) Amount of monetary (vi) Amount of other your governing document? (described on lines 1-10 organization support (see instructions) support (see instructions) No above (see instructions))

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#### 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.)

Sec	ction A. Public Support	,		,			_
Cale	ndar year (or fiscal year beginning in)	(a) 2017	<b>(b)</b> 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	<u>54192365.</u>	60603218.	63422968.	76376598.	86640396.	341235545
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge	E 410006	60602010	62400060	76276500	0.6.6.4.0.2.0.6	241025545
	Total. Add lines 1 through 3	54192365.	60603218.	63422968.	76376598.	86640396.	341235545
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11, column (f)						
_	· · · · · · · · · · · · · · · · · · ·						341235545
	Public support. Subtract line 5 from line 4.						D41233343
	ndar year (or fiscal year beginning in)	(a) 2017	<b>(b)</b> 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
	Amounts from line 4	54192365.	60603218.	63422968.	76376598.	86640396.	341235545
	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources	21,923.	7,232.	2,190.	208.	8,341.	39,894.
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI.)	55,337.	61,054.	18,065.		80,199.	214,655.
11	<b>Total support.</b> Add lines 7 through 10						341490094
12	•	•	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			12	
13	First 5 years. If the Form 990 is for the		rst, second, third,	fourth, or fifth tax	year as a section 5	601(c)(3)	. $\square$
<u></u>	organization, check this box and sto						<b>&gt;</b>
	ction C. Computation of Publi			(0)		T 44 T	99.93 %
	Public support percentage for 2021 (					14	
15						15	
108	33 1/3% support test - 2021. If the						
h	stop here. The organization qualifies 33 1/3% support test - 2020. If the						
	and <b>stop here.</b> The organization qua						
17a	10% -facts-and-circumstances test						
.,,	and if the organization meets the fact	-					
	meets the facts-and-circumstances te			=		viriow the organiz	
b	10% -facts-and-circumstances test	•	•				
_	more, and if the organization meets the	-					
	organization meets the facts-and-circ				-		<b>&gt;</b>
18	<b>Private foundation.</b> If the organization		-		•		s •

Schedule A (Form 990) 2021

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#### Part III | Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below please complete Part II.)

Se	quality under the tests listed be ction A. Public Support	low, please comp	piete Part II.)				
Cale	ndar year (or fiscal year beginning in)	(a) 2017	<b>(b)</b> 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
	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						
78	Amounts included on lines 1, 2, and 3 received from disqualified persons						
k	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
(	Add lines 7a and 7b						
8 Se	Public support. (Subtract line 7c from line 6.)						
Cale	ndar year (or fiscal year beginning in) 🕨 📗	<b>(a)</b> 2017	<b>(b)</b> 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
k	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
	Net income from unrelated business activities not included on 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 5 years. If the Form 990 is for the	e organization's f	irst, second, third,	fourth, or fifth tax	year as a section 5	01(c)(3) organization	on,
	check this box and stop here						<b>.</b>
	ction C. Computation of Public					Т	
	Public support percentage for 2021 (lin			column (f))		15	%
	Public support percentage from 2020					16	%
	ction D. Computation of Invest					T T	
	Investment income percentage for 202					17	%
	Investment income percentage from 2					18	%
198	33 1/3% support tests - 2021. If the						/ is not
Ł	more than 33 1/3%, check this box and 33 1/3% support tests - 2020. If the						Ind
_	line 18 is not more than 33 1/3%, chec						
20	Private foundation. If the organization						

#### Part IV Supporting Organizations

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

#### Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- **3a** Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and 3c below.
- **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in **Part VI** when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- **4a** Was any supported organization not organized in the United States ("foreign supported organization")? *If* "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in **Part VI** how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- **b Type I or Type II only.** Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? If "Yes," complete Part I of Schedule L (Form 990).
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- **b** Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes." provide detail in **Part VI.**
- c Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer line 10b below.
  - **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

1		Yes	No
	1		
	2		
	3a		
	3b		
	- OD		
	3с		
	4a		
	46		
	4b		
	4c		
	5a		
	Ja		
	5b		
	5с		
	6		
	J		
	7		
	8		
	9a		
	Ju		
	9b		
	9с		
	40-		
	10a		
	10b		
lule	A (Forn	n 990)	2021

Scrie		14/05	J Pa	age <b>5</b>
Pai	rt IV Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and			
	11c below, the governing body of a supported organization?	11a		
b	A family member of a person described on line 11a above?	11b		
С	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide			
	detail in Part VI.	11c		
Sec	tion B. Type I Supporting Organizations			
			Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or			
	more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers,			
	directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s)			
	effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported			
	organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
_	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	, ,			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,	2		
Sec	supervised, or controlled the supporting organization. tion C. Type II Supporting Organizations			
	Ton or type in supporting organizations		Vaa	Na
_	Managarania, af the comparisation is directors and material devices the formal and a majority of the directors		Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
202	the supported organization(s). tion D. All Type III Supporting Organizations	1		
566	tion B. All Type in Supporting Organizations		.,	
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described on line 2, above, did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		
Sec	tion E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions	.).		
а	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
С	The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see in	nstruction	ıs).	
2	Activities Test. Answer lines 2a and 2b below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement,			
	one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in			
	Part VI the reasons for the organization's position that its supported organization(s) would have engaged in			
	these activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer lines 3a and 3b below.			
а	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? If "Yes" or "No" provide details in <b>Part VI.</b>	За		
h	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each	- 53		
	of its supported organizations? If "Ves." describe in <b>Part VI</b> the role played by the organization in this regard	3b		

## INTERNATIONAL FOUNDATION FOR ELECTORAL

Schedule A (Form 990) 2021 SYSTEMS

52-1527835 Page 6

Part '	V Type III Non-Functionally Integrated 509(a)(3) Support	ing Organi	zations	
1 [	Check here if the organization satisfied the Integral Part Test as a qualify	ying trust on N	ov. 20, 1970 ( explain in	Part VI). See instructions
	All other Type III non-functionally integrated supporting organizations may		•	
Section	n A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 N	let short-term capital gain	1		
<b>2</b> R	lecoveries of prior-year distributions	2		
3 0	Other gross income (see instructions)	3		
4 A	dd lines 1 through 3.	4		
<b>5</b> D	Depreciation and depletion	5		
<b>6</b> P	ortion of operating expenses paid or incurred for production or			
C	ollection of gross income or for management, conservation, or			
	naintenance of property held for production of income (see instructions)	6		
	Other expenses (see instructions)	7		
	djusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
	n B - Minimum Asset Amount	1	(A) Prior Year	(B) Current Year (optional)
1 A	ggregate fair market value of all non-exempt-use assets (see			
in	nstructions for short tax year or assets held for part of year):			
a A	verage monthly value of securities	1a		
b A	verage monthly cash balances	1b		
c Fa	air market value of other non-exempt-use assets	1c		
d T	otal (add lines 1a, 1b, and 1c)	1d		
e D	Discount claimed for blockage or other factors			
	explain in detail in Part VI):			
2 A	cquisition indebtedness applicable to non-exempt-use assets	2		
<b>3</b> S	subtract line 2 from line 1d.	3		
<b>4</b> C	ash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,			
	ee instructions).	4		
5 N	let value of non-exempt-use assets (subtract line 4 from line 3)	5		
6 M	fultiply line 5 by 0.035.	6		
	ecoveries of prior-year distributions	7		
8 M	finimum Asset Amount (add line 7 to line 6)	8		
Section	n C - Distributable Amount			Current Year
<b>1</b> A	djusted net income for prior year (from Section A, line 8, column A)	1		
	inter 0.85 of line 1.	2		
3 M	finimum asset amount for prior year (from Section B, line 8, column A)	3		
	inter greater of line 2 or line 3.	4		
	ncome tax imposed in prior year	5		
	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	mergency temporary reduction (see instructions).	6		
7	Check here if the current year is the organization's first as a non-function	nally integrated	d Type III supporting orga	nization (see

Schedule A (Form 990) 2021

instructions).

_	dule A (Form 990) 2021 SYSTEMS	(a)(2) Comparation Office	-i-ations		2-1527835 Page 7
Par	, ,	(a)(3) Supporting Orga	nizations (continu	ued)	
	on D - Distributions				Current Year
1	Amounts paid to supported organizations to accomplish exe			1	
2	Amounts paid to perform activity that directly furthers exemp	ot purposes of supported			
	organizations, in excess of income from activity			2	
3_4	Administrative expenses paid to accomplish exempt purpose	es of supported organizations	8	3	
4	Amounts paid to acquire exempt-use assets			4	
_5_	Qualified set-aside amounts (prior IRS approval required - pri	ovide details in Part VI)		5	
_6_	Other distributions (describe in Part VI). See instructions.			6	
_7_	Total annual distributions. Add lines 1 through 6.	a arabaj-ation is recognize		7	
8	Distributions to attentive supported organizations to which the	ie organization is responsive			
9	(provide details in <b>Part VI</b> ). See instructions.  Distributable amount for 2021 from Section C, line 6			9	
10	Line 8 amount divided by line 9 amount			10	
10	Line o amount divided by line 9 amount	(i)	(ii)	10	(iii)
Secti	ion E - Distribution Allocations (see instructions)	Excess Distributions	Underdistribution Pre-2021	าร	Distributable Amount for 2021
1	Distributable amount for 2021 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2021 (reason-				
	able cause required - explain in Part VI). See instructions.				
_3_	Excess distributions carryover, if any, to 2021				
a	From 2016				
b	From 2017				
<u> </u>	From 2018				
d	From 2019				
<u>e</u>	From 2020				
f_	Total of lines 3a through 3e				
<u>g</u>	Applied to underdistributions of prior years				
<u>h</u>	Applied to 2021 distributable amount				
<u>_i</u>	Carryover from 2016 not applied (see instructions)				
<u>_i</u>	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2021 from Section D,				
	line 7: \$				
a	Applied to underdistributions of prior years				
<u>b</u>	Applied to 2021 distributable amount				
<u> </u>	Remainder. Subtract lines 4a and 4b from line 4.				
5	Remaining underdistributions for years prior to 2021, 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 2021. Subtract lines 3h				
	and 4b from line 1. For result greater than zero, explain in				
	Part VI. See instructions.				
7	<b>Excess distributions carryover to 2022.</b> Add lines 3j and 4c.				
8	Breakdown of line 7:				
а	Excess from 2017				
b	Excess from 2018				
С	Excess from 2019				
d	Excess from 2020				
е	Excess from 2021				

