Performance				** PUBLIC DISCLOSURE CC)PY **		
Form CMU Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private formation.) Dure to extra social security numbers on this form as it may be made public. Depart to Public A For the 2018 calendary year, or tax year beginning A PR 1, 2018 and ending MAR 31, 2019 D D Englishing D Englishing A Prior 100 2018 B A Prior 100 2018 B A Prior 100 2018		Ω	00	Return of Organization Exempt F	From I	ncome Tax	OMB No. 1545-0047
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Internal Become Stories ► Go to www.urs.gov/Corm.990 for instructions and the latest information. Inspection A For the 2018 calendary ser, or tax year beginning APR 1, 2013 and ending MR 31, 2019 B creat, and the state of organization D Employer identification number 81,-1397590 B creat, and the state of organization B 1, 2019 81,-1397590 Image and the state of organization B 1,-1397590 Image and the state of organization C12, 705-8749 Image and address of principal officer AMANDA COSBY File Mail and drives of principal officer AMANDA COSBY Image and address of principal officer AMANDA COSBY File States a group roturn for subcordinates? Yees (X No H(a) is this a group roturn for subcordinates? I trace accempt status: I Soft(c) 4 (insertino.) 4947(a)(1) or USZ Version I trace accempt status: I Corporation Trace accempt status: I WorkLIA A ORG H(a) is this a group roturn for subcordinates? Yees (X No H(b) or al address of principal officer AMANDA COSBY I trace accempt status: No I address of principal officer AMANDA COsBY </td <td>Depa</td> <td colspan="5">Department of the Treasury Do not enter social security numbers on this form as it may be made public.</td> <td>Open to Public</td>	Depa	Department of the Treasury Do not enter social security numbers on this form as it may be made public.					Open to Public
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PO BOX 53347 (212)705-8749 City or town, state or province, country, and ZIP or foreign postal code (212)705-8749 WASHINGTON, DC 20009 Hain state a group return Fname and address of principal officer, AMANDA COSBY FName and address of principal officer, AMANDA COSBY I trax exempt status: X 501(b)(3) 501(c)(1) ◀ (insert no.) 4947(a)(1) or J website: ▶ WW, MALALA. ORG H(b) we at subordinates incluse? Yes X No H(c) acup exemption number ▶ K Form of organization: X Corporation Trust Association Other ▶ K Hon wat and the second of the legal domical: DE Part I Summary I briefly describe the organization's mission or most significant activities: MALALA F UND I S WORKING TOWARD A WORLD WHERE ALL GIRLS CAN LEARN FOR 12 YEARS AND LEAD WITHOUT FEAR. 3 8 2 Check this box ▶ If the organization discontinued its operations or disposed of more than 25% of its net assets. 3 3 Number of indipendent voting members of the governing body (Part V, line 1a) 4 8 4 Number of indipendent voting members of the governing body (Part V, line 1a) 9, 745, 235, 13, 232, 612. b Net unrelated business revenue form Part VIII, column (A), line 3, 4, and 7d) 10, 854, 9, 612. 0. 0. 0. 0. 0.<		_ chang ∏Initial					
City or town, state or province, country, and ZIP or foreign postal code G @coss.neadpts 5 14,372,016. MashILINGTON, DC 20009 WASHILINGTON, DC 20009 H(h) is this a group return for subordinates? Yes X No SAME AS C ABOVE H(b) Are all subordinates? Yes X No I Tax-exempt status: X 501(c)(1) (insert no.) 4947(a)(1) or 200 H(b) Are all subordinates? Yes No I Brefly describe the organization: X form of organization: X form of reganization: X fore of fore reganization: X form of reg		Final			Room/suite		
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9 Program service revenue (Part VIII, line 2g) 0.000 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 10, 854.9, 612. 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 0.000 12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 9, 756, 089.13, 242, 224. 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 4, 025, 030.5, 049, 773. 14 Benefits paid to or for members (Part IX, column (A), line 4) 0.000 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 2, 233, 724.2, 221, 347. 16a Professional fundraising fees (Part IX, column (A), line 25) 1, 146, 159. 17 Other expenses (Part IX, column (D), line 25) 1, 146, 159. 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 8, 824, 640.10, 167, 334. 19 Revenue less expenses. Subtract line 18 from line 12 931, 449.3, 074, 890. 20 Total assets (Part X, line 16) 16, 255, 748.20, 229, 882. 21 Total liabilities (Part X, line 26) 4, 536, 683.5, 435, 805. 22 Net assets or fund balances. Subtract line 21 from line 20 11, 719, 065.14, 794, 077.		0	Contributions	and grants (Part VIII line 1b)			
11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 0. 0. 0. 12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 9, 756, 089. 13, 242, 224. 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 4, 025, 030. 5, 049, 773. 14 Benefits paid to or for members (Part IX, column (A), line 4) 0. 0. 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 2, 233, 724. 2, 221, 347. 16a Professional fundraising fees (Part IX, column (D), line 25) 1, 146, 159. 0. 0. 17 Other expenses (Part IX, column (A), line 11a.11d, 11f.24e) 8, 824, 640. 10, 167, 334. 19 Revenue less expenses. Subtract line 18 from line 12 931, 449. 3, 074, 890. 12 Total assets (Part X, line 16) 16, 255, 748. 20, 229, 882. 21 Total liabilities (Part X, line 26) 4, 536, 683. 5, 435, 805. 22 Net assets or fund balances. Subtract line 21 from line 20 11, 719, 065. 14, 794, 077. Part II Signature Block Under penalties of perjury, I declare that	nue					-	
11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 0. 0. 0. 12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 9, 756, 089. 13, 242, 224. 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 4, 025, 030. 5, 049, 773. 14 Benefits paid to or for members (Part IX, column (A), line 4) 0. 0. 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 2, 233, 724. 2, 221, 347. 16a Professional fundraising fees (Part IX, column (D), line 25) 1, 146, 159. 0. 0. 17 Other expenses (Part IX, column (A), line 11a.11d, 11f.24e) 8, 824, 640. 10, 167, 334. 19 Revenue less expenses. Subtract line 18 from line 12 931, 449. 3, 074, 890. 12 Total assets (Part X, line 16) 16, 255, 748. 20, 229, 882. 21 Total liabilities (Part X, line 26) 4, 536, 683. 5, 435, 805. 22 Net assets or fund balances. Subtract line 21 from line 20 11, 719, 065. 14, 794, 077. Part II Signature Block Under penalties of perjury, I declare that	evel		•			10,854.	-
12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 9,756,089. 13,242,224. 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 4,025,030. 5,049,773. 14 Benefits paid to or for members (Part IX, column (A), line 4) 0. 0. 15 Salaries, other compensation, employee benefits (Part IX, column (A), line 5:10) 2,233,724. 2,221,347. 16a Professional fundraising fees (Part IX, column (D), line 25) 1,146,159. 0. 0. 17 Other expenses (Part IX, column (A), line 21) 0,167,334. 9,31,449. 3,074,890. 19 Revenue less expenses. Subtract line 18 from line 12 931,449. 3,074,890. 3,074,890. 20 Total assets (Part X, line 16) 16,255,748. 20,229,882. 4,536,683. 5,435,805. 21 Total liabilities (Part X, line 26) 2 11,719,065. 14,794,077. 22 Net assets or fund balances. Subtract line 21 from line 20 11,719,065. 14,794,077. 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	č						
13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 4,025,030. 5,049,773. 14 Benefits paid to or for members (Part IX, column (A), line 4) 0. 0. 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 2,233,724. 2,221,347. 16a Professional fundraising expenses (Part IX, column (A), line 11e) 0. 0. 0. b Total fundraising expenses (Part IX, column (D), line 25) 1,146,159. 2,565,886. 2,896,214. 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 1,146,159. 2,565,7886. 2,896,214. 19 Revenue less expenses. Subtract line 18 from line 12 931,449. 3,074,890. 20 Total assets (Part X, line 16) 16,255,748. 20,229,882. 21 Total liabilities (Part X, line 26) 4,536,683. 5,435,805. 22 Net assets or fund balances. Subtract line 21 from line 20 11,719,065. 14,794,077. Vert assets or fund balances. Subtract line 21 from line 20 11,719,065. 14,794,077. Vert assets or fund balances. Subtract line 21 from line 20 11,719,065. 14,794,077. <td< td=""><td></td><td></td><td></td><td></td><td></td><td>9,756,089.</td><td>13,242,224.</td></td<>						9,756,089.	13,242,224.
14 Benefits paid to or for members (Part IX, column (A), line 4) 0.0000 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 2,233,724.2,221,347. 16a Professional fundraising expenses (Part IX, column (A), line 11e) 0.00000 b Total fundraising expenses (Part IX, column (D), line 25) 1,146,159. 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 2,565,8866.2,896,214. 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 8,824,640.10,167,334. 19 Revenue less expenses. Subtract line 18 from line 12 931,449.3,074,890. 20 Total assets (Part X, line 16) 16,255,748.20,229,882. 21 Total liabilities (Part X, line 26) 11,719,065.14,794,077. 22 Net assets or fund balances. Subtract line 21 from line 20 11,719,065.14,794,077. 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		13				4,025,030.	5,049,773.
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17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 2,565,886. 2,896,214. 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 8,824,640. 10,167,334. 19 Revenue less expenses. Subtract line 18 from line 12 931,449. 3,074,890. 20 Total assets (Part X, line 16) 16,255,748. 20,229,882. 21 Total liabilities (Part X, line 26) 4,536,683. 5,435,805. 22 Net assets or fund balances. Subtract line 21 from line 20 11,719,065. 14,794,077. 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	sus	16a	Professional f	undraising fees (Part IX, column (A), line 11e)		0.	0.
17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 2,565,886. 2,896,214. 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 8,824,640. 10,167,334. 19 Revenue less expenses. Subtract line 18 from line 12 931,449. 3,074,890. 20 Total assets (Part X, line 16) 16,255,748. 20,229,882. 21 Total liabilities (Part X, line 26) 4,536,683. 5,435,805. 22 Net assets or fund balances. Subtract line 21 from line 20 11,719,065. 14,794,077. 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	×p.	b	Total fundrais	ing expenses (Part IX, column (D), line 25) 🛛 🕨 🔢 1 , 146 , 15	59.		
19 Revenue less expenses. Subtract line 18 from line 12931,449. 3,074,890.Beginning of Current YearEnd of Year20 Total assets (Part X, line 16)16,255,748. 20,229,882.21 Total liabilities (Part X, line 26)4,536,683. 5,435,805.22 Net assets or fund balances. Subtract line 21 from line 2011,719,065. 14,794,077.Part IISignature BlockUnder 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	Ê	17	Other expense	es (Part IX, column (A), lines 11a-11d, 11f-24e)			
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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	5	19	Revenue less	expenses. Subtract line 18 from line 12			
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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	Sse Bala	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	let ∕ und	21					
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		rt II				±±,/±2,00J•	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
			•		and statem	ents, and to the best of m	/ knowledge and helief it is

Sign	Signature of officer	Date						
Here	AMANDA COSBY, INTERIM CO-CEO							
	Type or print name and title							
	Print/Type preparer's name Preparer's signature	Date Check PTIN						
Paid	RICHARD J. LOCASTRO, CPA Kechand J. holastro	9/17/2019 self-employed P00288314						
Preparer	Firm's name 🕒 GELMAN, ROSENBERG & FREEDMAN	Firm's EIN 52–1392008						
Use Only	Firm's address 4550 MONTGOMERY AVE SUITE 800N							
	BETHESDA, MD 20814-2930	Phone no. (301) 951-9090						
May the II	May the IRS discuss this return with the preparer shown above? (see instructions)							
832001 12-3	LHA For Paperwork Reduction Act Notice, see the separate instructions.	Form 990 (2018)						

orm	990 (2018) THE MALALA FUND	81-13975	5 90 Pag
Par	t III Statement of Program Service Accomplishments		_
	Check if Schedule O contains a response or note to any line in this Part III	<u></u>	
1	Briefly describe the organization's mission: THE MALALA FUND PROMOTES GIRLS' EDUCATION AND EQUALIT		י סע
	WORKING TO ENSURE THAT GIRLS EVERYWHERE HAVE ACCESS T		
	FREE, SAFE, QUALITY EDUCATION.		
2	Did the organization undertake any significant program services during the year which were not listed on the	ie	
	prior Form 990 or 990-EZ?		Yes X
	If "Yes," describe these new services on Schedule O.	_	
3	Did the organization cease conducting, or make significant changes in how it conducts, any program service	es?	Yes X
	If "Yes," describe these changes on Schedule O.		
4	Describe the organization's program service accomplishments for each of its three largest program service Section $501(c)(3)$ and $501(c)(4)$ organizations are required to report the amount of grants and allocations to		
	revenue, if any, for each program service reported.	others, the total expe	chises, and
4a	(Code:) (Expenses \$ 8,125,268. including grants of \$ 5,049,773.) (f	Revenue \$	
	IN AFGHANISTAN, BRAZIL, INDIA, LEBANON, NIGERIA, PAKI	STAN AND TU	JRKEY,
	THE MALALA FUND SUPPORTS ORGANIZATIONS WORKING TO ENS		
	ACCESS 12 YEARS OF FREE, SAFE, QUALITY EDUCATION. GRA		
	MALALA FUND HELP GIRLS STAY IN SCHOOL AND FUND EDUCAT AND MENTORSHIP PROGRAMS. THE MALALA FUND ALSO CREATES		
	STUDENTS, EDUCATORS AND EDUCATION ACTIVISTS WHO ADVOC		
	NATIONAL AND INTERNATIONAL LEVELS FOR RESOURCES AND P		
	NEEDED TO GIVE ALL GIRLS A SECONDARY EDUCATION.		
	SOME ACCOMPLISHMENTS OF OUR GRANTEES IN 2018 INCLUDED	:	
			r
41	1. IN NIGERIA, AS A RESULT OF YOUTHHUBAFRICA'S TWO-YE		
4b	(Code:) (Expenses \$ including grants of \$) (f	levenue \$	
4c	(Code:) (Expenses \$ including grants of \$) (if	Revenue \$	
4d	Other program services (Describe in Schedule O.)		
	(Expenses \$ including grants of \$) (Revenue \$)	
4e	Total program service expenses ► 8,125,268.		
30000	SEE SCHEDULE O FOR CONTINUATIO		Form 990 (2
3∠UU2	2 12-31-18 SEE SCHEDULE O FOR CONTINUATIO		
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Form 990 (MALALA	_
Part IV	Checklist of	f Required	d Schedule	es

THE MALALA FUND

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			x
	public office? If "Yes," complete Schedule C, Part I	3		<u> </u>
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect		х	
-	during the tax year? If "Yes," complete Schedule C, Part II	4	л	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? <i>If</i> "Yes," <i>complete Schedule C, Part III</i>	5		x
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to	5		
U	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		x
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
•	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II.	7		x
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete	-		
Ŭ	Schedule D, Part III	8		x
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
-	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		x
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		x
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a		Х
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
с	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses		v	
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If</i> "Yes," <i>complete Schedule D, Part X</i>	11f	Х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete		х	
	Schedule D, Parts XI and XII	12a	~	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?	104		x
10	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13		13 14a		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	144		- 23
U U	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b	х	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any	115		
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	х	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		x
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18		Х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Х
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		Х
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3 2018.04020 THE MALALA FUND

Form 990 (20	018)	THE	MALALA	FUND
Part IV	Checklist o	of Require	d Schedule	es (continued)

THE MALALA FUND

			Yes	No
22	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	22		X
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	00	х	
24 0	Schedule J Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the	23	~~~	
248	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
		24a		x
h	Schedule K. If "No," go to line 25a 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	210		
•	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		
	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			
	Schedule L, Part I	25b		Х
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or			
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes,"			
	complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member	07		x
28	of any of these persons? <i>If "Yes," complete Schedule L, Part III</i> Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV	27		Δ
20	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		х
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		x
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Х	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If</i> "Yes," <i>complete</i>			v
~~	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	22		x
34	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		
54	Part V, line 1	34		x
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		x
	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		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?		37	
Do	Note. All Form 990 filers are required to complete Schedule O	38	Х	
Pa	t V Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 21		103	110
	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c	Х	
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 Form 990 (2018)
 THE
 MALALA
 FUND

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

			Yes	No	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,				
	filed for the calendar year ending with or within the year covered by this return 2a 30				
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х		
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see instructions)				
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	X		
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b	Х		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			x	
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a			
a	If "Yes," enter the name of the foreign country: See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).				
50	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		х	
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 organization solicit				
	any contributions that were not tax deductible as charitable contributions?	6a		x	
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts				
	were not tax deductible?	6b			
7	Organizations that may receive deductible contributions under section 170(c).				
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		X	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b			
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required				
	to file Form 8282?	7c		X	
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d			v	
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X X	
t	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f 7g			
g	 g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? 				
8					
Ū	sponsoring organizations maintaining donor advised finds, bid a donor advised find maintained by the N/A				
9	Sponsoring organizations maintaining donor advised funds.	8			
а	Did the sponsoring organization make any taxable distributions under section 4966? N/A	9a			
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? N/A	9b			
10	Section 501(c)(7) organizations. Enter:				
а	Initiation fees and capital contributions included on Part VIII, line 12 N/A 10a				
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities				
11	Section 501(c)(12) organizations. Enter:				
a	Gross income from members or shareholders N/A 11a				
a	Gross income from other sources (Do not net amounts due or paid to other sources against				
12-	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 1041?	12a			
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	120			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.				
	Is the organization licensed to issue qualified health plans in more than one state? N/A	13a			
	Note. See the instructions for additional information the organization must report on Schedule O.				
b	Enter the amount of reserves the organization is required to maintain by the states in which the				
	organization is licensed to issue qualified health plans 13b				
	Enter the amount of reserves on hand 13c				
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X	
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b			
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or				
	excess parachute payment(s) during the year?	15		X	
10	If "Yes," see instructions and file Form 4720, Schedule N.	40		х	
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16			
	If "Yes," complete Form 4720, Schedule O.				

Form **990** (2018)

832005 12-31-18

Form 990 (2018)

THE MALALA FUND

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

X

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

			8	Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	익		
	If there are material differences in voting rights among members of the governing body, or if the governing				
b	body delegated broad authority to an executive committee or similar committee, explain in Schedule 0.	4	8		
b	Enter the number of voting members included in line 1a, above, who are independent		Ĭ		
2	officer, director, trustee, or key employee?		2	x	
3	Did the organization delegate control over management duties customarily performed by or under the				
	of officers, directors, or 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				Х
5	Did the organization become aware during the year of a significant diversion of the organization's as	sets?	5		Х
6	Did the organization have members or stockholders?		6		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or a mere members of the generating body?		7a		x
b	more members of the governing body? Are any governance decisions of the organization reserved to (or subject to approval by) members, s		<i>1</i> a		
D	persons other than the governing body?		7b		x
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the ye				
а	The governing body?		8a	Х	
b	Each committee with authority to act on behalf of the governing body?			Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be rea				
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O		9		X
ec	tion B. Policies (This Section B requests information about policies not required by the Internal R	evenue Code.)			
				Yes	No
0a	Did the organization have local chapters, branches, or affiliates?		10a		X
b	If "Yes," did the organization have written policies and procedures governing the activities of such c				
	and branches to ensure their operations are consistent with the organization's exempt purposes? \dots		10b		
1a	Has the organization provided a complete copy of this Form 990 to all members of its governing boo	ly before filing the form?	11a	X	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.				
2a				X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise		12b	X	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "V			v	
_	in Schedule O how this was done			X X	
3	Did the organization have a written whistleblower policy?			A X	
4	Did the organization have a written document retention and destruction policy?		14	^	
5	Did the process for determining compensation of the following persons include a review and approv	•			
-	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		15a	x	
	The organization's CEO, Executive Director, or top management official		15a	- 23	X
D	Other officers or key employees of the organization		150		
62	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrange	ment with a			
ou	taxable entity during the year?		16a		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate		iou		
~	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the orga	· ·			
	exempt status with respect to such arrangements?		16b		
jec	tion C. Disclosure				
7	List the states with which a copy of this Form 990 is required to be filed SEE SCHEDULE	0			
8	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable), 990, and		3)s only) availa	able
	for public inspection. Indicate how you made these available. Check all that apply. X Own website Another's website X Upon request Other (explain)	n in Schedule O)			
9	Describe in Schedule O whether (and if so, how) the organization made its governing documents, co	,	nd finan	cial	
3	statements available to the public during the tax year.	annot of interest policy, al	iu iii afi	Ciai	
20	State the name, address, and telephone number of the person who possesses the organization's bo	ooks and records			
	AMANDA COSBY - (202)794-8744				
	1921 FLORIDA AVENUE NW #53347, WASHINGTON, DC 200	109	Form	1 990	(2010
2006	6 12-31-18 6		1011	1000	12010
00	917 745960 21883 2018.04020 THE MALALA FUN	D	218	383	1

Part VII	Compensation of Officers,	Directors,	Trustees,	Key Employees,	Highest (Compensated
	Employees, and Independe	ent Contrac	ctors			

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

X

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees
 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

• List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.

• List all of the organization's current key employees, if any. See instructions for definition of "key employee."

• List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.