Schedule A (Form 990) 2021

## INTERNATIONAL FOUNDATION FOR ELECTORAL

Schedule A (Form 990) 2021 SYSTEMS 52-1527835 Page 8

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

SCHEDUL	EΑ,	PART	II,	LINE	10,	EXPL	ANATI	ON FO	OR (	OTHER	I	NCOME	: :		
OTHER I	NCOME														 
2017 AM	OUNT:	\$	25,3	322.											
2018 AM	OUNT:	\$	42,	714.											
2019 AM	OUNT:	\$	18,0	065.											
2020 AM	OUNT:	\$	0.												
2021 AM	OUNT:	\$	80,2	199.											 
FUNDRAI															
2017 AM				015.											_
2018 AM	IOUNT:	Ş <u> </u>	18,	340.											—

Schedule A (Form 990) 2021

### Schedule B

(Form 990)

Department of the Treasury Internal Revenue Service

**Schedule of Contributors** 

► Attach to Form 990 or Form 990-PF.

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

OMB No. 1545-0047

2021

Name	of the	organization

INTERNATIONAL FOUNDATION FOR ELECTORAL SYSTEMS

**Employer identification number** 

52-1527835

Organiz	ation type (cneck or	1e):
Filers of	:	Section:
Form 99	0 or 990-EZ	$\overline{\mathbf{X}}$ 501(c)( $3$ ) (enter number) organization
		4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation
		527 political organization
Form 99	0-PF	501(c)(3) exempt private foundation
		4947(a)(1) nonexempt charitable trust treated as a private foundation
		501(c)(3) taxable private foundation
		covered by the <b>General Rule</b> or a <b>Special Rule.</b> 7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.
General	Rule	
	ū	filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.
Special	Rules	
X	sections 509(a)(1) a contributor, during	described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; line 1. Complete Parts I and II.
	contributor, during the literary, or education	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, nal purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering instead of the contributor name and address), II, and III.
	year, contributions is checked, enter he purpose. Don't com	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box ere the total contributions that were received during the year for an exclusively religious, charitable, etc., applete any of the parts unless the <b>General Rule</b> applies to this organization because it received nonexclusively etc., contributions totaling \$5,000 or more during the year
answer "	'No" on Part IV, line	at isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it <b>must</b> 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify requirements of Schedule B (Form 990).

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

Schedule B (Form 990) (2021)

Name of organization
INTERNATIONAL FOUNDATION FOR ELECTORAL
SYSTEMS

Employer identification number
52-1527835

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	space is needed.	
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
1		\$ 52,542,043.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
2		\$ <u>11,933,585</u> .	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
3		\$8,143,215.	Person X Payroll
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
4		\$6,586,089.	Person X Payroll
(a)	(b)	(c)	(d)
No. 5	Name, address, and ZIP + 4	* 2,710,246.	Person X Payroll  Noncash  (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No. 6	Name, address, and ZIP + 4	Total contributions  \$ 2,455,153.	Person X Payroll Noncash (Complete Part II for noncash contributions.)

Name of organization
INTERNATIONAL FOUNDATION FOR ELECTORAL
SYSTEMS

Employer identification number
52-1527835

Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed. (a) No. (d) (b) FMV (or estimate) from Description of noncash property given Date received (See instructions.) Part I (a) (c) No. (b) (d) FMV (or estimate) from Description of noncash property given Date received (See instructions.) Part I (a) (c) No. (b) (d) FMV (or estimate) from Description of noncash property given Date received (See instructions.) Part I (a) (c) No. (b) (d) FMV (or estimate) from Description of noncash property given Date received (See instructions.) Part I (a) (c) No. (d) (b) FMV (or estimate) from Description of noncash property given Date received (See instructions.) Part I (a) No. (b) (d) FMV (or estimate) from Description of noncash property given **Date received** (See instructions.) Part I \$

Page 4 Schedule B (Form 990) (2021) **Employer identification number** Name of organization INTERNATIONAL FOUNDATION FOR ELECTORAL SYSTEMS 52-1527835 Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info. once.) Use duplicate copies of Part III if additional space is needed. (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I

(e) Transfer of gift

Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

#### **SCHEDULE D** (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

Supplemental Financial Statements

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

▶ Attach to Form 990.

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

OMB No. 1545-0047

Inspection INTERNATIONAL FOUNDATION FOR ELECTORAL **Employer identification number** 

52-1527835 SYSTEMS Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the Part I

	organization answered "Yes" on Form 990, Part IV, line	e 6.		
		(a) Donor advised funds	<b>(b)</b> Fur	nds and other accounts
1	Total number at end of year			
2	Aggregate value of contributions to (during year)			
3	Aggregate value of grants from (during year)			
4	Aggregate value at end of year			
5	Did the organization inform all donors and donor advisors in v	vriting that the assets held in donor advise	ed funds	
	are the organization's property, subject to the organization's	exclusive legal control?		Yes No
6	Did the organization inform all grantees, donors, and donor ad			
	for charitable purposes and not for the benefit of the donor or			
	impermissible private benefit?			Yes No
Pai	t II Conservation Easements. Complete if the org	ganization answered "Yes" on Form 990, P	art IV, line 7	,
1	Purpose(s) of conservation easements held by the organization	on (check all that apply).		
	Preservation of land for public use (for example, recreat	tion or education) Preservation of	a historically	important land area
	Protection of natural habitat	Preservation of	a certified hi	storic structure
	Preservation of open space			
2	Complete lines 2a through 2d if the organization held a qualifi	ed conservation contribution in the form of	of a conserva	ation easement on the last
	day of the tax year.			Held at the End of the Tax Year
а	Total number of conservation easements		2a	
b	Total acreage restricted by conservation easements		2b	
С	Number of conservation easements on a certified historic stru	ucture included in (a)	2c	
d	Number of conservation easements included in (c) acquired a	fter 7/25/06, and not on a historic structur	re	
	listed in the National Register		2d	
3	Number of conservation easements modified, transferred, rele	eased, extinguished, or terminated by the	organization	during the tax
	year ▶			
4	Number of states where property subject to conservation eas	ement is located >		
5	Does the organization have a written policy regarding the peri	odic monitoring, inspection, handling of		
	violations, and enforcement of the conservation easements it	holds?		Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting, I	handling of violations, and enforcing conse	ervation ease	ements during the year
	<b>&gt;</b>			
7	Amount of expenses incurred in monitoring, inspecting, hand	ling of violations, and enforcing conservati	on easemen	its during the year
	<b>&gt;</b> \$			
8	Does each conservation easement reported on line 2(d) above	e satisfy the requirements of section 170(h	)(4)(B)(i)	
	and section 170(h)(4)(B)(ii)?			Yes No
9	In Part XIII, describe how the organization reports conservation	on easements in its revenue and expense s	statement ar	nd
	balance sheet, and include, if applicable, the text of the footn	ote to the organization's financial stateme	nts that des	cribes the
	organization's accounting for conservation easements.			
Pai	t III Organizations Maintaining Collections of	Art, Historical Treasures, or Oth	ner Simila	ır Assets.
	Complete if the organization answered "Yes" on Form	990, Part IV, line 8.		
1a	If the organization elected, as permitted under FASB ASC 958	B, not to report in its revenue statement ar	nd balance s	heet works
	of art, historical treasures, or other similar assets held for pub	lic exhibition, education, or research in fur	therance of	public
	service, provide in Part XIII the text of the footnote to its finan	cial statements that describes these items	S.	
b	If the organization elected, as permitted under FASB ASC 958	8, to report in its revenue statement and b	alance shee	t works of
	art, historical treasures, or other similar assets held for public	exhibition, education, or research in further	erance of pu	blic service,
	provide the following amounts relating to these items:			
	(i) Revenue included on Form 990, Part VIII, line 1			\$
			_	\$
2	If the organization received or held works of art, historical treat	asures, or other similar assets for financial	gain, provid	е
	the following amounts required to be reported under FASB AS	SC 958 relating to these items:		
а	Revenue included on Form 990, Part VIII, line 1			\$
b	Assets included in Form 990, Part X			\$