 List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

• List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

(A)	(B)	<u>s.gc</u>			C)			(D)	(E)	(F)
Name and Title	Average hours per	box	not c , unle	Pos heck ss pe	ition more erson	than is bot	h an	Reportable compensation	Reportable compensation	Estimated amount of
	week (list any hours for related organizations below line)	tee or director	Institutional trustee	Offlicer Offlicer		Highest compensated sn1/v		from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
(1) MALALA YOUSAFZAI	10.00							0	0	0
HONORARY CHAIRPERSON	10.00	X						0.	0.	0.
(2) ZIAUDDIN YOUSAFZAI	10.00								0	0
HONORARY CHAIRPERSON	1.00	X						0.	0.	0.
(3) SUSAN MCCAW	1.00	x		x				0.	0.	0.
BOARD CHAIR	1.00	<u>^</u>		<u>^</u>				0.	0.	0.
(4) LYNN TALIENTO TREASURER	1.00	x		x				0.	0.	0.
(5) DOMINIC BARTON	1.00	<u>⊢</u>		^	-			0.	0.	0.
DIRECTOR	1.00	x						0.	Ο.	0.
(6) ALAA MURABIT	1.00								••	
DIRECTOR		x						0.	Ο.	0.
(7) FAYEEZA NAQVI	1.00									
DIRECTOR		x						0.	Ο.	0.
(8) MABEL VAN ORANJE	1.00									
DIRECTOR		x						0.	0.	0.
(9) FARAH MOHAMED	40.00									
CEO (SEE SCHEDULE O)		1		x				206,043.	0.	38,183.
(10) AMANDA COSBY	40.00									
SEC/COO; INT. CO-CEO (FROM 2/5/19)		1		X				123,785.	0.	14,064.
(11) TAYLOR ROYLE - CHIEF COMM. &	40.00									
CREAT. OFF; INT. CO-CEO (FROM 2/5/19)				Х				143,422.	0.	16,888.
(12) PATRICIA EISNER	40.00									
CHIEF DEVELOPMENT OFFICER						Х		138,962.	0.	26,220.
(13) ERIN GORE	40.00									
ASSOCIATE DEVELOPMENT DIRECTOR						Х		113,142.	0.	22,780.
(14) RAOUL DAVION	40.00									
ASSOCIATE PROGRAMMES DIRECTOR						X		108,135.	0.	22,483.
										Form 000 (2019)

832007 12-31-18

Form 990 (2018)

	990 (2018) THE MALAI									81-1	397	590	Pa	age 8
Par	t VII Section A. Officers, Directors, Trus		ploy	ees			ighe	st C						
	(A) Name and title	(B) Average hours per week	box offic	not c , unle	ss pe	ition more rson	than is bot pr/trus	h an	(D) Reportable compensation from	(E) Reportable compensatic from related	on d	am	(F) timate ount o other	
		(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organization (W-2/1099-MIS		fro orga and	oensa om the anizati I relate nizatio	e on ed
1b	Sub-total			I	L	I	I		833,489.		0.	14(),6	18.
c Total from continuation sheets to Part VII, Section A									0. 833,489.		0.	14(),6	0. 18.
2	Total number of individuals (including but n compensation from the organization	ot limited to th	ose	liste	ed al	bove	e) wł	no r	eceived more than \$100	,000 of reportab	le	<u> </u>		5
3	Did the organization list any former officer,			e, ke	ey er	nplc	oyee	or	highest compensated e	mployee on			Yes	No
4	line 1a? If "Yes," complete Schedule J for su For any individual listed on line 1a, is the su	m of reportab	le co	omp	ensa	atior	n and	d ot	•	the organization		3	v	X
5	and related organizations greater than \$150 Did any person listed on line 1a receive or a rendered to the organization? <i>If</i> "Yes," <i>com</i>	accrue comper	nsat	ion f	rom	any	/ unr	elat	ted organization or indiv			4 5	X	X
Sec	tion B. Independent Contractors	piele Scheduk	301	or si	icn	pers	SON .					5		21
1	Complete this table for your five highest con the organization. Report compensation for t										npens	ation fr	rom	
	(A) Name and business								(B) Description of s	ervices	С	(C omper		1
WAS	ORK, 1875 CONNECTICUT SHINGTON, DC 20009	-	-		7				OCCUPANCY			203	3,1	46.
	IANKIND RESEARCH, 28 FC YE, EAST SUSSEX, UNITEI				-	2PJ	J		RESEARCH (SE SCHEDULE O)	<u>ь</u>		181	L,9'	75.
								_						
2	Total number of independent contractors (ii	-	ot li	mite	d to		se li: 2	stec	d above) who received n	nore than				
	\$100,000 of compensation from the organiz						<u>ы</u>					Form S	990 (2	2018)

832008 12-31-18

	990 (IALALA FU	ND			81-1397	590 Page 9
Pa	rt VII							
		Check if Schedule O cont	ains a response	or note to any line	e in this Part VIII … (A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
Contributions, Gifts, Grants and Other Similar Amounts	b c d f g	Federated campaigns	1b 1c 1d ions) 1e ts, and 1f 1a-1f: \$	13,232,612. 209,111.	13,232,612.			
Program Service Revenue		All other program service reve	enue					
	g 3 4 5	Total. Add lines 2a-2f Investment income (including other similar amounts) Income from investment of tar Royalties	dividends, intere x-exempt bond p	est, and wroceeds	22,029.			22,029
	b c d 7 a	Gross rents Less: rental expenses Rental income or (loss) Net rental income or (loss) Gross amount from sales of assets other than inventory Less: cost or other basis and sales expenses	(i) Securities 1,117,375.	(ii) Other				
Other Revenue	d	Gain or (loss) Net gain or (loss) Gross income from fundraisin including \$ contributions reported on line	-12,417. g events (not of 1c). See	▶	-12,417.			-12,417
Other R	С	Part IV, line 18 Less: direct expenses Net income or (loss) from func Gross income from gaming ac Part IV, line 19	b braising events ctivities. See					
	с 10 а b	Less: direct expenses Net income or (loss) from gam Gross sales of inventory, less and allowances Less: cost of goods sold	ning activities returns a b	▶ 				
	11 a b c	Net income or (loss) from sale Miscellaneous Revenu	e	Business Code				
	d e <u>12</u> 9 12-31	All other revenue Total. Add lines 11a-11d Total revenue. See instructions		►	13,242,224.	0.	0.	9,612. Form 990 (2018

832009 12-31-18

08400917 745960 21883

THE MALALA FUND

	1990 (2018) THE MALALA THE MALALA T			81-13	97590 Page
	ion 501(c)(3) and 501(c)(4) organizations must com		er organizations must co	omplete column (A).	
	Check if Schedule O contains a respon	se or note to any line in			
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				
3	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign	5,049,773.	5,049,773.		
	individuals. See Part IV, lines 15 and 16	5,015,115.	5,015,775.		
4	Benefits paid to or for members				
5	Compensation of current officers, directors,	339,685.	220,618.	106,891.	12,17
~	trustees, and key employees	559,005.	220,010.	100,091.	14,17
6	Compensation not included above, to disqualified				
	persons (as defined under section $4958(f)(1)$) and				
_	persons described in section 4958(c)(3)(B)	1,440,461.	751,146.	162,008.	527,30
7	Other salaries and wages	1,440,401.	/51,140.	102,000.	527,50
8	Pension plan accruals and contributions (include	44,242.	23,150.	5,119.	15 07
_	section 401(k) and 403(b) employer contributions)	256,819.	136,983.	33,992.	15,97 85,84
9	Other employee benefits	140,140.	76,217.	20,740.	43,18
0	Payroll taxes	140,140.	/0,21/.	20,740.	43,10
1	Fees for services (non-employees):				
а	Management	1 5 1 0 0 6			12 (2
b	Legal	151,986.	105,017.	33,336.	13,63
С	Accounting	43,195.	29,847.	9,474.	3,87
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25,	1 282 685	040 164	201 202	100.01
	column (A) amount, list line 11g expenses on Sch 0.)	1,373,675.	949,164.	301,298.	123,21
2	Advertising and promotion	7,880.	6,545.	40.	1,29
3	Office expenses	110,237.	47,150.	35,961.	27,12
4	Information technology	158,256.	82,693.	25,418.	50,14
5	Royalties				
6	Occupancy	216,137.	119,080.	36,129.	60,92
7	Travel	518,862.	388,870.	70,734.	59,25
8	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials \dots				
9	Conferences, conventions, and meetings	125,778.	104,333.	19,588.	1,85
0	Interest				
1	Payments to affiliates				
2	Depreciation, depletion, and amortization				
3	Insurance	21,150.	34.	21,116.	
4	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.)				
а	IN-KIND MATERIALS	83,893.			83,89
	DONATION PROCESSING FEE	44,607.	959.	13,857.	29,79
	HONORARIUM	34,477.	28,638.	175.	5,66
-		<u> </u>	<u> </u>	21	, , , , , , , , , , , , , , , , , , , ,

31. 6,081. 5,051. d MISCELLANEOUS e All other expenses 10,167,334. 8,125,268. 895,907. 1,146,159. Total functional expenses. Add lines 1 through 24e 25 26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here _____ if following SOP 98-2 (ASC 958-720)

832010 12-31-18

08400917 745960 21883

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

THE MALALA FUND

		Check if Schedule O contains a response or note to any line in this Part X			
			(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing	7,138,360.	1	5,275,342.
	2	Savings and temporary cash investments	250,708.	2	5,652,860.
	3	Pledges and grants receivable, net	8,798,136.	3	9,170,730.
	4	Accounts receivable, net	-,,	4	60,167.
	5	Loans and other receivables from current and former officers, directors,			
	•	trustees, key employees, and highest compensated employees. Complete			
		Part II of Schedule L		5	
	6	Loans and other receivables from other disqualified persons (as defined under			
	-	section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing			
		employers and sponsoring organizations of section 501(c)(9) voluntary			
s		employees' beneficiary organizations (see instr). Complete Part II of Sch L		6	
Assets	7	Notes and loans receivable, net		7	
As	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges	39,444.	9	38,683.
		Land, buildings, and equipment: cost or other	/	-	,
		basis. Complete Part VI of Schedule D 10a			
	b	Less: accumulated depreciation 10b		10c	
	11	Investments - publicly traded securities		11	
	12	Investments - other securities. See Part IV, line 11		12	
	13	Investments - program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11	29,100.	15	32,100.
	16	Total assets. Add lines 1 through 15 (must equal line 34)	16,255,748.	16	20,229,882.
	17	Accounts payable and accrued expenses	346,222.	17	426,786.
	18	Grants payable	4,190,461.	18	5,009,019.
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
s	22	Loans and other payables to current and former officers, directors, trustees,			
litie		key employees, highest compensated employees, and disqualified persons.			
Liabilities		Complete Part II of Schedule L		22	
Ľ	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third			
		parties, and other liabilities not included on lines 17-24). Complete Part X of			
		Schedule D		25	
	26	Total liabilities. Add lines 17 through 25	4,536,683.	26	5,435,805.
		Organizations that follow SFAS 117 (ASC 958), check here ► X and			
es		complete lines 27 through 29, and lines 33 and 34.			
anc	27	Unrestricted net assets	3,696,984.	27	6,015,252. 8,778,825.
Bala	28	Temporarily restricted net assets	8,022,081.	28	8,778,825.
Fund Balances	29	Permanently restricted net assets		29	
Fui		Organizations that do not follow SFAS 117 (ASC 958), check here			
ŗ		and complete lines 30 through 34.			
ets	30	Capital stock or trust principal, or current funds		30	
Ass	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
Net Assets or	32	Retained earnings, endowment, accumulated income, or other funds		32	
2	33	Total net assets or fund balances	11,719,065.	33	14,794,077.
	34	Total liabilities and net assets/fund balances	16,255,748.	34	20,229,882.
					Form 990 (2018)

08400917 745960 21883

Form 990 (2018)

Part X Balance Sheet

Form	1990 (2018) THE MALALA FUND	81-	139759	90	Pag	je 12
Pa	rt 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	13,2			
2	Total expenses (must equal Part IX, column (A), line 25)	2	10,1	67	, 33	34.
3	Revenue less expenses. Subtract line 2 from line 1	3	3,()74	,89	90.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	11,7	719	,06	55.
5	Net unrealized gains (losses) on investments	5			12	22.
6	Donated services and use of facilities	6				
7	Investment expenses	7				
8	Prior period adjustments	8				
9	Other changes in net assets or fund balances (explain in Schedule O)	9				0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,					
	column (B))	10	14,7	794	,01	77.
Pa	rt XII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII					
				Y	es	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other					
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	О.				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?			2a		Х
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	d on a				
	separate basis, consolidated basis, or both:					
	Separate basis Consolidated basis Both consolidated and separate basis					
b	Were the organization's financial statements audited by an independent accountant?		2	2b	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat	e basis	,			
	consolidated basis, or both:					
	X Separate basis Consolidated basis Both consolidated and separate basis					
с	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audit,				
	review, or compilation of its financial statements and selection of an independent accountant?		2	2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch	edule C).			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si	ngle Au	dit			
	Act and OMB Circular A-133?			Ba		Х
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ	ired au	dit			
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits			b		

Form **990** (2018)

832012 12-31-18

SCHEDULE A

Department of the Treasury

(Form	990	or	990-	EZ)
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Public Charity Status and Public Support Complete if the organization is a section 501(c)(3) organization or a section

4947(a)(1) nonexempt charitable trust. Attach to Form 990 or Form 990-EZ.

2018
Open to Public Inspection

OMB No. 1545-0047

Interna	I Reve	nue Service		Go to www.irs.go	/Form990 for instructi	ons and tl	he latest i	nformation.		Inspection			
Nam	e of t	the organizati		MALALA FUN	D					identification number 1-1397590			
Pa	rt I	Reason			All organizations must co	omplete th	is part.) Se	ee instructior		1 100,000			
					For lines 1 through 12, c								
1					on of churches describe	,	,						
2					Attach Schedule E (Forn			•,,,•,,,•,					
3					anization described in s e			ii).					
4		•	•		njunction with a hospita				(iii). Enter	the hospital's name.			
		city, and stat	•		· · J - · · · - · · · · · · · · · · · ·					·····,			
5		-	-	or the benefit of a co	llege or university owned	d or opera	ted bv a d	overnmental	unit describ	bed in			
		section 170	(b)(1)(A)(iv). (C	Complete Part II.)	0 ,	•	, ,						
6		A federal, sta	te, or local go	vernment or governr	nental unit described in	section 17	70(b)(1)(A)	(v).					
7	Х				Intial part of its support f				the general	public described in			
				omplete Part II.)		U U			Ū				
8					(1)(A)(vi). (Complete Par	t II.)							
9					in section 170(b)(1)(A)(ed in conju	unction with a	a land-grant	college			
		or university	or a non-land-g	grant college of agric	ulture (see instructions).	Enter the	name, city	y, and state o	of the colleg	e or			
		university:											
10		An organizati	ion that norma	Illy receives: (1) more	e than 33 1/3% of its sup	port from	contributi	ons, member	ship fees, a	nd 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 ι	unrelated busir	ness taxable income	(less section 511 tax) fr	om busine	esses acqu	uired by the o	rganization	after June 30, 1975.			
		See section	509(a)(2). (Cor	mplete Part III.)									
11		-	-		ively to test for public sa	-							
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												
			••	•	ed in section 509(a)(1) o					Check the box in			
					of supporting organizatio								
а					supervised, or controlled								
					gularly appoint or elect a	a majority	of the dire	ctors or trust	ees of the s	supporting			
		7		complete Part IV, Se									
b				-	d or controlled in connec			-		-			
			-		anization vested in the s	ame perso	ons that co	ontrol or man	age the sup	ported			
•		7 Ŭ		t complete Part IV,		in connoc	tion with	and function	ally intograt	ad with			
С	L		-		g organization operated s). You must complete l				any integration	eu witti,			
d			-		orting organization oper				ortod organi	zation(c)			
u	L	••	-		zation generally must sa				°,				
			-		nplete Part IV, Sections	-		-		Woness			
е					written determination fro				e II. Type III				
•			•		nally integrated support			x 1)po 1, 1)p	, , , , po m				
f	Ente	er the number	-	•••									
				n about the supporte	ed organization(s).								
		(i) Name of supp	-	(ii) EIN	(iii) Type of organization	(iv) Is the orga in your governi	inization listed ing document?	(v) Amount c	of monetary	(vi) Amount of other			
		organizatior	ו		(described on lines 1-10 above (see instructions))	Yes	No	support (see i	nstructions)	support (see instructions)			
Tota													
LHA	For F	Paperwork Re	duction Act N	lotice, see the Instr	ructions for Form 990 o	or 990-EZ.	832021 10-	-11-18 Sche	dule A (For	m 990 or 990-EZ) 2018			

13

2018.04020 THE MALALA FUND

Schedule A (Form 990 or 990 EZ) 2018 THE MALALA FUND

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.)

1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") 50,000. 19,809,602. 9,745,235. 13,232,612. 42,837. 2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf. 50,000. 19,809,602. 9,745,235. 13,232,612. 42,837. 3 The value of services or facilities furnished by a governmental unit to the organization without charge 50,000. 19,809,602. 9,745,235. 13,232,612. 42,837. 4 Total. Add lines 1 through 3 50,000. 19,809,602. 9,745,235. 13,232,612. 42,837. 5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 11, column (f) 50,000. 19,809,602. 9,745,235. 13,232,612. 42,837. 6 Public Support. Subtract line 5 from line 4 50,000. 19,809,602. 9,745,235. 13,232,612. 42,837. 7 Amounts from line 4 50,000. 19,809,602. 9,745,235. 13,232,612. 42,837. 8 cos income from line 4 50,000. 19,809,602. 9,745,235. 13,232,612. 42,837. 7 Amounts from line 4 50,000. 19,809,602. 9,745,235. 13,232,612. 42,837.						Section A. Public Support
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Section C. Computation of Public Support Percentage			••••••	pport Percentage	f Public Si	Section C. Computation of PL
14 Public support percentage for 2018 (line 6, column (f) divided by line 11, column (f)) 14	ımn (f)) 14 %	f))				
15 Public support percentage from 2017 Schedule A, Part II, line 14 16a 33 1/3% support test - 2018. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and						
					•	
stop here. The organization qualifies as a publicly supported organization						
b 33 1/3% support test - 2017. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box					-	
and stop here. The organization qualifies as a publicly supported organization						
17a 10% -facts-and-circumstances test - 2018. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more,						
and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization						0
meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization						
b 10% -facts-and-circumstances test - 2017. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or				•		
more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the		-				· •
organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization	lifies as a publicly supported organization	as a publicly suppo	ation qualifies as	ances" test. The organiz	-and-circumst	organization meets the "facts-and-
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions	6b, 17a, or 17b, check this box and see instructions 🕨 🛄	17a, or 17b, check tł	13, 16a, 16b, 17a	not check a box on line ⁻	anization did	18 Private foundation. If the organization

Schedule A (Form 990 or 990-EZ) 2018

832022 10-11-18

Schedule A (Form 990 or 990 EZ) 2018 THE MALALA FUND

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

81-1397590 Page 3

(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	ction A. Public Support						
Cale	endar year (or fiscal year beginning in) 🕨	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	3 (f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Gross receipts from admissions, merchandise sold or services per- formed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that						
	are not an unrelated trade or bus-						
	iness under section 513						
4	Tax revenues levied for the organ-						
	ization's benefit and either paid to 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						
	Amounts included on lines 1, 2, and						
	3 received from disqualified persons						
t	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from line 6.)						
	ction B. Total Support						
	endar year (or fiscal year beginning in) 🕨	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	3 (f) Total
	Amounts from line 6						
10a	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						
c	Add lines 10a and 10b						
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)						
14	First five years. If the Form 990 is fo	r the organization'	s first, second, thi	rd, fourth, or fifth	tax year as a section	on 501(c)(3) o	rganization,
	check this box and stop here	<u></u>				·····	>
Se	ction C. Computation of Pub	ic Support Pe	ercentage				
15	Public support percentage for 2018 (line 8, column (f), o	divided by line 13,	column (f))		15	%
	Public support percentage from 2017					16	%
Se	ction D. Computation of Inve	stment Incom	e Percentage)			
17	Investment income percentage for 20)18 (line 10c, colur	mn (f), divided by	line 13, column (f)))	17	%
	Investment income percentage from					18	%
19 a	33 1/3% support tests - 2018. If the	organization did r	not check the box	on line 14, and lin	ne 15 is more than	33 1/3%, and	line 17 is not
	more than 33 1/3%, check this box a	nd stop here. The	organization qua	lifies as a publicly	supported organiz	ation	▶∟
k	33 1/3% support tests - 2017. If the	organization did r	not check a box o	n line 14 or line 19	a, and line 16 is m	ore than 33 1	/3% , and
	line 18 is not more than 33 1/3% , che	eck this box and st	t op here. The orga	anization qualifies	as a publicly supp	orted organiza	ation ►
20	Private foundation. If the organization	on did not check a	box on line 14, 19	9a, or 19b, check			
8320	23 10-11-18			15	Sch	edule A (For	m 990 or 990-EZ) 2018

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2018.04020 THE MALALA FUND

1

2

3a

3b

3c

4a

4b

4c

5a

5b

5c

6

7

8

9a

9b

9c

10a

10b

Yes No

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

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

832024 10-11-18

16 2018.04020 THE MALALA FUND

			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)			
	below, the governing body of a supported organization?	11a		
	A family member of a person described in (a) above?	11b		
-	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c		
Sec	tion B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to			
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or			
	controlled the organization's activities. If the organization had more than one supported organization,			
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported			
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Sec	tion C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		
Sec	tion D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in 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 yea(see instructions			
a	The organization satisfied the Activities Test. <i>Complete line 2 below.</i>	-		
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
c	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see ins	truction	2)	
2	Activities Test. Answer (a) and (b) below.	liucion	Yes	No
z a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of		103	110
a	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	the supported organization(s) to which the organization was responsive? If res, then in Part vindentity 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	0-		
	that these activities constituted substantially all of its activities.	2a		
D	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more			
	of the organization's supported organization(s) would have been engaged in? 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 (a) and (b) 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? Provide details in Part VI.	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b		
832025	5 10-11-18 Schedule A (Form S	90 or 99	90-EZ)	2018

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17 2018.04020 THE MALALA FUND Schedule A (Form 990 or 990-EZ) 2018

Schedule A (Form 990 or 990-EZ) 2018 THE MALALA FUND

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

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

Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
с	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other			
	factors (explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d	3		
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount,			
	see instructions)	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by .035	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2	Enter 85% of line 1	2		
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4	Enter greater of line 2 or line 3	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions)	6		
7	Check here if the current year is the organization's first as a non-functional	ly intograte	d Type III supporting or	

7 Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).

Schedule A (Form 990 or 990-EZ) 2018

832026 10-11-18

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

Schedule A (Form 990 or 990-EZ) 2018

832027 10-11-18

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

SCHEDULE A, PART II:

THE INFORMATION REPORTED IN THE 2015 COLUMN IS FOR THE SHORT PERIOD

2/1/2016 - 3/31/2016.