Sche		orm 990) 2021 SYSTEMS							2-15		5 P	age <b>2</b>
Pai	rt III O	organizations Maintaining C	Collections of Ar	t, Histo	orical Tre	asures, or	Other	Similar	Assets	(contir	nued)	
3	Using the	e organization's acquisition, access	ion, and other record	s, check	any of the f	ollowing that	make sig	nificant us	se of its			
	collection	n items (check all that apply):										
а	Pu	blic exhibition	C	t	Loan or excl	hange progra	ım					
b	Sc	holarly research	6	• 🗌	Other							
С	Pre	eservation for future generations										
4	Provide a	a description of the organization's c	ollections and explain	n how th	ey further th	e organizatio	n's exem <sub>l</sub>	ot purpos	e in Part	XIII.		
5	During th	ne year, did the organization solicit o	or receive donations	of art, his	storical treas	ures, or othe	r similar a	ssets				
		d to raise funds rather than to be m								Yes		No
Pai	rt IV E	scrow and Custodial Arran	gements. Compl	ete if the	organizatio	n answered "	Yes" on F	orm 990,	Part IV, I	ine 9, or		
	re	eported an amount on Form 990, Pa	art X, line 21.									
1a	Is the org	ganization an agent, trustee, custod	ian or other intermed	liary for o	contributions	or other ass	ets not in	cluded		_		_
	on Form	990, Part X?							[	Yes		No
b	If "Yes,"	explain the arrangement in Part XIII	and complete the fo	llowing t	able:							
										Amoun	t	
С	Beginnin	g balance						1c				
d	Additions	s during the year						1d				
е	Distributi	ions during the year						1e				
f	Ending b	alance						1f				
2a	Did the c	organization include an amount on F	Form 990, Part X, line	21, for 6	escrow or cu	stodial accou	unt liability	y?	L	Yes		No
		explain the arrangement in Part XIII										
Pai	rt V E	ndowment Funds. Complete										
			(a) Current year	(b) F	Prior year	(c) Two year	s back (	<b>d)</b> Three ye	ars back	(e) Four	years	back
1a	Beginnin	g of year balance										
b	Contribu	tions										
С		stment earnings, gains, and losses										
d	Grants o	r scholarships										
е	Other ex	penditures for facilities										
	and prog	grams										
f	Administ	rative expenses										
g	End of ye	ear balance										
2	Provide t	the estimated percentage of the cur	rent year end balanc	e (line 1ç	g, column (a)	) held as:						
а	Board de	esignated or quasi-endowment		_%								
b	Permane	ent endowment	%									
С		dowment >	_%									
	The perc	entages on lines 2a, 2b, and 2c sho	ould equal 100%.									
За	Are there	e endowment funds not in the posse	ession of the organiza	ation tha	t are held an	d administer	ed for the	organizat	iion	ſ		
	by:										Yes	No
		elated organizations								3a(i)		
		ted organizations								3a(ii)		
b		on line 3a(ii), are the related organiza								3b		
4		in Part XIII the intended uses of the		wment f	unds.							
Pai		and, Buildings, and Equipn		D + 1\	/ line 11 = 0	F 000	Dark V. III	10				
		omplete if the organization answere			i	T I						
		Description of property	(a) Cost or o		(b) Cost			cumulated	t l	( <b>d</b> ) Boo	k valu	е
	_		basis (investr	nent)	basis	(other)	aepi	reciation	$\rightarrow$			
1a												
b		S			2 20	2 466	1 -	22 27		1 70	0 1	0.4
C		ld improvements			3,30	3,466.	1,5	23,27	4•	1,78	U, L	<b>J4</b> .
d		nt			2 20	5 040	1 0	<u>00 22</u>	2	2.0	1 7	1 6
		s 1a through 1e. (Column (d) must a		· ·		<u>5,049.</u>	1,9	90,33	<del></del>	$\frac{39}{2.17}$	<u>+,/</u>	16.
· rita	- AUTO HEID	S LA LUICULOU LE // 'Olumn /d) muet /	acual Larm (10/1 1)art	v ooliin	an (U) lina 1/	10.1			_	4 - 1 / 1	<del>.</del>	_ U •

Schedule D (Form 990) 2021

2-	1	5	2	7	8	3	5	Page (	3
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Part VII Investments - Other Securities.  Complete if the organization answered "Yes" o	n 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-c	of-year market value
1) Financial derivatives			-
2) Closely held equity interests			
3) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
otal. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) Part VIII Investments - Program Related.			
Complete if the organization answered "Yes" o	n Form 990, Part IV, line	_	
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-	of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)  Part IX Other Assets.	n Form 000 Port IV line	11d Cos Form 000 Port V line 15	
Complete if the organization answered "Yes" o	n Form 990, Part IV, line Description	Tita. See Form 990, Part X, line 15.	(b) Book value
· · · · · · · · · · · · · · · · · · ·	COOLIDEROLL		(b) Book value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7) (8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line  Part X Other Liabilities.	15.)	<b>•</b>	
Complete if the organization answered "Yes" o	n Form 990 Port IV line	11e or 11f See Form 900 Port V line 95	
(-) December of Petership	iii oiiii əəu, Fait iv, iifle	Fait A, IIIIe 25.	(b) Book value
			(b) BOOK Value
(1) Federal income taxes (2) DEFERRED RENT			3,413,687
(3)			-,,,
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
otal. (Column (b) must equal Form 990. Part X. col. (B) line	25.)		3,413,687

Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)

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

Schedule D (Form 990) 2021 SYSTEMS

Par	t XI	Reconciliation of Revenue per Audited Financial Stateme	nts With Reve	nue per Return.	
		Complete if the organization answered "Yes" on Form 990, Part IV, line 12a			
1	Total	revenue, gains, and other support per audited financial statements		1	86,728,936.
2	Amou	nts included on line 1 but not on Form 990, Part VIII, line 12:			
а	Net u	nrealized gains (losses) on investments	. 2a		
b	Donat	red services and use of facilities	2b		
С	Recov	veries of prior year grants	2c		
d		(Describe in Part XIII.)			
е		nes <b>2a</b> through <b>2d</b>		2e	0.
3	Subtra	act line 2e from line 1		3	86,728,936.
4		nts included on Form 990, Part VIII, line 12, but not on line 1:			
а	Invest	ment expenses not included on Form 990, Part VIII, line 7b	. 4a		
b	Other	(Describe in Part XIII.)	. 4b		
С		nes <b>4a</b> and <b>4b</b>		4c	0.
5	Total	revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		5	86,728,936.
Par	t XII	Reconciliation of Expenses per Audited Financial Statem	ents With Expe	enses per Retur	n.
		Complete if the organization answered "Yes" on Form 990, Part IV, line 12a			
1	Total	expenses and losses per audited financial statements		1	86,394,658.
2	Amou	nts included on line 1 but not on Form 990, Part IX, line 25:			
а	Donat	ed services and use of facilities	. 2a		
b	Prior y	year adjustments	2b		
С	Other	losses	2c		
d	Other	(Describe in Part XIII.)	. 2d		
е	Add li	nes 2a through 2d		2e	0.
3	Subtra	act line <b>2e</b> from line <b>1</b>		3	86,394,658.
4		nts included on Form 990, Part IX, line 25, but not on line 1:			
а	Invest	ment expenses not included on Form 990, Part VIII, line 7b	. 4a		
b	Other	(Describe in Part XIII.)	. 4b		
С	Add li	nes <b>4a</b> and <b>4b</b>		4c	0.
5	Total	expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)		5	86,394,658.
Par	t XIII	Supplemental Information.			
		descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part		; Part V, line 4; Part 2	X, line 2; Part XI,
lines :	2d and	4b; and Part XII, lines 2d and 4b. Also complete this part to provide any add	litional information.		
ם גם	m v	ITME 2.			
PAR	.T. V	, LINE 2:			
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MEASURED BASED UPON THE LARGEST AMOUNT OF BENEFIT THAT IS GREATER THAN 50%

#### SCHEDULE F (Form 990)

Department of the Treasury

#### Statement of Activities Outside the United States

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

Attach to Form 990.

Open to Public

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

Inspection

OMB No. 1545-0047

**Employer identification number** Name of the organization INTERNATIONAL FOUNDATION FOR ELECTORAL SYSTEMS 52-1527835

General Information on Activities Outside the United States. Complete if the organization answered "Yes" on Part I Form 990, Part IV, line 14b. 1 For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, X Yes the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? 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.) (b) Number of (e) If activity listed in (d) (c) Number of (d) Activities conducted in the region (f) Total (a) Region expenditures employees, offices (by type) (such as, fundraising, prois a program service, agents, and for and in the region gram services, investments, grants to describe specific type independent investments contractors recipients located in the region) of service(s) in the region in the region in the region CENTRAL AMERICA AND TECHNICAL ELECTORAL THE CARIBBEAN 18 PROGRAM ACTIVITIES ASSISTANCE & EDUCATION 4,415,875. EAST ASTA AND THE TECHNICAL ELECTORAL 4,133,880. PACIFIC 29 PROGRAM ACTIVITIES ASSISTANCE & EDUCATION 4 EUROPE (INCLUDING TECHNICAL ELECTORAL ASSISTANCE & EDUCATION ICELAND & GREENLAND) 9 3 PROGRAM ACTIVITIES 3,704,066. MIDDLE EAST AND TECHNICAL ELECTORAL ASSISTANCE & EDUCATION NORTH AFRICA PROGRAM ACTIVITIES 4 30 15,389,456. TECHNICAL ELECTORAL PROGRAM ACTIVITIES ASSISTANCE & EDUCATION NORTH AMERICA 0 0 1,654,485. TECHNICAL ELECTORAL RUSSTA AND NEIGHBORING STATES 53 PROGRAM ACTIVITIES ASSISTANCE & EDUCATION 7,579,787. TECHNICAL ELECTORAL SOUTH AMERICA 1 5 PROGRAM ACTIVITIES ASSISTANCE & EDUCATION 2,084,993. TECHNICAL ELECTORAL ASSISTANCE & EDUCATION 37 PROGRAM ACTIVITIES SOUTH ASIA 8 5,660,613. 28 181 44,623,155. 3 a Subtotal **b** Total from continuation 16 47 14,548,739. sheets to Part I ...... Totals (add lines 3a 44 228 59,171,894. and 3b)

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

Schedule F (Form 990) 2021

Schedule F (Form 990)

SYSTEMS

52-1527835

Schedule F (Form 990)	SYSTEMS			52-15278	35 Page 1
Part I Continuatio	n of Activities	s per Region	- (Schedule F (Form 990), Part I, line 3	)	
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
SUB-SAHARAN AFRICA	16	47		TECHNICAL ELECTORAL ASSISTANCE & EDUCATION	14,548,739.
Totals	16	47			14,548,739.
1 Utal3	1 10	1			122,020,700.