Schedule B

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

Name of the organization

Organization type (check one):

П

** PUBLIC DISCLOSURE COPY **

Schedule of Contributors

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

OMB No. 1545-0047

2018

Employer identification number

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0	
Filers of:	Section:
Form 990 or 990-EZ	X 501(c)(3) (enter number) organization
	4947(a)(1) nonexempt charitable trust not treated as a private foundation
	527 political organization
Form 990-PF	501(c)(3) exempt private foundation
	4947(a)(1) nonexempt charitable trust treated as a private foundation
	501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**. **Note:** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

X For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year **>** \$

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

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

Name of organization

THE MALALA FUND

81-1397590

Part I	Contributors (see instructions). Use duplicate copies of Part I if	additional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		\$ <u>2,996,882.</u>	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2		\$ <u>2,336,493.</u>	Person X Payroll Noncash X (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3		\$ <u>1,146,884.</u>	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4		\$424,800.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5		\$400,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
6		\$356,873.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
823452 11-08		Schedule B (Form	990, 990-EZ, or 990-PF) (2018)

2018.04020 THE MALALA FUND

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

Name of organization

Employer identification number

THE MALALA FUND

81-1397590

Part I	Contributors (see instructions). Use duplicate copies of Part I if a	additional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7		\$\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
8		\$\$\$\$\$\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
9		\$ <u>300,000.</u>	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
823452 11-08		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

23 2018.04020 THE MALALA FUND

Name of organization

Employer identification number

THE MALALA FUND

81-1397590

Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed. (a) (c) No. (b) (d) FMV (or estimate) from Description of noncash property given Date received (See instructions.) Part I MACBOOKS, IPHONES, AND APPLECARE 2 83,893. 08/31/18 \$ (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 Date received Description of noncash property given (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) (c) No. (b) (d) FMV (or estimate) from Description of noncash property given Date received (See instructions.) Part I \$ 823453 11-08-18 Schedule B (Form 990, 990-EZ, or 990-PF) (2018) 24 08400917 745960 21883 2018.04020 THE MALALA FUND 21883__1

Page 4

	Exclusively religious, charitable, etc., contribution from any one contributor. Complete columns (a) is completing Part III, enter the total of exclusively religious, ch Use duplicate copies of Part III if additional s	through (e) and the following line entri- aritable, etc., contributions of \$1,000 or la	For organizat	tions	
a) No. From Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held	
- 		(e) Transfer of gift			
	Transferee's name, address, an	d ZIP + 4	Relation	ship of transferor to transferee	
a) No. From Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held	
-	Transferee's name, address, an	(e) Transfer of gift	Relation	ship of transferor to transferee	
-					
a) No. From Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held	
-		(e) Transfer of gift	nsfer of gift		
-	Transferee's name, address, an	d ZIP + 4	Relation	ship of transferor to transferee	
a) No. From Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held	
 		(e) Transfer of gift			
-	Transferee's name, address, an	d ZIP + 4	Relation	ship of transferor to transferee	
454 11-08-1				Schedule B (Form 990, 990-EZ, or 990-P	

Political Campaign and Lobbying Activities (Form 990 or 990-EZ)

For Organizations Exempt From Income Tax Under section 501(c) and section 527

Complete if the organization is described below. Attach to Form 990 or Form 990-EZ. ► Go to www.irs.gov/Form990 for instructions and the latest information.

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

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

SCHEDULE C

Department of the Treasury Internal Revenue Service

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

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

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

 Section 501(c)(4), (5), 	or (6) organizations: Complete Part III.
NI 6 1 11	

Nar	ne of orga				Empl	oyer identification number	
			ALA FUND	r costion E01(c)	via a contian EOZ a	81-1397590	
Pa	art I-A	Complete il the org	anization is exempt unde		or is a section 527 0	rganization.	
2	Political	campaign activity expendit	ration's direct and indirect political ures gn activities		▶\$		
Pa	art I-B	Complete if the org	anization is exempt unde	r section 501(c)(3	3).		
1	Enter the	amount of any excise tax	incurred by the organization unde	r section 4955	▶\$		
2			incurred by organization managers				
3			n 4955 tax, did it file Form 4720 fo				
4a	a Was a co	prrection made?				🗌 Yes 🗌 No	
		describe in Part IV.					
			anization is exempt unde	• •			
1		• •	d by the filing organization for sect				
2	Enter the	e amount of the filing organ	ization's funds contributed to othe	er organizations for sec			
					▶ \$		
3			. Add lines 1 and 2. Enter here and				
4			1120-POL for this year?				
5	5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.						
		(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0	



Schedule C (Form 990 or 990-EZ) 2018	THE	MALALA	FUND
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Pa	t II-A Complete if the org	anization is exe	mpt under sectio	n 501(c)(3) and fi	led Form 5768 (el	ection under	
	section 501(h)).						
A C	Check 🕨 🛄 if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN,						
	expenses, and sha	re of excess lobbying	expenditures).				
BC	neck 🕨 📃 if the filing organiza	tion checked box A a	nd "limited control" pro	ovisions apply.	•		
	Limi (The term "expend))	(a) Filing organization's totals	(b) Affiliated group totals			
1a	Total lobbying expenditures to infl	uence public opinion	(grass roots lobbying)		22,773.		
	Total lobbying expenditures to influ				164,559.		
с	Total lobbying expenditures (add li				187,332.		
d					9,978,638.		
е	Total exempt purpose expenditure	s (add lines 1c and 1	d)		10,165,970.		
f					658,299.		
	If the amount on line 1e, column (a) o	or (b) is: The lob	bying nontaxable am	ount is:			
	Not over \$500,000	20% of	the amount on line 1e				
	Over \$500,000 but not over \$1,000	0,000 \$100,00	00 plus 15% of the exc	cess over \$500,000.			
	Over \$1,000,000 but not over \$1,5	600,000 \$175,00	00 plus 10% of the exc	cess over \$1,000,000.			
	Over \$1,500,000 but not over \$17	,000,000 \$225,00	00 plus 5% of the exce	ess over \$1,500,000.			
	Over \$17,000,000	\$1,000,	,000.				
g	Grassroots nontaxable amount (er	nter 25% of line 1f)			164,575.		
h	Subtract line 1g from line 1a. If zer	o or less, enter -0- 💠			0.		
i	Subtract line 1f from line 1c. If zero	o or less, enter -0			0.		
j	If there is an amount other than ze	ro on either line 1h or	line 1i, did the organiz	ation file Form 4720	_		
	reporting section 4911 tax for this	year?			L	Yes No	
			eraging Period Under	()			
	(Some organizations t				of the five columns b	elow.	
		•	ate instructions for li	• •			
		Lobbying Expe	nditures During 4-Ye	ar Averaging Period	1		
	Calendar year (or fiscal year beginning in)	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) Total	

22,773. 22,773. Schedule C (Form 990 or 990-EZ) 2018

658,299.

187,332.

164,575.

832042 11-08-18

658,299.

987,449.

187,332.

164,575.

246,863.

2a Lobbying nontaxable amountb Lobbying ceiling amount

(150% of line 2a, column(e))

c Total lobbying expenditures

d Grassroots nontaxable amounte Grassroots ceiling amount

(150% of line 2d, column (e))

f Grassroots lobbying expenditures

Schedule C (Form 990 or 990-EZ) 2018 THE MALALA FUND

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

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

instructions); and Part II-B, line 1. Also, complete this part for any additional information.

Schedule C (Form 990 or 990-EZ) 2018

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Department of the Treasury Internal Revenue Service

(Form 9	90)
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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.



Name of the o	organization
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....

- - - -

Employer identification number

	THE MALALA FUND		81-139/590
Par			Accounts. Complete if the
	organization answered "Yes" on Form 990, Part IV, lin		
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in v	writing that the assets held in donor advised	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 a	dvisors in writing that grant funds can be use	ed only
	for charitable purposes and not for the benefit of the donor of	r donor advisor, or for any other purpose cor	iferring
			Yes No
Par	t II Conservation Easements. Complete if the org	anization answered "Yes" on Form 990, Part	IV, line 7.
1	Purpose(s) of conservation easements held by the organizati	on (check all that apply).	
	Preservation of land for public use (e.g., recreation or e	ducation)	ally important land area
	Protection of natural habitat	Preservation of a certified	historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualif	ied conservation contribution in the form of a	conservation easement on the last
	day of the tax year.		Held at the End of the Tax Year
а	Total number of conservation easements		2a
	Total acreage restricted by conservation easements		
	Number of conservation easements on a certified historic str		
d	Number of conservation easements included in (c) acquired a	after 7/25/06, and not on a historic structure	
	listed in the National Register		2d
3	Number of conservation easements modified, transferred, rel		
	year 🕨		
4	Number of states where property subject to conservation eas	sement is located	
5	Does the organization have a written policy regarding the per	iodic monitoring, inspection, handling of	
	violations, and enforcement of the conservation easements in	holds?	Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting,		
7	Amount of expenses incurred in monitoring, inspecting, hand	lling of violations, and enforcing conservation	easements during the year
	▶\$		
8	Does each conservation easement reported on line 2(d) abov	e satisfy the requirements of section 170(h)(4	4)(B)(i)
	and section 170(h)(4)(B)(ii)?	• • • • • • • • • • • • • • • • • • • •	Yes No
9	In Part XIII, describe how the organization reports conservati		
	include, if applicable, the text of the footnote to the organizat	ion's financial statements that describes the	organization's accounting for
	conservation easements.		
Par	t III Organizations Maintaining Collections o	f Art, Historical Treasures, or Othe	er Similar Assets.
	Complete if the organization answered "Yes" on Form	990, Part IV, line 8.	
1a	If the organization elected, as permitted under SFAS 116 (AS	C 958), not to report in its revenue statemen	t and balance sheet works of art,
	historical treasures, or other similar assets held for public exh	nibition, education, or research in furtherance	of public service, provide, in Part XIII,
	the text of the footnote to its financial statements that descri	bes these items.	
b	If the organization elected, as permitted under SFAS 116 (AS	C 958), to report in its revenue statement an	d balance sheet works of art, historical
	treasures, or other similar assets held for public exhibition, ed		
	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 tre		
	the following amounts required to be reported under SFAS 1	· · · ·	
а	Revenue included on Form 990, Part VIII, line 1		🕨 \$
	Assets included in Form 990, Part X		
	For Paperwork Reduction Act Notice, see the Instruction		Schedule D (Form 990) 2018
	10-29-18		- · ·

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29 2018.04020 THE MALALA FUND

		ALA FUND					81-13	<u>9759</u>	<u>0 Р</u> а	age 2
Par	rt III Organizations Maintaining C	Collections of A	rt, Histori	cal Treasu	ires, or Oth	er Simil	ar Asse	ts (contii	nued)	
3	Using the organization's acquisition, access	ion, and other record	ds, check an	of the follow	ing that are a	significant	use of its	collectio	n item	IS
	(check all that apply):									
а	Public exhibition	c		n or exchange						
b	Scholarly research	e	e 🗌 Othe	er						
С	Preservation for future generations									
4	Provide a description of the organization's c	ollections and explai	in how they f	urther the org	ganization's exe	empt purp	ose in Par	t XIII.		
5	During the year, did the organization solicit of	or receive donations	of art, histori	cal treasures,	, or other simila	ar assets		-		-
	to be sold to raise funds rather than to be m						L	Yes		No
Par	rt IV Escrow and Custodial Arran reported an amount on Form 990, Pa		ete if the org	anization ans	wered "Yes" o	n Form 99	0, Part IV,	line 9, oı	•	
1a	Is the organization an agent, trustee, custod		diary for cont	ributions or o	other assets no	t included				
	on Form 990, Part X?		2					Yes		No
b	If "Yes," explain the arrangement in Part XIII									
-			Jane 1. Jane 1					Amoun	t	
с	Beginning balance					1c				
	Additions during the year									
	Distributions during the year									
f	Ending balance									
2a	Did the organization include an amount on F							Yes		No
b	If "Yes," explain the arrangement in Part XIII	. Check here if the e	xplanation ha	as been provi	ded on Part XI]
Par	rt V Endowment Funds. Complete	if the organization ar	swered "Yes	s" on Form 99	90, Part IV, line	10.				
		(a) Current year	(b) Prior	year (c) T	wo years back	(d) Three	years back	(e) Four	r years	back
1a	Beginning of year balance									
b	Contributions									
с	Net investment earnings, gains, and losses									
d	Grants or scholarships									
е	Other expenditures for facilities									
	and programs									
f	Administrative expenses									
g	End of year balance									
2	Provide the estimated percentage of the cur	rrent year end baland	ce (line 1g, co	olumn (a)) held	d as:					
а	Board designated or quasi-endowment		_%							
b	Permanent endowment	%								
С	Temporarily restricted endowment	%								
	The percentages on lines 2a, 2b, and 2c sho	-								
3a	Are there endowment funds not in the posse	ession of the organiz	ation that are	e held and ad	ministered for	the organi	zation			
	by:								Yes	No
	(i) unrelated organizations							3a(i)		
	(ii) related organizations									
b	If "Yes" on line 3a(ii), are the related organiza							3b		·
	Describe in Part XIII the intended uses of the rt VI Land, Buildings, and Equipn		owment fund	S.						
Fai				- 11- O F-		(line 10				
	Complete if the organization answere		<u> </u>				1	(-1) D		
	Description of property	(a) Cost or c basis (investr		b) Cost or other basis (other	• • •	Accumulate epreciation		(d) Boo	k value	Э
1a	Land									
	Buildings									
	Leasehold improvements									
d	Equipment									
	Other									
Tota	I. Add lines 1a through 1e. (Column (d) must e	equal Form 990, Part	X, column (E	3), line 10c.)						0.
							Cabadula		- 0001	0040

Schedule D (Form 990) 2018

Complete if the organization answered "Yes"	on Form 990, Part IV, line	11b. See Form 990, Part X, line 12.
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) ►		
Part VIII Investments - Program Related.		·
Complete if the organization answered "Yes"	on Form 990, Part IV, line	11c. See Form 990, Part X, line 13.
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		

 (6)

 (7)

 (8)

 (9)

 Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ►

Dowt IV Other Accete

Part IX Other Assets.

(5)

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

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

Part X Other Liabilities.

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

1.	(a) Description of liability	(b) Book value
(1)	Federal income taxes	
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
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 FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII X

Schedule D (Form 990) 2018

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Sche	edule D (Form 990) 2018 THE MALALA FUND			81-	1397590 Page 4
Pa	rt XI Reconciliation of Revenue per Audited Financial Staten	nents With Re			
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12	2a.			
1	Total revenue, gains, and other support per audited financial statements			1	13,242,346.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
а	Net unrealized gains (losses) on investments	2a	122.		
b	Donated services and use of facilities	2b			
с	Recoveries of prior year grants	2c			
d					
е	Add lines 2a through 2d			2e	122.
3	Subtract line 2e from line 1			3	13,242,224.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)	4b			
с	Add lines 4a and 4b			4c	0.
F	Total revenue Add lines 2 and 4 (This must equal Form 000 Port / line 12)			5	13,242,224.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)				
	rt XII Reconciliation of Expenses per Audited Financial State	ments With E			
	rt XII Reconciliation of Expenses per Audited Financial State Complete if the organization answered "Yes" on Form 990, Part IV, line 12	ments With E 2a.	xpenses per	Retu	irn.
	Reconciliation of Expenses per Audited Financial State Complete if the organization answered "Yes" on Form 990, Part IV, line 12 Total expenses and losses per audited financial statements	ments With E 2a.	xpenses per		
Pa	rt XII Reconciliation of Expenses per Audited Financial State Complete if the organization answered "Yes" on Form 990, Part IV, line 12 Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25:	ments With E	xpenses per	Retu	irn.
Pa 1	Reconciliation of Expenses per Audited Financial State Complete if the organization answered "Yes" on Form 990, Part IV, line 12 Total expenses and losses per audited financial statements	ments With E 2a. 	xpenses per	Retu	irn.
Pa 1 2	Image: State of the state	ments With E 2a. 2a 2a 2a 2b	xpenses per	Retu	irn.
Pa 1 2 a b c	Image: Second line of the line line of the line of the line of the line line line of the line o	2a. 2a. 2a. 2a. 2b. 2c.	xpenses per	Retu	irn.
Pa 1 2 a b c d	Reconciliation of Expenses per Audited Financial State Complete if the organization answered "Yes" on Form 990, Part IV, line 12 Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.)	2a. 2a. 2a. 2b. 2c. 2d.	Expenses per	Retu	ırn.
Pa 1 2 a b c d	Reconciliation of Expenses per Audited Financial State Complete if the organization answered "Yes" on Form 990, Part IV, line 12 Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d	2a. 2a 2b 2c 2d	Expenses per	Retu 1 2e	ırn. 10,167,334. 0.
Pa 1 2 a b c d	rt XII Reconciliation of Expenses per Audited Financial State Complete if the organization answered "Yes" on Form 990, Part IV, line 12 Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1	2a. 2a 2b 2c 2d	Expenses per	Retu 1	ırn.
Pa 1 2 a b c d e	TXII Reconciliation of Expenses per Audited Financial States Complete if the organization answered "Yes" on Form 990, Part IV, line 12 Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1:	2a 2a 2b 2c 2d	Expenses per	Retu 1 2e	ırn. 10,167,334. 0.
Pa 1 2 b c d e 3	rt XII Reconciliation of Expenses per Audited Financial State Complete if the organization answered "Yes" on Form 990, Part IV, line 12 Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1	2a 2a 2b 2c 2d	Expenses per	Retu 1 2e	ırn. 10,167,334. 0.
Pa 1 2 a b c d 3 4 a	TXII Reconciliation of Expenses per Audited Financial States Complete if the organization answered "Yes" on Form 990, Part IV, line 12 Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1:	2a 2a 2b 2c 2d 2d	Expenses per	Retu 1 2e	ırn. 10,167,334. 0. 10,167,334.
Pa 1 2 a b c d e 3 4 a b	Image: system of the system	2a 2a 2b 2c 2d 2d	Expenses per	2e 3 4c 4c	ırn. 10,167,334. 0. 10,167,334. 0.
Pa 1 2 a b c d e 3 4 a b c 5	Image: Second state of the second s	2a 2a 2b 2c 2d 2d	Expenses per	1 2e 3	ırn. 10,167,334. 0. 10,167,334.

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

PART X, LINE 2:

FOR THE YEAR ENDED MARCH 31, 2019, THE ORGANIZATION HAS DOCUMENTED ITS

CONSIDERATION OF FASB ASC 740-10, INCOME TAXES, THAT PROVIDES GUIDANCE FOR

REPORTING UNCERTAINTY IN INCOME TAXES AND HAS DETERMINED THAT NO MATERIAL

UNCERTAIN TAX POSITIONS QUALIFY FOR EITHER RECOGNITION OR DISCLOSURE IN

THE FINANCIAL STATEMENTS.

832054 10-29-18

(Form 990)		the organizatio	Attach to Form 990.	IV, III e 14D, 1	5, 01 10.	ZU IO
Department of the Treasury	► Co.to		Open to Public Inspection			
nternal Revenue Service Name of the organizat	·	www.irs.gov/Fo	orm990 for instructions and the latest	information.		ntification number
Name of the organizat						
THE MALALA	FUND				81-1397	590
Part I Genera	al Information on <i>I</i>	Activities Ou	tside the United States. Comple	ete if the orgar	ization answere	d "Yes" on
Form 990), Part IV, line 14b.					
			ds to substantiate the amount of its gra			T
the grantees' elig	gibility for the grants or	assistance, and	the selection criteria used to award the	grants or ass	istance? L	X Yes No
2 For grantmaker	Page 1 - Constraint of the second se second second sec	o organization's	procedures for monitoring the use of its	aranta and a	ther excitance	outoido tho
2 For grantmaker United States.	S. Describe in Part V th	e organization s	procedures for monitoring the use of its	s grants and o	liter assistance	
	aion. (The following Par	t I. line 3 table c	an be duplicated if additional space is r	needed.)		
(a) Region	(b) Number of	(c) Number of	(d) Activities conducted in the region		vity listed in (d)	(f) Total
	offices	employees, agents, and	(by type) (such as, fundraising, pro-	.,	gram service,	expenditures
	in the region	Independent	gram services, investments, grants to		e specific type	for and investments
		contractors in the region	recipients located in the region)	of service	(s) in the region	in the region
			GRANTS TO RECIPIENTS			
EUROPE		0	LOCATED IN REGION			1,542,824.
MIDDLE EAST AND			GRANTS TO RECIPIENTS			
NORTH AFRICA		o o	LOCATED IN REGION			262,200.
			GRANTS TO RECIPIENTS			
NORTH AMERICA		0 0	LOCATED IN REGION			10,000.
			CRANING TO REGERENTE			
SOUTH AMERICA		0	GRANTS TO RECIPIENTS LOCATED IN REGION			787,988.
JOUTH AMERICA	Y	, <u> </u>	LOCATED IN REGION			707,500.
			GRANTS TO RECIPIENTS			
SOUTH ASIA		0 0	LOCATED IN REGION			1,897,920.
			GRANTS TO RECIPIENTS			F 40 041
SUB-SAHARAN AFRIC		J U	LOCATED IN REGION			548,841.
3 a Subtotal		0 0				5,049,773.

Statement of Activities Outside the United States

b Total from continuation

and 3b)

832071 10-31-18

sheets to Part I c Totals (add lines 3a

SCHEDULE F

5,049,773.

Schedule F (Form 990) 2018

Ο.

OMB No. 1545-0047

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

THE MALALA FUND

Page 2

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

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV appraisal, other)
			TRAIN TEACHERS,					
			GIRLS, AND					
			POLICYMAKERS TO					
		SOUTH AMERICA	DEFEND THEIR RIGHT TO	388,000.	WIRE	Ο.		
			REDUCE GIRLS' SCHOOL					
			DROPOUT AND INCREASE					
			GIRLS' SECONDARY					
		SOUTH ASIA	SCHOOL ENROLLMENT AND	223,000.	WIRE	Ο.		
			STRENGTHEN GIRLS'					
			SCHOOL ENROLLMENT AND					
		SUB-SAHARAN	COMPLETION THROUGH A					
		AFRICA	MENTORSHIP PROGRAMME,	166,000.	WIRE	Ο.		
			ADOPTION OF AN					
			ACCELERATED EDUCATION					
			PROGRAMME FOR GIRLS					
		SOUTH ASIA	IN THE GOVERNMENT	266,000.	WIRE	Ο.		
			TRAIN INDIGENOUS					
			GIRLS IN LIFE SKILLS					
			AND ADVOCACY IN					
		SOUTH AMERICA	SUPPORT OF INCREASING	141,988.	WIRE	Ο.		
			BRIDGE AND REMEDIAL					
			EDUCATION AND SCHOOL					
			ENROLLMENT CAMPAIGNS					
		SOUTH ASIA	FOR GIRLS.	226,000.	WIRE	Ο.		
		MIDDLE EAST AND	PROVIDING EDUCATION					
		NORTH AFRICA	TO SYRIAN REFUGEES.	6,700.	WIRE	0.		
			ADVOCATE FOR					
			FINANCING FOR GIRLS'	240.000	MTDE	0		
0 5 1 1 1 1 1 1		SOUTH ASIA	EDUCATION.	249,000.		0.		<u> </u>
			recognized as charities by the		-			27
By the IRS, or for whiteBenter total number of			ction 501(c)(3) equivalency lette	er		🛃 .		2