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>(b)</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)
			TECHNICAL ELECTORAL					
			ASSISTANCE &					
		SOUTH ASIA	EDUCATION	546,212.	WIRE TRANSFER	0.		
			TECHNICAL ELECTORAL					
		EAST ASIA AND THE	ASSISTANCE &					
		PACIFIC	EDUCATION	303,214.	WIRE TRANSFER	0.		
				,				
			TECHNICAL ELECTORAL					
		MIDDLE EAST AND	ASSISTANCE &					
		NORTH AFRICA	EDUCATION	288,941.	WIRE TRANSFER	0.		
		EUDODE / TNGL UDING	THOUNT ON THE HOTEODAY					
		EUROPE (INCLUDING	TECHNICAL ELECTORAL					
		ICELAND &	ASSISTANCE &	166 075	MIDE EDINGEED	0		
		GREENLAND)	EDUCATION	166,075.	WIRE TRANSFER	0.		
			TECHNICAL ELECTORAL					
		EAST ASIA AND THE	ASSISTANCE &					
		PACIFIC	EDUCATION	145,760.	WIRE TRANSFER	0.		
		RUSSIA AND	TECHNICAL ELECTORAL					
		NEIGHBORING	ASSISTANCE &	105.000	L			
		STATES	EDUCATION	125,000.	WIRE TRANSFER	0.		
			TECHNICAL ELECTORAL					
		MIDDLE EAST AND	ASSISTANCE &					
		NORTH AFRICA	EDUCATION	121,222.	WIRE TRANSFER	0.		
		EUROPE (INCLUDING	TECHNICAL ELECTORAL					
		ICELAND &	ASSISTANCE &					
		GREENLAND)	EDUCATION	120,812.	WIRE TRANSFER	0.		

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

Schedule F (For	rm 990)	SYSTE	MS			Page 2			
Part II Cor	ntinuation of	Grants and Other	Assistance to Organiza	tions or Entities Outside the	United States.	(Schedule F (Form 9	90), Part II, line 1	)	
1 (a) Name of or	rganization	<b>(b)</b> IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
			EUROPE (INCLUDING ICELAND & GREENLAND)	TECHNICAL ELECTORAL ASSISTANCE & EDUCATION	98,777.	WIRE TRANSFER	0.		
			EUROPE (INCLUDING ICELAND & GREENLAND)	TECHNICAL ELECTORAL ASSISTANCE & EDUCATION	91,503.	WIRE TRANSFER	0.		
			RUSSIA AND NEIGHBORING STATES	TECHNICAL ELECTORAL ASSISTANCE & EDUCATION	77,009.	WIRE TRANSFER	0.		
			SOUTH AMERICA	TECHNICAL ELECTORAL ASSISTANCE & EDUCATION	63,355.	WIRE TRANSFER	0.		
			RUSSIA AND NEIGHBORING STATES	TECHNICAL ELECTORAL ASSISTANCE & EDUCATION	62,790.	WIRE TRANSFER	0.		
			SOUTH ASIA	TECHNICAL ELECTORAL ASSISTANCE & EDUCATION		WIRE TRANSFER	0.		
			EAST ASIA AND THE	TECHNICAL ELECTORAL ASSISTANCE & EDUCATION	59,122.	WIRE TRANSFER	0.		
			SOUTH ASIA	TECHNICAL ELECTORAL ASSISTANCE & EDUCATION	58,335.	WIRE TRANSFER	0.		
			RUSSIA AND NEIGHBORING STATES	TECHNICAL ELECTORAL ASSISTANCE & EDUCATION	56,997.	WIRE TRANSFER	0.		

Schedule	F (Form 990)	SYSTE	MS			Page 2			
Part II	Continuation of	f Grants and Other	Assistance to Organiza	tions or Entities Outside the	United States.	(Schedule F (Form 9	90), Part II, line 1	)	
1 (a) Nam	e of organization	<b>(b)</b> IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
			SUB-SAHARAN AFRICA	TECHNICAL ELECTORAL ASSISTANCE & EDUCATION	44,772.	WIRE TRANSFER	0.		
			MIDDLE EAST AND NORTH AFRICA	TECHNICAL ELECTORAL ASSISTANCE & EDUCATION	44,150.	WIRE TRANSFER	0.		
			EUROPE (INCLUDING ICELAND & GREENLAND)	TECHNICAL ELECTORAL ASSISTANCE & EDUCATION	43,816.	WIRE TRANSFER	0.		
			MIDDLE EAST AND NORTH AFRICA	TECHNICAL ELECTORAL ASSISTANCE & EDUCATION	41,970.	WIRE TRANSFER	0.		
			MIDDLE EAST AND NORTH AFRICA	TECHNICAL ELECTORAL ASSISTANCE & EDUCATION	39,473.	WIRE TRANSFER	0.		
			MIDDLE EAST AND NORTH AFRICA	TECHNICAL ELECTORAL ASSISTANCE & EDUCATION	38,840.	WIRE TRANSFER	0.		
			EUROPE (INCLUDING ICELAND & GREENLAND)	TECHNICAL ELECTORAL ASSISTANCE & EDUCATION	38,650.	WIRE TRANSFER	0.		
			EUROPE (INCLUDING ICELAND & GREENLAND)	TECHNICAL ELECTORAL ASSISTANCE & EDUCATION	32,854.	WIRE TRANSFER	0.		
			SOUTH ASIA	TECHNICAL ELECTORAL ASSISTANCE & EDUCATION	29,471.	WIRE TRANSFER	0.		

Schedule	F (Form 990)	SYSTE	MS		52-1527835 Page:						
Part II	Continuation of	f Grants and Other	Assistance to Organiza	tions or Entities Outside the	United States.	(Schedule F (Form 9	90), Part II, line 1	)			
1 (a) Nam	ne of organization	<b>(b)</b> IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)		
				TEGUNICAL ELECTIONAL							
			GENERAL AMERICA	TECHNICAL ELECTORAL							
			CENTRAL AMERICA AND THE CARIBBEAN	ASSISTANCE & EDUCATION	20 341	WIRE TRANSFER	0.				
			AND THE CARIBBEAN	EDUCATION	29,341.	WIKE IKANSPEK	0.				
				TECHNICAL ELECTORAL							
			MIDDLE EAST AND	ASSISTANCE &							
			NORTH AFRICA	EDUCATION	29,337.	WIRE TRANSFER	0.				
					,						
			EUROPE (INCLUDING	TECHNICAL ELECTORAL							
			ICELAND &	ASSISTANCE &							
			GREENLAND)	EDUCATION	27,863.	WIRE TRANSFER	0.				
				TECHNICAL ELECTORAL							
			EAST ASIA AND THE	ASSISTANCE &							
			PACIFIC	EDUCATION	27,500.	WIRE TRANSFER	0.				
				TECHNICAL ELECTORAL							
			GOLIMIT PARD LOS	ASSISTANCE &	25 172	WIDE MDANGEED	_				
			SOUTH AMERICA	EDUCATION	25,1/2.	WIRE TRANSFER	0.				
				TECHNICAL ELECTORAL							
			EAST ASIA AND THE	ASSISTANCE &							
			PACIFIC	EDUCATION	25 105.	WIRE TRANSFER	0.				
					= 1, = 1 1						
				TECHNICAL ELECTORAL							
			EAST ASIA AND THE	ASSISTANCE &							
			PACIFIC	EDUCATION	24,999.	WIRE TRANSFER	0.				
				TECHNICAL ELECTORAL							
			EAST ASIA AND THE	ASSISTANCE &							
			PACIFIC	EDUCATION	24,998.	WIRE TRANSFER	0.				
			EUROPE (INCLUDING	TECHNICAL ELECTORAL							
			ICELAND &	ASSISTANCE &	0						
			GREENLAND)	EDUCATION	24,855.	WIRE TRANSFER	0.				

Schedule F	(Form 990)	SISTE	MP		32-132/033							
Part II	Continuation of	f Grants and Other	Assistance to Organiza	tions or Entities Outside the	United States.	(Schedule F (Form 9	90), Part II, line 1	)				
1 (a) Name	of organization	<b>(b)</b> IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)			
			CENTRAL AMERICA AND THE CARIBBEAN	TECHNICAL ELECTORAL ASSISTANCE & EDUCATION	24,773.	WIRE TRANSFER	0.					
			SOUTH AMERICA	TECHNICAL ELECTORAL ASSISTANCE & EDUCATION	24,085.	WIRE TRANSFER	0.					
			EUROPE (INCLUDING ICELAND & GREENLAND)	TECHNICAL ELECTORAL ASSISTANCE & EDUCATION	23,936.	WIRE TRANSFER	0.					
			EAST ASIA AND THE PACIFIC	TECHNICAL ELECTORAL ASSISTANCE & EDUCATION	22,949.	WIRE TRANSFER	0.					
			CENTRAL AMERICA AND THE CARIBBEAN	TECHNICAL ELECTORAL ASSISTANCE & EDUCATION	22,500.	WIRE TRANSFER	0.					
			CENTRAL AMERICA AND THE CARIBBEAN	TECHNICAL ELECTORAL ASSISTANCE & EDUCATION	22,014.	WIRE TRANSFER	0.					
			EAST ASIA AND THE PACIFIC	TECHNICAL ELECTORAL ASSISTANCE & EDUCATION	21,250.	WIRE TRANSFER	0.					
			EUROPE (INCLUDING ICELAND & GREENLAND)	TECHNICAL ELECTORAL ASSISTANCE & EDUCATION	21,220.	WIRE TRANSFER	0.					
			EUROPE (INCLUDING ICELAND & GREENLAND)	TECHNICAL ELECTORAL ASSISTANCE & EDUCATION	20,750.	WIRE TRANSFER	0.					

Schedule F (Forn	n 990)	SYSTE	MS		52-152/835 F							
Part II Con	tinuation of	Grants and Other	Assistance to Organiza	tions or Entities Outside the	e United States. (Schedule F (Form 990), Part II, line 1)							
1 (a) Name of org		<b>(b)</b> IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)			
			EUROPE (INCLUDING	TECHNICAL ELECTORAL								
			ICELAND &	ASSISTANCE &								
			GREENLAND)	EDUCATION	20,671.	WIRE TRANSFER	0.					
				TECHNICAL ELECTORAL								
				ASSISTANCE &	00 61 5							
			SOUTH ASIA	EDUCATION	20,617.	WIRE TRANSFER	0.					
			EUROPE (INCLUDING	TECHNICAL ELECTORAL								
			ICELAND &	ASSISTANCE &								
			GREENLAND)	EDUCATION	20,600.	WIRE TRANSFER	0.					
					,							
				TECHNICAL ELECTORAL								
			EAST ASIA AND THE	ASSISTANCE &								
			PACIFIC	EDUCATION	20,500.	WIRE TRANSFER	0.					
				TECHNICAL ELECTORAL								
				ASSISTANCE &	10.000							
			SOUTH ASIA	EDUCATION	19,999.	WIRE TRANSFER	0.					
			RUSSIA AND	TECHNICAL ELECTORAL								
			NEIGHBORING	ASSISTANCE &								
			STATES	EDUCATION	19,960.	WIRE TRANSFER	0.					
					,		-					
				TECHNICAL ELECTORAL								
				ASSISTANCE &								
			SOUTH AMERICA	EDUCATION	19,834.	WIRE TRANSFER	0.					
				TECHNICAL ELECTORAL								
				ASSISTANCE &								
			SOUTH ASIA	EDUCATION	19,515.	WIRE TRANSFER	0.					
				MECUNICAL ELECTIONAL								
				TECHNICAL ELECTORAL ASSISTANCE &								
			SOUTH ASIA	EDUCATION	19 000	WIRE TRANSFER	0.					
			POOTH MOTA	DD001111011	17,000.	PITTE TRANSPER	٠.					

Schedul	e F (Form 990)	91915	110			JZ 1J	27033		Page 2
Part II	Continuation o	f Grants and Other	Assistance to Organiza	tions or Entities Outside the	United States.	(Schedule F (Form 9	90), Part II, line	1)	
1 (a) Nar	me of organization	<b>(b)</b> IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV appraisal, other)
				TECHNICAL ELECTORAL					
			EAST ASIA AND THE	ASSISTANCE &					
			PACIFIC	EDUCATION	18,553.	WIRE TRANSFER	0.		
			L						
			RUSSIA AND	TECHNICAL ELECTORAL					
			NEIGHBORING	ASSISTANCE &	16.063				
			STATES	EDUCATION	16,963.	WIRE TRANSFER	0.		
				MECHNICAI ELECMODAI					
			CENTRAL AMERICA	TECHNICAL ELECTORAL ASSISTANCE &					
			AND THE CARIBBEAN	EDUCATION	15 912	WIRE TRANSFER	0.		
			AND THE CARIBBEAN	EDUCATION	13,013.	WIKE IKANSPEK	0.		
			EUROPE (INCLUDING	TECHNICAL ELECTORAL					
			ICELAND &	ASSISTANCE &					
			GREENLAND)	EDUCATION	15 485.	WIRE TRANSFER	0.		
			,		= 1, = 1 1				
				TECHNICAL ELECTORAL					
			MIDDLE EAST AND	ASSISTANCE &					
			NORTH AFRICA	EDUCATION	15,050.	WIRE TRANSFER	0.		
				TECHNICAL ELECTORAL					
			MIDDLE EAST AND	ASSISTANCE &					
			NORTH AFRICA	EDUCATION	14,681.	WIRE TRANSFER	0.		
			EUROPE (INCLUDING	TECHNICAL ELECTORAL					
			ICELAND &	ASSISTANCE &					
			GREENLAND)	EDUCATION	14,570.	WIRE TRANSFER	0.		
				TECHNICAL ELECTORAL					
				ASSISTANCE &					
			SOUTH ASIA	EDUCATION	13,334.	WIRE TRANSFER	0.		
				TECHNICAL ELECTORAL					
			CENTRAL AMERICA	ASSISTANCE &	4		_		
			AND THE CARIBBEAN	EDUCATION	12,500.	WIRE TRANSFER	0.		

Schedule	e F (Form 990)	SISTE	МЭ		32-1327033							
Part II	Continuation of	Grants and Other	Assistance to Organiza	tions or Entities Outside the	United States.	(Schedule F (Form 9	90), Part II, line 1	)				
1 (a) Nan	ne of organization	<b>(b)</b> IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)			
				TECHNICAL ELECTORAL								
			CENTRAL AMERICA	ASSISTANCE &								
			AND THE CARIBBEAN	EDUCATION	12,053.	WIRE TRANSFER	0.					
				TECHNICAL ELECTORAL								
				ASSISTANCE &			_					
			PACIFIC	EDUCATION	12,000.	WIRE TRANSFER	0.					
				TECHNICAL ELECTORAL								
			EAST ASIA AND THE	ASSISTANCE &								
			PACIFIC	EDUCATION	11,750.	WIRE TRANSFER	0.					
					,							
				TECHNICAL ELECTORAL								
			CENTRAL AMERICA	ASSISTANCE &								
			AND THE CARIBBEAN	EDUCATION	11,569.	WIRE TRANSFER	0.					
			L	TECHNICAL ELECTORAL								
				ASSISTANCE &	11 500	MIDE MDANGEED	0.					
			PACIFIC	EDUCATION	11,500.	WIRE TRANSFER	0.					
			RUSSIA AND	TECHNICAL ELECTORAL								
			NEIGHBORING	ASSISTANCE &								
			STATES	EDUCATION	11,274.	WIRE TRANSFER	0.					
				TECHNICAL ELECTORAL								
			EAST ASIA AND THE	ASSISTANCE &								
			PACIFIC	EDUCATION	10,569.	WIRE TRANSFER	0.					
				THE COUNTRY OF THE COUNTRY								
			EAST ASIA AND THE	TECHNICAL ELECTORAL ASSISTANCE &								
			PACIFIC	EDUCATION	10 500	WIRE TRANSFER	0.					
			FACIFIC	EDUCATION	10,300.	MIKE IKANSPEK	0.					
				TECHNICAL ELECTORAL								
			MIDDLE EAST AND	ASSISTANCE &								
			NORTH AFRICA	EDUCATION	10,000.	WIRE TRANSFER	0.					

Schedule F	F (Form 990)	SYSTE	MS		52-1527835 Page						
Part II	Continuation of	Grants and Other	Assistance to Organiza	tions or Entities Outside the	United States.	(Schedule F (Form 9	90), Part II, line 1	)			
1 (a) Name	of organization	<b>(b)</b> IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)		
			EUROPE (INCLUDING ICELAND & GREENLAND)	TECHNICAL ELECTORAL ASSISTANCE & EDUCATION	10,000.	WIRE TRANSFER	0.				
	EUROPE (INCLUDI ICELAND & GREENLAND)		ICELAND &	TECHNICAL ELECTORAL ASSISTANCE & EDUCATION	9,990.	WIRE TRANSFER	0.				
			RUSSIA AND NEIGHBORING STATES	TECHNICAL ELECTORAL ASSISTANCE & EDUCATION	9,874.	WIRE TRANSFER	0.				
			EUROPE (INCLUDING ICELAND & GREENLAND)	TECHNICAL ELECTORAL ASSISTANCE & EDUCATION	9,300.	WIRE TRANSFER	0.				
			EAST ASIA AND THE	TECHNICAL ELECTORAL ASSISTANCE & EDUCATION	9,000.	WIRE TRANSFER	0.				
			EUROPE (INCLUDING ICELAND & GREENLAND)	TECHNICAL ELECTORAL ASSISTANCE & EDUCATION	8,200.	WIRE TRANSFER	0.				
			EUROPE (INCLUDING ICELAND & GREENLAND)	TECHNICAL ELECTORAL ASSISTANCE & EDUCATION	7,750.	WIRE TRANSFER	0.				
			RUSSIA AND NEIGHBORING STATES	TECHNICAL ELECTORAL ASSISTANCE & EDUCATION	7,091.	WIRE TRANSFER	0.				
			MIDDLE EAST AND NORTH AFRICA	TECHNICAL ELECTORAL ASSISTANCE & EDUCATION	6,552.	WIRE TRANSFER	0.				

Page 2

Schedule F (Forr	11 990)	91915	110			Page 2			
Part II Con	tinuation of	Grants and Other	Assistance to Organiza	tions or Entities Outside the	United States.	(Schedule F (Form 9	990), Part II, line	1)	
1 (a) Name of or	ganization	<b>(b)</b> IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)		
				TECHNICAL ELECTORAL ASSISTANCE & EDUCATION	6 226	WIRE TRANSFER	0.		
				TECHNICAL ELECTORAL ASSISTANCE &	6,226.	WIRE TRANSFER	0.		
			PACIFIC	EDUCATION	6,000.	WIRE TRANSFER	0.		
			EAST ASIA AND THE	TECHNICAL ELECTORAL ASSISTANCE & EDUCATION	5,998.	WIRE TRANSFER	0.		
			MIDDLE EAST AND	TECHNICAL ELECTORAL ASSISTANCE & EDUCATION	5,355.	WIRE TRANSFER	0.		