SEE PART V FOR COLUMN (D) DESCRIPTIONS

Schedule F (Form 990) THE MALALA FUND								Page 2
Part II Continuation of	f Grants and Other	Assistance to Organiz	ations or Entities Outside the	the United States. (Schedule F (Form 990), Part II, line 1)				<u> </u>
1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV appraisal, other)
			COMMUNITY					
		SUB-SAHARAN	SENSITISATION ON					
		AFRICA	GIRLS' EDUCATION.	62,000.	WIRE	0.		
			EXPANDING ACCESS TO					
			GIRLS' EDUCATION IN					
			QUILOMBOLA					
		SOUTH AMERICA	COMMUNITIES.	141,000.	WTDF	0.		
		SOUTH AMERICA	COMMONITIES.	141,000.	WIKE			
			TRAINING GIRL					
		SOUTH ASIA		6,070.	WIDE	0.		
		SOUTH ASTA	ADVOCATES IN INDIA. ADVOCATING FOR	8,070.	WIKE	0.		
			CHANGES TO SOCIAL					
			NORMS, POLICIES, AND	20.000				
		SOUTH ASIA	INFRASTRUCTURE IN	30,000.	WIRE	0.		
			DEVELOP AND TEST A					
			SECONDARY-LEVEL					
		MIDDLE EAST AND	REMEDIAL EDUCATION					
		NORTH AFRICA	PROGRAMME FOR	197,000.	WIRE	0.		
			SCHOLARSHIPS FOR HIGH					
		NORTH AMERICA	SCHOOL GIRLS.	10,000.	WIRE	0.		
			TRAINING GIRL					
			ADVOCATES IN					
		SOUTH ASIA	PAKISTAN.	8,019.	WIRE	0.		_
		MIDDLE EAST AND	SUPPORTING GIRLS'					
		NORTH AFRICA	EDUCATION IN IRAQ.	27,000.	WIRE	0.		
			COLE AN E LEADNING					
			SCALE AN E-LEARNING					
		MIDDLE EAST AND	PLATFORM IN THE	21 500				
		NORTH AFRICA	PUBLIC SCHOOL SYSTEM.	31,500.	MIRE	0.		

81-1397590 THE MALALA FUND Schedule F (Form 990) Page 2 Part II Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1) 1 (g) Amount of (h) Description (i) Method of (b) IRS code section (d) Purpose of (e) Amount (f) Manner of (a) Name of organization (c) Region non-cash of non-cash valuation (book, FMV, and EIN (if applicable) grant of cash grant cash disbursement assistance assistance appraisal, other) SUB-SAHARAN REMOVAL OF SCHOOL AFRICA FEES NATIONWIDE. 305,000.WIRE 0. SUPPORT FOR ADVOCACY EUROPE AND OPERATIONS. 1,249,026.WIRE 0. TRAINING GIRL EUROPE 8,798.WIRE ADVOCATES IN TURKEY. 0 INCREASE GIRLS' SECONDARY SCHOOL SOUTH AMERICA RETENTION. 117,000.WIRE 0 NATIONAL CAMPAIGN TO DEMAND INCREASE AND MORE EFFECTIVE SOUTH ASIA UTILISATION OF 33,000.WIRE 0 ACHIEVE POLICY CHANGE TO PROVIDE FREE AND COMPULSORY EDUCATION SOUTH ASIA FOR CHILDREN IN TEA 158,000.WIRE 0. SUB-SAHARAN TRAINING GIRL AFRICA ADVOCATES IN NIGERIA. 12,127.WIRE 0. PILOT AND SCALE A TEACHER TRAINING MODEL TO SUPPORT EUROPE REFUGEE GIRLS 285,000.WIRE 0. MANAGEMENT OF A SOUTH ASIA SCHOOL FOR GIRLS. 833,022.WIRE 0.

Schedule F (Form 990)	THE M		Page 2					
Part II Continuation of	of Grants and Other	Assistance to Organiz	ations or Entities Outside the	United States.	(Schedule F (Form 9)	
1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SOUTH ASIA	BUILDING GIRLS' ADVOCACY AND LEADERSHIP SKILLS IN SUPPORT OF SECONDARY	-150,000.	WIRE	0.		

Part III can be duplicated if ac (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

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

Page 3

Schedule F (Form 990) 2018

1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	X Yes	No
2	Did the organization have an interest in a foreign trust during the tax year? <i>If</i> "Yes," <i>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)</i>	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? <i>If</i> "Yes," <i>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)</i>	Yes	X No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships (see Instructions for Form 8865)	Yes	X No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713; don't file with Form 990)	Yes	X No

Schedule F (Form 990) 2018

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Part V Supplemental Information

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

PART I, LINE 2:

MALALA FUND CONDUCTS DETAILED DUE DILIGENCE ON ALL POTENTIAL GRANTEES, INCLUDING NAME CHECKS AGAINST THE U.S. GOVERNMENT'S OFAC LIST AND A THOROUGH FINANCIAL REVIEW. MALALA FUND'S PROGRAMME OFFICERS AND IN-COUNTRY REPRESENTATIVE ARE IN REGULAR COMMUNICATION WITH ALL AWARDED GRANTEES AND CONDUCT ROUTINE, DOCUMENTED SITE VISITS OF ALL PROJECTS. THE MAJORITY OF MALALA FUND'S GRANTS ARE MULTI-YEAR, WITH FUNDING TRANCHED AGAINST PROGRESS. MALALA FUND GRANTEES ARE REQUIRED TO SUBMIT REGULAR, DETAILED FINANCIAL AND NARRATIVE REPORTS AND MALALA FUND RETAINS THE RIGHT TO DELAY FUTURE GRANT PAYMENTS IF A PROJECT IS BEHIND SCHEDULE. MALALA FUND MAY ALSO DISCONTINUE GRANT FUNDING IF A GRANTEE FAILS TO MEET KEY PERFORMANCE MILESTONES. MALALA FUND'S GRANT AGREEMENTS PERMIT ITS REPRESENTATIVES TO VISIT PROJECT SITES WITH OR WITHOUT NOTICE AND TO HAVE FULL ACCESS TO GRANTEES' FINANCIALS RECORDS, RECEIPTS AND OTHER ITEMS APPLICABLE TO A GRANT AWARD. MALALA FUND REQUIRES THAT GRANTEES SHARE COPIES OF ANNUAL AUDITED FINANCIALS AND RESERVES THE RIGHT TO REQUEST GRANTEES TO OBTAIN AN INDEPENDENT AUDIT SPECIFICALLY ON EXPENDITURES OF MALALA FUND PAYMENTS.

PART II, COLUMN (D):

REGION: SOUTH AMERICA

(D) PURPOSE OF GRANT: TRAIN TEACHERS, GIRLS, AND POLICYMAKERS TO DEFEND

THEIR RIGHT TO GENDER EDUCATION.

REGION: SOUTH ASIA

(D) PURPOSE OF GRANT: REDUCE GIRLS' SCHOOL DROPOUT AND INCREASE GIRLS'

SECONDARY SCHOOL ENROLLMENT AND ACCESS

832075 10-31-18

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.

REGION: SUB-SAHARAN AFRICA

Part V Supplemental Information

(D) PURPOSE OF GRANT: STRENGTHEN GIRLS' SCHOOL ENROLLMENT AND COMPLETION

THROUGH A MENTORSHIP PROGRAMME, COMMUNITY-LED ADVOCACY, AND

AWARENESS-RAISING CAMPAIGNS.

REGION: SOUTH ASIA

(D) PURPOSE OF GRANT: ADOPTION OF AN ACCELERATED EDUCATION PROGRAMME FOR

GIRLS IN THE GOVERNMENT EDUCATION SYSTEM.

REGION: SOUTH AMERICA

(D) PURPOSE OF GRANT: TRAIN INDIGENOUS GIRLS IN LIFE SKILLS AND ADVOCACY

IN SUPPORT OF INCREASING INDIGENOUS GIRLS' ACCESS TO EDUCATION.

REGION: SOUTH ASIA

(D) PURPOSE OF GRANT: ADVOCATING FOR CHANGES TO SOCIAL NORMS, POLICIES,

AND INFRASTRUCTURE IN SUPPORT OF GIRLS' EDUCATION.

REGION: MIDDLE EAST AND NORTH AFRICA

(D) PURPOSE OF GRANT: DEVELOP AND TEST A SECONDARY-LEVEL REMEDIAL

EDUCATION PROGRAMME FOR REFUGEES.

REGION: SOUTH ASIA

(D) PURPOSE OF GRANT: NATIONAL CAMPAIGN TO DEMAND INCREASE AND MORE

EFFECTIVE UTILISATION OF FINANCES FOR GIRLS' EDUCATION AND RIGHT TO

EDUCATION FOR CHILDREN WITH DISABILITIES.

832075 10-31-18

Schedule F (Form 990) 2018

Schedule F (Form 990) 2018 THE MALALA FUND

Part V Supplemental Information

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

REGION: SOUTH ASIA

(D) PURPOSE OF GRANT: ACHIEVE POLICY CHANGE TO PROVIDE FREE AND

COMPULSORY EDUCATION FOR CHILDREN IN TEA GARDENS.

REGION: EUROPE

(D) PURPOSE OF GRANT: PILOT AND SCALE A TEACHER TRAINING MODEL TO

SUPPORT REFUGEE GIRLS' EDUCATION.

REGION: SOUTH ASIA

(D) PURPOSE OF GRANT: BUILDING GIRLS' ADVOCACY AND LEADERSHIP SKILLS IN

SUPPORT OF SECONDARY EDUCATION.

832075 10-31-18

42 2018.04020 THE MALALA FUND

SC	HEDULE J	1	OMB No. 1545-0047						
(Fo	rm 990)	For certain Officers, Directors, Trustees, Key Employees, and Highest		20	19	2			
		Compensated Employees Complete if the organization answered "Yes" on Form 990, Part IV, line 23.		20	IU)			
Depa	tment of the Treasury	Attach to Form 990.		Open to					
Intern	al Revenue Service	► Go to www.irs.gov/Form990 for instructions and the latest information.		Inspe					
Nan	ne of the organizatio		Employer i			mber			
		THE MALALA FUND	81-1	.39759	0				
Pa	rt I Question	s Regarding Compensation							
	a				Yes	No			
1a		iate box(es) if the organization provided any of the following to or for a person listed on Form	n 990,						
		line 1a. Complete Part III to provide any relevant information regarding these items.							
	First-class or o	, i i i i i i i i i i i i i i i i i i i							
	Travel for com								
	L Tax indemnification and gross-up payments								
	Discretionary	spending account Personal services (such as maid, chauffer	ur, chet)						
Ŀ	If any of the have-	on line to are abacked, did the argonization follow a written relieves resting any state to							
D	b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or								
0		provision of all of the expenses described above? If "No," complete Part III to explain		1b					
2		n require substantiation prior to reimbursing or allowing expenses incurred by all directors,							
	trustees, and onice	ers, including the CEO/Executive Director, regarding the items checked on line 1a?		2					
3	Indicate which if a	ny, of the following the filing organization used to establish the compensation of the organization	ation's						
5		ector. Check all that apply. Do not check any boxes for methods used by a related organization of the organizat							
		ation of the CEO/Executive Director, but explain in Part III.							
	Compensation								
		compensation consultant X Compensation survey or study							
	X Form 990 of o		ommittee						
			Johnmittee						
4	During the year, did	d any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing							
-	organization or a re								
а	•	ce payment or change-of-control payment?		4a		X			
b		ceive payment from, a supplemental nonqualified retirement plan?				Х			
с		ceive payment from, an equity-based compensation arrangement?				Х			
		nes 4a-c, list the persons and provide the applicable amounts for each item in Part III.							
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.							
5		on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensati	on						
	contingent on the r								
а	The organization?			5a		Х			
b	Any related organiz	zation?		5b		Х			
		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 compensati	on						
	contingent on the r	net earnings of:							
а	The organization?			6a		X			
		zation?				X			
		or 6b, describe in Part III.							
7	For persons listed	on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payment	s						
	not described on li	nes 5 and 6? If "Yes," describe in Part III		7	Х				
8		reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to t							
		eption described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III		8		X			
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in								
	Regulations section	n 53.4958-6(c)?		9					
LHA		eduction Act Notice, see the Instructions for Form 990.		ule J (Forr	n 990)) 2018			