Part III Grants and Other Assistance			tes. Complete i	f the organization answered "Yes" of	on Form 990, Part	IV, line 16.	
Part III can be duplicated if a	dditional space is needed	d					
(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)

# INTERNATIONAL FOUNDATION FOR ELECTORAL

Schedule F (Form 990) 2021 SYSTEMS
Part IV Foreign Forms

52-1527835 Page 4

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

Schedule F (Form 990) 2021

### INTERNATIONAL FOUNDATION FOR ELECTORAL

Schedule F (Form 990) 2021 SYSTEMS 52-1527835 Page 5

Part \	Supplemental Information  Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information. See instructions.	
PART	'I, LINE 2:	
IFES	MONITORS THE PROGRAMMATIC ACTIVITY OF THE ORGANIZATIONS AS WELL AS	
REVI	EWING THE BACKUP DOCUMENTATION SUBMITTED FROM THE FINANCIAL REPORTS.	
PART	l, LINE 3:	
THE	ORGANIZATION USES GAAP TO REPORT EXPENDITURES IN A FOREIGN REGION.	
		_
		_
		_
		_
		_
		_
		_
		_
		_

132075 12-20-21 Schedule F (Form 990) 2021

#### SCHEDULE I (Form 990)

Department of the Treasury Internal Revenue Service **Grants and Other Assistance to Organizations, Governments, and Individuals in the United States** 

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

► Attach to Form 990.

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

INTERNATIONAL FOUNDATION FOR ELECTORAL

2021 Open to Public

OMB No. 1545-0047

Open to Publi Inspection

Name of the organization INTERNATION SYSTEMS	ONAL FOUN	DATION FOR	ELECTORAL				$\begin{array}{c} \textbf{Employer identification number} \\ 52-1527835 \end{array}$
Part I General Information on Grants ar	nd Assistance						
<ol> <li>Does the organization maintain records to criteria used to award the grants or assis</li> <li>Describe in Part IV the organization's pro</li> </ol>	tance?						
Part II Grants and Other Assistance to Description recipient that received more than \$	Domestic Organiz	ations and Domesti	c Governments. C	complete if the org	anization answered "Y	es" on Form 990, Part	IV, line 21, for any
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
AMERICAN BAR ASSOCIATION 1050 CONNECTICUT AVENUE, NW, STE 40							TECHNICAL ELECTORAL
WASHINGTON, DC 20036  NATIONAL DEMOCRATIC INSTITUTE FOR INTERNATIONAL AFFAIRS - 455  MASSACHUSETTS AVE., STE 800 -	36-0723150	50106	1,013,933.	0.			ASSISTANCE & EDUCATION TECHNICAL ELECTORAL
WASHINGTON, DC 20001	52-1338892	501C3	65,304.	0.			ASSISTANCE & EDUCATION
<ul> <li>2 Enter total number of section 501(c)(3) ar</li> <li>3 Enter total number of other organizations</li> </ul>	•	•	e line 1 table				

Schedule I (Form 990) 2021

Schedule I (Form 990) 2021 SYSTEMS					52-1527835	Page 2
Part III Grants and Other Assistance to Domestic Individuals.  Part III can be duplicated if additional space is needed.	. Complete if the	organization answe	ered "Yes" on Form 9	990, Part IV, line 22.		
(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash as	ssistance
Part IV Supplemental Information. Provide the information req	uired in Part I, lin	e 2; Part III, column	(b); and any other ac	Iditional information.		
PART I, LINE 2:						
GRANT RECIPIENTS SUBMIT INVOICES FO	OR EXPENS	ES INCURRE	D AGAINST	BUDGET. THE		
INVOICES ARE REVIEWED TO ENSURE EXI	PENSES AR	E IN LINE	WITH THE A	PPROVED		
BUDGET AND PAYMENTS ARE MADE AGAINS	ST THE IN	VOICE.				

#### SCHEDULE J (Form 990)

Department of the Treasury

**Compensation Information** 

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

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

Attach to Form 990.

**2021** 

OMB No. 1545-0047

Open to Public Inspection

Internal Revenue Service Name of the organization

Part I Questions Regarding Compensation

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

INTERNATIONAL FOUNDATION FOR ELECTORAL

SYSTEMS

Employer identification number 52-1527835

			Yes	No
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.			
	First-class or charter travel  X Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments  Health or social club dues or initiation fees			
	Discretionary spending account  Personal services (such as maid, chauffeur, chef)			
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or			
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b	X	
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors,			
	trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?	2	Х	
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.			
	X Compensation committee			
	☐ Independent compensation consultant ☐ Independent Compensation Compensati			
	Form 990 of other organizations  X 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:			
а	Receive a severance payment or change-of-control payment?	4a		х
	Participate in or receive payment from a supplemental nonqualified retirement plan?	4b		Х
	Participate in or receive payment from an equity-based compensation arrangement?	4c		Х
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the revenues of:			
а	The organization?	5a		Х
	Any related organization?	5b		Х
	If "Yes" on line 5a or 5b, describe in Part III.			
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the net earnings of:			
а	The organization?	6a		Х
b	Any related organization?	6b		Х
	If "Yes" on line 6a or 6b, describe in Part III.			
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments			
	not described on lines 5 and 6? If "Yes," describe in Part III	7		Х
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the			
	initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8		Х
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 53 4958.6(c)?	a		

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

Schedule J (Form 990) 2021

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

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

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

(A) Name and Title		(B) Breakdown of W	/-2 and/or 1099-MISC compensation	and/or 1099-NEC	(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B)	
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation			reported as deferred on prior Form 990	
(1) PETER ERBEN	(i)	331,525.	0.	97,272.	0.	19,399.	448,196.	0.	
COUNTRY DIRECTOR	(ii)	0.	0.	0.	0.	0.	0.	0.	
(2) ANTHONY BANBURY	(i)	312,713.	0.	2,322.	19,204.	28,091.	362,330.	0.	
PRESIDENT & CEO	(ii)	0.	0.	0.	0.	0.	0.	0.	
(3) WILLIAM ROWLAND	(i)	214,966.	0.	81,148.	0.	19,399.	315,513.	0.	
COUNTRY DIRECTOR	(ii)	0.	0.	0.	0.	0.	0.	0.	
(4) PAUL GEURIN	(i)	223,198.	0.	67,828.	0.	19,399.	310,425.	0.	
COUNTRY DIRECTOR	(ii)	0.	0.	0.	0.	0.	0.	0.	
(5) GENET MENELIK	(i)	174,883.	0.	116,454.	2,400.	13,380.	307,117.	0.	
DEPUTY COUNTRY DIRECTOR (UNTIL 1/202	(ii)	0.	0.	0.	0.	0.	0.	0.	
(6) ANNA WIKTOROWSKA	(i)	275,394.	0.	19,247.	0.	8,212.	302,853.	0.	
COUNTRY DIRECTOR	(ii)	0.	0.	0.	0.	0.	0.	0.	
(7) MICHAEL MEENAN	(i)	228,268.	0.	3,564.	14,247.	31,480.	277,559.	0.	
	(ii)	0.	0.	0.	0.	0.	0.	0.	
(8) CHAD VICKERY	(i)	220,891.	0.	1,242.	13,791.	30,299.	266,223.	0.	
	(ii)	0.	0.	0.	0.	0.	0.	0.	
(9) N CATHERINE BARNES	(i)	236,217.	0.	1,242.	14,265.	14,152.	265,876.	0.	
VP, GLOBAL GROWTH & OUTREACH	(ii)	0.	0.	0.	0.	0.	0.	0.	
(10) MICHAEL SVETLIK	(i)	226,120.	0.	1,242.	11,423.	13,011.	251,796.	0.	
VP, PROGRAMS (UNTIL 9/2022)	(ii)	0.	0.	0.	0.	0.	0.	0.	
(11) KATHERINE ELLENA	(i)	177,002.	0.	539.	10,586.	11,329.	199,456.	0.	
VP, PROGRAMS	(ii)	0.	0.	0.	0.	0.	0.	0.	
	(i)								
	(ii)								
	(i)								
	(ii)								
	(i)								
	(ii)								
	(i)								
	(ii)								
	(i)								
	(ii)								

Part III Supplemental information
Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.
PART I, LINE 1A:
THE FOLLOWING EMPLOYEES RECEIVED HOUSING ALLOWANCE DURING THE YEAR, WHICH
IS TAXABLE AND REPORTED ON COLUMN B(III) OF PART II OF SCHEDULE J:
GENET MENELIK \$38,400
PETER ERBEN \$43,200
WILLIAM ROWLAND \$81,148
PAUL GEURIN \$18,000

#### SCHEDULE O (Form 990)

Department of the Treasury

Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

Name of the organization

INTERNATIONAL FOUNDATION FOR ELECTORAL SYSTEMS

Employer identification number 52-1527835

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION: IFES IS DEDICATED TO SUPPORTING DEMOCRACY WORLDWIDE THROUGH COLLABORATION WITH CIVIL SOCIETY, PUBLIC INSTITUTIONS, AND THE PRIVATE SECTOR TO FACILITATE ELECTIONS, ENSURE ALL PEOPLE CAN PARTICIPATE IN POLITICAL PROCESES, HALT CORRUPTION AND BUILD DEMOCRATIC TRUST, AND ENSURE THAT TECHNOLOGY SUPPORTS RATHER THAN UNDERMINES DEMOCRACY. FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES: IFES PROVIDES TARGETED TECHNICAL ASSISTANCE TO STRENGTHEN TRANSITIONAL DEMOCRACIES AS WELL AS PROVIDE TECHNICAL ELECTORAL ASSISTANCE ACROSS MANY AREAS OF DEMOCRACY DEVELOPMENT. THESE INCLUDE EMPOWERING THE UNDERREPRESENTED TO PARTICIPATE IN THE POLITICAL PROCESS, EDUCATION IN ELECTORAL ASSISTANCE, CIVIL SOCIETY, GOVERNANCE, WOMEN'S RIGHTS AND RULE OF LAW. EXPENSES \$ 56,243,508. INCL GRANTS OF \$ 4,888,941. REVENUE \$ 80,199. FORM 990, PART V, LINE 4B, LIST OF FOREIGN COUNTRIES: ALBANIA, ARMENIA, BANGLADESH, BURMA SRI LANKA, CONGO, DEM REP, EL SALVADOR, ETHIOPIA, CZECH REPUBLIC, THE GAMBIA, GEORGIA, GUATEMALA, GUINEA, HAITI, HONDURAS, INDONESIA, IRAQ, KENYA, KYRGYZSTAN, LIBYA, MALAWI, MACEDONIA, MALI, NIGER, NIGERIA, NEPAL, PAKISTAN, PAPUA-NEW GUINEA, SERBIA, SUDAN, TUNISIA, TANZANIA, UGANDA, UKRAINE, BURKINA FASO, ZAMBIA

Schedule O (Form 990) 2021 Page 2

Name of the organization INTERNATIONAL FOUNDATION FOR ELECTORAL SYSTEMS

Employer identification number 52-1527835

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

IFES BOARD RECEIVES A COPY OF THE 990 IN ADVANCE OF FILING THE DOCUMENT AND IT IS PRESENTED TO ALL BOARD MEMBERS AT THE SUBSEQUENT QUARTERLY MEETING.

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

IFES' CONFLICT OF INTEREST POLICY IS REVIEWED ANNUALLY BY MANAGEMENT AND
LEGAL COUNSEL. ANY REVISIONS DEEMED APPROPRIATE ARE SUBMITTED TO THE BOARD
OF DIRECTORS FOR ITS REVIEW, CONSIDERATION, AND ADOPTION. DIRECTORS

COMPLETE AND FILE WITH THE SECRETARY A QUESTIONNAIRE AS TO EACH'S KNOWLEDGE
OF AND COMPLIANCE WITH THE POLICY AND DISCLOSE THROUGH THAT PROCESS ANY
KNOWN OR SUSPECTED CONFLICT SO THAT THE DISINTERESTED DIRECTORS CAN ADDRESS
AND RESOLVE THE MATTER.

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

SURVEYS AND MARKET DATA AVAILABLE VIA THE INTERNET AND DC BASED RECRUITERS.

THE CEO'S COMPENSATION IS SET BY THE CHAIRMAN OF THE BOARD AND THE

EXECUTIVE COMMITTEE. THE CURRENT CEO'S COMPENSATION IS WITHIN THE

ESTABLISHED COMPENSATION PLAN RANGE FOR THE POSITION. THE HUMAN RESOURCES

DIRECTOR OBTAINS MULTIPLE COMPENSATION SURVEYS AND SALARY DATA, WHEREBY

EMPLOYEES AND OFFICERS ARE RANKED AND COMPARED TO THE COMPENSATION

STRUCTURE AND PAY BANDING PLAN AND THEN MAKES RECOMMENDATIONS TO THE CEO.

FORM 990, PART VI, LINE 17, LIST OF STATES RECEIVING COPY OF FORM 990:
CA,CO,CT,DC,FL,IL,MD,NY,OH,PA,RI,VA,MT

Schedule O (Form 990) 2021 Page **2** 

Schedule O (Form 990) 2021	Page 2
Name of the organization INTERNATIONAL FOUNDATION FOR ELECTORAL SYSTEMS	Employer identification number 52-1527835
FINANCIAL STATEMENTS, CONFLICT OF INTEREST POLICY AND GOVE	ERNING DOCUMENTS
ARE AVAILABLE UPON REQUEST FOR THE SAME PERIOD OF DISCLOSE	JRE AS SET FORTH
IN SECTION 6104(D).	
FORM 990, PART IX, LINE 11G, OTHER FEES:	
CONSULTING:	
PROGRAM SERVICE EXPENSES	13,487,398.
MANAGEMENT AND GENERAL EXPENSES	1,373,018.
FUNDRAISING EXPENSES	26,228.
TOTAL EXPENSES	14,886,644.
TOTAL OTHER FEES ON FORM 990, PART IX, LINE 11G, COL A	14,886,644.
FORM 990, PART VI, LINE 14	
IFES RECEIVES GRANTS AND CONTRACTS FROM THE US GOVERNMENT	, WHEREBY WE
HAVE TO APPLY THE REGULATIONS CONTAINED IN OMB CIRCULAR A	133 AND THE
FEDERAL ACQUISITION REGULATIONS . THESE REQUIREMENTS STATE	E THAT WE MUST
RETAIN CERTAIN RECORDS PERMANENTLY AND CERTAIN RECORDS FOR	R A PERIOD OF
SIX YEARS FROM THE DATE OF FINAL PAYMENT ON A GRANT OR COL	NTRACT. THE
DOCUMENT RETENTION AND DESTRUCTION POLICY OF IFES APPLIES	TO ALL
RECORDS CREATED BY IFES OR OTHERWISE STORES AND UTILIZED 1	FOR IFES
PROJECTS OR ADMINISTRATIVE PURPOSES. RECORDS THAT ARE NOT	LISTED IN THE
RECORD RETENTION SCHEDULE WILL BE RETAINED FOR THE LENGTH	OF TIME
APPLICABLE TO SUBSTANTIALLY SIMILAR RECORDS LISTED IN THE	SCHEDULE.

#### SCHEDULE R (Form 990)

Department of the Treasury Internal Revenue Service

### **Related Organizations and Unrelated Partnerships**

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

Attach to Form 990.

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

Name of the organization INTERNATIONAL FOUNDATION FOR ELECTORAL SYSTEMS

Employer identification number 52-1527835

OMB No. 1545-0047

Open to Public

Inspection

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>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
INTERNATIONAL FOUNDATION FOR ELECTORAL					INTERNATIONAL
SYSTEMS, WEST SEYLAN TOWER, NO 8A/90, GALLE					FOUNDATION FOR
ROAD, COLUMBO, SRI LANKA	ELECTION MANAGEMENT	SRI LANKA	457,132.	273.	ELECTORAL SYSTEMS
INTERNATIONAL FOUNDATION FOR ELECTORAL					INTERNATIONAL
SYSTEMS, KOFI ANNAN ST CAPE POINT, BAKAU,					FOUNDATION FOR
KANIFING MUNICIPA, THE GAMBIA	ELECTION MANAGEMENT	THE GAMBIA	2,641,411.	0.	ELECTORAL SYSTEMS
INTERNATIONAL FOUNDATION FOR ELECTORAL					INTERNATIONAL
SYSTEMS, HAILE SELASSIE AVE, PO BOX 31057,					FOUNDATION FOR
DAR ES SALAAM, TANZANIA	ELECTION MANAGEMENT	TANZANIA	77,372.	50.	ELECTORAL SYSTEMS
INTERNATIONAL FOUNDATION FOR ELECTORAL					INTERNATIONAL
SYSTEMS, AP4, CAPITOLE L MAZURIE, BEREGES DU					FOUNDATION FOR
LAC, TUNISIA	ELECTION MANAGEMENT	TUNISIA	1,454,460.	459.	ELECTORAL SYSTEMS

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>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section	<b>(f)</b> Direct controlling entity	Section 5 contr ent	
				501(c)(3))		Yes	No

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

52-1527835 Schedule R (Form 990)

Part I Continuation of Identification of Disregarded Entities

(a)	(b)	(c)	(d)	(e)	(f)
Name, address, and EIN of disregarded entity	Primary activity	Legal domicile (state or foreign country)	Total income	End-of-year assets	Direct controlling entity
NTERNATIONAL FOUNDATION FOR ELECTORAL					INTERNATIONAL
YSTEMS, PO BOX 5348, PORT MORESBY,					FOUNDATION FOR
APUA-NEW GUINEA	ELECTION MANAGEMENT	PAPUA-NEW GUINEA	1,808,782.	450.	ELECTORAL SYSTEMS

SYSTEMS

Page 2

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. Part III

	organization treates as a partitioning stating and tax year.																
(a)	(b)	(c)	(d)	(e)	(f)	(g)	(1	h)	(i)	(j	i)	(k)					
Name, address, and EIN of related organization	Primary activity	Legal domicile	Direct controlling entity	Direct controlling	Direct controlling	Direct controlling P	ling Predominant income	Share of total Share of		Share of total		Disproportionat		Disproportionate Code V-UBI		ral or	Percentage ownership
of related organization		(state or foreign		(related, unrelated, excluded from tax under sections 512-514)	income	end-of-year assets	allocations?		amount in box 20 of Schedule	partner?	ownership						
		country)		sections 512-514)		466616	Yes	No	K-1 (Form 1065)	Yes	No						
	1																
	1																
	1																
	1																
	1		1	1		l	1		1								

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)	(b)	(c)	(d)	(e)	(f)	(g)	(h)	Sec.	i) ction
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign country)	Direct controlling entity	Type of entity (C corp, S corp, or trust)	Share of total income	Share of end-of-year assets	Percentage ownership		(i) ction (b)(13) rolled tity?
		Couriery)						Yes	No
								Ь	<u> </u>
								<b>↓</b>	<u> </u>

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

Yes No

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

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?

b Gift, grant, or capital contribution for related organization(s) c Gift, grant, or capital contribution from related organization(s) c Loans or loan guarantees to or for related organization(s) c Loans or loan guarantees to or for related organization(s) c Loans or loan guarantees by related organization(s) f Dividends from related organization(s) f Dividends f	а	Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	/			1a				
Giff, grant, or capital contribution from related organization(s)  Loans or foat guarantees to or frelated organization(s)  Dividends from related organization(s)  Sue of assets to related organization(s)  Purchase of assets from related organization(s)  1						1b				
de Loans or loan guarantees to or for related organization(s) e Loans or loan guarantees to yre leated organization(s) f Dividends from related organization(s)	С	Gift, grant, or capital contribution from related organization(s)				1c				
Comment   Comm	d	Loans or loan guarantees to or for related organization(s)				1d				
f Dividends from related organization(s)  g Sale of assets to related organization(s)  h Purchase of assets from related organization(s)  Exchange of assets with related organization(s)  Lease of facilities, equipment, or other assets to related organization(s)  Performance of services or membership or fundraising solicitations for related organization(s)  Performance of services or membership or fundraising solicitations by related organization(s)  Performance of services or membership or fundraising solicitations by related organization(s)  Performance of services or membership or fundraising solicitations by related organization(s)  Performance of services or membership or fundraising solicitations by related organization(s)  Performance of services or membership or fundraising solicitations by related organization(s)  This is a standard organization organizati	е	Loans or loan guarantees by related organization(s)				1e				
g Sale of assets to related organization(s)   Tig		, , , , , , , , , , , , , , , , , , , ,								
g Sale of assets to related organization(s)   Tig	f	Dividends from related organization(s)				1f				
h Purchase of assets from related organization(s) i Exchange of asset with related organization(s) j Lease of facilities, equipment, or other assets to related organization(s) k Lease of facilities, equipment, or other assets from related organization(s) Terrormance of services or membership or fundraising solicitations for related organization(s) Terrormance of services or membership or fundraising solicitations by related organization(s) Terrormance of services or membership or fundraising solicitations by related organization(s) Terrormance of services or membership or fundraising solicitations by related organization(s) Terrormance of services or membership or fundraising solicitations by related organization(s) Terrormance of services or membership or fundraising solicitations by related organization(s) Terrormance of services or membership or fundraising solicitations by related organization(s) Terrormance of services or membership or fundraising solicitations by related organization(s) Terrormance of services or membership or fundraising solicitations by related organization(s) Terrormance of services or membership or fundraising solicitations by related organization(s) Terrormance or facilities, equipment, mailing lists, or other assets with related organization(s) Terrormance of services or membership or fundraising solicitations by related organization(s) Terrormance of services or membership or fundraising solicitations by related organization(s) Terrormance of services or membership or fundraising solicitations by related organization(s) Terrormance of services or membership or fundraising solicitations by related organization(s) Terrormance of services or membership or fundraising solicitations by related organization(s) Terrormance of services or membership or fundraising solicitations by related organization(s) Terrormance of services or membership or fundraising solicitations by related organization(s) Terrormance of services or membership or fundraising solicitations by related organization(s)						1g				
i Exchange of assets with related organization(s) j Lease of facilities, equipment, or other assets for related organization(s) k Lease of facilities, equipment, or other assets from related organization(s) l Performance of services or membership or fundraising solicitations for related organization(s) l Performance of services or membership or fundraising solicitations by related organization(s) l Sharing of facilities, equipment, mailing lists, or other assets with related organization(s) l Sharing of paid employees with related organization(s) l Performance of services or membership or fundraising solicitations by related organization(s) l Sharing of paid employees with related organization(s) l Performance of services or membership or fundraising solicitations by related organization(s) l Sharing of paid employees with related organization(s) l Performance of services or membership or fundraising solicitations by related organization(s) l Performance of services or membership or fundraising solicitations by related organization(s) l Diputation of the services or membership or fundraising solicitations by related organization(s) l Diputation of the services or membership or fundraising solicitations by related organization(s) l Diputation or services or membership or fundraising solicitations by related organization(s) l Diputation or services or membership or fundraising solicitations by related organization(s) l Diputation or services or membership or fundraising solicitations by related organization(s) l Diputation or services or membership or fundraising solicitations by related organization(s) l Diputation or services or membership or fundraising solicitations by related organization(s) l Diputation or services or membership or fundraising solicitations by related organization(s) l Diputation or services or membership or fundraising solicitations by related organization(s) l Diputation or services or membership or fundraising solicitations by related organization(s) l Diputation or services or membershi	h	Purchase of assets from related organization(s)				1h				
j Lease of facilities, equipment, or other assets to related organization(s)  k Lease of facilities, equipment, or other assets from related organization(s)  1 Performance of services or membership or fundraising solicitations for related organization(s)  1 Performance of services or membership or fundraising solicitations for related organization(s)  1 Im  1 Performance of services or membership or fundraising solicitations for related organization(s)  1 Im  1 Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)  1 Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)  1 Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)  1 Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)  1 Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)  1 Description of tacilities, equipment, mailing lists, or other assets with related organization(s)  1 Description of tacilities, equipment, mailing lists, or other assets with related organization(s)  1 Description of tacilities, equipment, mailing lists, or other assets with related organization(s)  1 Description of tacilities, equipment, mailing lists, or other assets with related organization(s)  1 Description of tacilities, equipment, mailing lists, or other assets with related organization(s)  1 Description of tacilities, equipment, mailing lists, or other assets with related organization(s)  1 Description of tacilities, equipment, mailing lists, or other assets with related organization(s)  1 Description of tacilities, equipment, mailing lists, or other assets with related organization(s)  1 Description of tacilities, equipment, mailing lists, or other assets with related organization(s)  1 Description of tacilities, equipment, mailing lists, or other assets with related organization(s)  1 Description of tacilities, equipment, mailing lists, or other assets with related org	i	Exchange of assets with related organization(s)				1i				
k Lease of facilities, equipment, or other assets from related organization(s)  1 Performance of services or membership or fundraising solicitations for related organization(s)  1 Performance of services or membership or fundraising solicitations by related organization(s)  1 Im	j	Lease of facilities, equipment, or other assets to related organization(s)				<b>1</b> j				
Performance of services or membership or fundraising solicitations for related organization(s)   1m										
Performance of services or membership or fundraising solicitations for related organization(s)   1m	k	Lease of facilities, equipment, or other assets from related organization(s)				1k				
m Performance of services or membership or fundraising solicitations by related organization(s)  n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)  o Sharing of paid employees with related organization(s)  p Reimbursement paid to related organization(s) for expenses  q Reimbursement paid by related organization(s) for expenses  r Other transfer of cash or property for related organization(s)  s Other transfer of cash or property from related organization(s)  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)  Name of related organization  (c)  Amount involved  Method of determining amount involved  Method of determining amount involved  (d)  Method of determining amount involved						11				
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)  Naming of paid employees with related organization(s)  P Reimbursement paid to related organization(s) for expenses  Reimbursement paid by related organization(s) for expenses  Reimbursement paid by related organization(s) for expenses  Other transfer of cash or property to related organization(s)  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.  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)  Amount involved  Method of determining amount involved  Method of determining amount involved						1m				
o Sharing of paid employees with related organization(s)  p Reimbursement paid to related organization(s) for expenses  q Reimbursement paid to related organization(s) for expenses  r Other transfer of cash or property to related organization(s)  s Other transfer of cash or property from related organization(s)  s It learnswer 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  Transaction  (c)  Amount involved  Method of determining amount involved  Method of determining amount involved  (d)  Method of determining amount involved  (d)  Transaction  (e)  Transaction  (g)  Transaction  (hethod of determining amount involved)  Method of determining amount involved  (d)  Method of determining amount involved										
p Reimbursement paid to related organization(s) for expenses q Reimbursement paid by related organization(s) for expenses 1										
q Reimbursement paid by related organization(s) for expenses										
q Reimbursement paid by related organization(s) for expenses  r Other transfer of cash or property for related organization(s)  s Other transfer of cash or property from related organization(s)  1	р	p Reimbursement paid to related organization(s) for expenses								
r Other transfer of cash or property to related organization(s)  s Other transfer of cash or property from related organization(s)  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  Transact						1q				
s Other transfer of cash or property from related organization(s)  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  Transaction  type (a-s)  Method of determining amount involved  Method of determining amount involved  (b)  Method of determining amount involved  Method of determining amount involved  (c)  Amount involved  Method of determining amount involved  (d)  Method of determining amount involved  (d)  Method of determining amount involved  (e)  Method of determining amount involved  (f)  Method of determining amount involved  (h)  Meth										
s Other transfer of cash or property from related organization(s)  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  Transaction  type (a-s)  Method of determining amount involved  Method of determining amount involved  (d)  Method of determining amount involved  (a)  Method of determining amount involved  (b)  Transaction  Transacti	r	Other transfer of cash or property to related organization(s)				1r				
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)  Amount involved  Method of determining amount involved  1)  2)  (a) Method of determining amount involved  (b) Method of determining amount involved  Method of determining amount involved  (c) Amount involved  Method of determining amount involved  (d) Method of determining amount involved  (d) Method of determining amount involved  (e) Method of determining amount involved  (e) Method of determining amount involved  (f) Method of determining amount involved  (h) Method of determining amount involved						1s				
(a) Name of related organization (b) Transaction type (a-s) (c) Amount involved Method of determining amount involved (d) Method of d) Method of determining (d) Method of d) Method of d) Method of d							•			
type (a-s)  1)  2)  3)  4)  6)		•								
type (a·s)  1)  2)  3)  4)  6)		Name of related organization				nvolved				
2) 3) 4) 5)			type (a-s)							
2) 3) 4) 5)										
3) 4) 5) 6)	1)									
3) 4) 5) 6)										
3) 4) 5) 6)	2)									
6)	-									
6)	3)									
6)	•									
6)	4)									
6)										
6)	5)									
	6)									
		3 11-17-21		•	Schedule	R (Form	990) 2021			

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)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	Are all partners sec. 501(c)(3) orgs.?  Yes No	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproptionat allocatio	Code V-UBI amount in box 2 of Schedule K-	General of managing partner?  Yes No	(k) Percentage ownership

## INTERNATIONAL FOUNDATION FOR ELECTORAL

Schedule R	(Form 990) 2021 SYSTEMS	52-152/835	Page 5
Part VII	Supplemental Information		
	Provide additional information for responses to questions on Schedule R. See instructions.		

132165 11-17-21 Schedule R (Form 990) 2021