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81-1397590

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

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

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

	(B) Breakdown of	W-2 and/or 1099-MI	SC compensation	(C) Retirement and other deferred	(D) Nontaxable	(E) Total of columns	(F) Compensation
(A) Name and Title	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deterred compensation	benefits	(B)(i)-(D)	in column (B) reported as deferred on prior Form 990
(1) FARAH MOHAMED (i)	206,043.	0.	0.	12,363.	25,820.	244,226.	0.
CEO (SEE SCHEDULE O) (ii)	0.	0.	0.	0.	0.	0.	0.
(2) TAYLOR ROYLE - CHIEF COMM. & (i)		0.	0.	4,338.	12,550.	160,310.	0.
CREAT. OFF; INT. CO-CEO (FROM 2/5/19) (ii)	0.	0.	0.	0.	0.	0.	0.
(3) PATRICIA EISNER (i)	400 000	0.	0.	4,200.	22,020.	165,182.	0.
CHIEF DEVELOPMENT OFFICER (ii)		0.	0.	0.	0.	0.	0.
(i)							
(ii)							
(i)							
(ii)							
(i)							
(ii)							
(i)							
(ii)							
(i)							
(ii)							
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(ii)							
(i)							
(ii)							
(i)							
(ii)							
(i)							
(ii)							

Page 3

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 7:

ERIN GORE RECEIVED A BONUS OF \$5,000 IN 2018.

Schedule J (Form 990) 2018

SCHEDULE M (Form 990)

Noncash Contributions

OMB No. 1545-0047 2018

Department of the Treasury Internal Revenue Service

Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30. Attach to Form 990.

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

Open to Public . Inspection

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

►

Employer identification number -1397590

	THE MALALA F	81-1397590				
Pa	rt I Types of Property					
		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g		(d) nod of determining contribution amounts
1	Art - Works of art					
2	Art - Historical treasures					
3	Art - Fractional interests					
4	Books and publications					
5	Clothing and household goods					
6	Cars and other vehicles					
7	Boats and planes					
8	Intellectual property					
9	Securities - Publicly traded	Х	8	125,218.	FMV	
10	Securities - Closely held stock					
11	Securities - Partnership, LLC, or					
	trust interests					
12	Securities - Miscellaneous					
13	Qualified conservation contribution -					
	Historic structures					

	Historic structures								
14	Qualified conservation contribution - Other								
15	Real estate - Residential								
16	Real estate - Commercial								
17	Real estate - Other								
18	Collectibles								
19	Food inventory								
20	Drugs and medical supplies								
21	Taxidermy								
22	Historical artifacts								
23	Scientific specimens								
24	Archeological artifacts								
25	Other (IPHONES/COMPS)	X	1	83	,893	FMV			
26	Other ► ()								
27	Other ► ()								
28	Other 🕨 ()								
29	Number of Forms 8283 received by the organized	zation durin	g the tax year for c	ontributions					
	for which the organization completed Form 828	83, Part IV,	Donee Acknowledg	gement	29		0		
								Yes	No
30a	During the year, did the organization receive by	y contributio	on any property rep	oorted in Part I, lin	es 1 throi	ugh 28, that it			
	must hold for at least three years from the date	e of the initia	al contribution, and	l which isn't requir	red to be	used for			
	exempt purposes for the entire holding period?	?					30a		X
b	If "Yes," describe the arrangement in Part II.								
31	Does the organization have a gift acceptance p	policy that r	equires the review	of any nonstanda	rd contrib	utions?	31	Х	
32a	Does the organization hire or use third parties	or related or	rganizations to soli	cit, process, or se	ll noncasl	ו			
	contributions?						32a		X
b	If "Yes," describe in Part II.								
33	If the organization didn't report an amount in c	olumn (c) fo	or a type of property	y for which colum	n (a) is ch	ecked,			
	describe in Part II.								

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule M (Form 990) 2018

832141 10-18-18

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Schedule M (Form 990) 2018 THE MALALA FUND

Part II

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

SCHEDULE M, PART I, COLUMN (B):

COLUMN (B) REPRESENTS THE NUMBER OF CONTRIBUTIONS

Schedule M (Form 990) 2018

832142 10-18-18

SCHEDULE O

(Form 990 or 990-EZ) Department of the Treasury

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

THE MALALA FUND

81-1397590

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

CAMPAIGN, THE GOVERNOR OF KADUNA STATE IN NORTHERN NIGERIA PASSED THE

CHILD RIGHTS ACT, WHICH GUARANTEES ALL CHILDREN IN THE STATE THE RIGHT

TO BASIC EDUCATION, ELIMINATES SCHOOL FEES AND PREVENTS MARRIAGE UNDER

THE AGE OF 18.

2. IN AFGHANISTAN, TEACH FOR AFGHANISTAN (TAO) RECRUITED AND TRAINED FEMALE EDUCATORS TO INCREASE GIRLS' ENROLLMENT. TAO FELLOWS ARE NOW TEACHING 10,344 STUDENTS IN THE POOREST PUBLIC SCHOOLS OF PARWAN PROVINCE.

3. IN LEBANON, LEBANESE ALTERNATIVE LEARNING (LAL) SIGNED AN AGREEMENT WITH THE CENTRE FOR EDUCATIONAL RESEARCH AND DEVELOPMENT FOR THE ACCREDITATION OF ITS DIGITAL STEM CURRICULA, WHICH TEACHES STUDENTS SCIENTIFIC CONCEPTS AND TECHNICAL SKILLS THROUGH INTERACTIVE EXERCISES, PROBLEM-BASED ACTIVITIES AND VIDEOS. THIS ACCREDITATION WILL HELP THE ORGANIZATION EXPAND ITS PROGRAM TO GRADES SEVEN, EIGHT AND NINE IN ANY LEBANESE SCHOOL.

4. IN INDIA, THE CENTRE FOR BUDGET AND POLICY STUDIES (CBPS) CREATED AN EVIDENCE-BASED MENTORSHIP PROGRAM TO HELP GIRLS AND BOYS DEVELOP LEADERSHIP AND CRITICAL THINKING SKILLS AND STRENGTHEN THEIR PARTICIPATION IN CIVIC LIFE. CBPS BEGAN MENTORING 417 GIRLS AND 209 BOYS IN GRADES SIX AND SEVEN IN 10 GOVERNMENT SCHOOLS ACROSS PATNA AND MUZAFFARPUR.

 LHA
 For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.
 Schedule O (Form 990 or 990-EZ) (2018)

 832211
 10-10-18

Sche	edule C) (Form 990 o	r 990-EZ) (2018)		Page 2					
Nam	ame of the organization THE MALALA FUND								Employer identification number 81-1397590	
5.										

PARENTS, TEACHERS AND VILLAGE LEADERS TO ENROLL OUT-OF-SCHOOL CHILDREN

BACK IN SCHOOL. AS A RESULT, 866 GIRLS AND 27 BOYS AGES 10-16

RE-ENROLLED IN SCHOOL.

FORM 990, PART VI, SECTION A, LINE 2:

ZIAUDDIN YOUSAFZAI, HONORARY CHAIRPERSON AND COFOUNDER, IS THE FATHER OF

MALALA YOUSAFZAI, HONORARY CHAIRPERSON AND COFOUNDER.

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

AFTER THE FORM 990 IS PREPARED BY THE MALALA FUND'S INDEPENDENT AUDIT FIRM, IT IS REVIEWED BY THE MANAGEMENT. A FINAL VERSION OF THE FORM IS PRESENTED TO THE BOARD OF DIRECTORS PRIOR TO FILING. THE FORM 990 IS FILED WITH THE IRS FOLLOWING FINAL SIGN OFF BY THE BOARD OF DIRECTORS.

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

EVERY YEAR, ALL MALALA FUND BOARD MEMBERS, OFFICERS AND EMPLOYEE IN DECISION-MAKING POSITIONS MUST SIGN AN OFFICIAL STATEMENT AFFIRMING THAT EACH PERSON HAS RECEIVED, READ AND UNDERSTANDS THE ORGANIZATION'S CONFLICT OF INTEREST POLICY AND FULLY AGREES TO COMPLY WITH THE POLICY. BOARD MEMBERS, OFFICERS AND KEY EMPLOYEES MUST DISCLOSE IN WRITING ANY AND ALL ITEMS OF ACTUAL OR POTENTIAL CONFLICTS OF INTEREST AND THIS LIST BECOMES WIDELY AVAILABLE TO ALL BOARD MEMBERS AND THE EMPLOYEES NECESSARY TO TRACK AND ENFORCE COMPLIANCE. WHENEVER ANY DIRECTOR, OFFICER OR KEY EMPLOYEE OF THE ORGANIZATION BECOMES AWARE THAT THE MALALA FUND IS CONSIDERING A TRANSACTION THAT COULD POTENTIALLY CREATE A CONFLICT OF INTEREST, HE OR SHE IS OBLIGATED TO NOTIFY THE BOARD AND TO DISCLOSE ALL MATERIAL FACTS RELATING TO HIS OR HER INTEREST IN THE TRANSACTION. MALALA FUND 82212 10-10-18 249

08400917 745960 21883

2018.04020 THE MALALA FUND

21883__1

Schedule O (Form 990 or 990-EZ) (2018)	Page 2		
Name of the organization	Employer identification number		
THE MALALA FUND	81-1397590		
REPRESENTATIVES ARE NOT PERMITTED TO BE INVOLVED IN DECIS	IONS THAT COULD		

RAISE CONFLICT OF INTEREST CONCERNS, EITHER PERCEIVED OR ACTUAL.

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

PER MALALA FUND'S COMPENSATION POLICY, IN DETERMINING THE COMPENSATION LEVEL FOR THE PRESIDENT/CEO OF THE ORGANIZATION AND OTHER COVERED PERSONS, THE BOARD OF DIRECTORS MUST DEFER TO COMPARABILITY DATA DEMONSTRATING THE REASONABLENESS OF A PROPOSED COMPENSATION LEVEL. THIS DATA MUST INCLUDE DOCUMENTATION OF COMPENSATION LEVELS PAID BY SIMILARLY SITUATION ORGANIZATIONS FOR FUNCTIONALLY COMPARABLE POSITIONS AND CAN BE PULLED FROM INDEPENDENT REPORTS AND/OR INFORMATION OBTAINED FROM IRS FORM 990 FILINGS OF COMPARABLE ORGANIZATIONS. THE BOARD MUST DOCUMENT HOW IT REACHED ITS DECISION REGARDING COMPENSATION OF THE PRESIDENT/CEO AND SIMILARLY COVERED PERSONS, INCLUDING THE DATA ON WHICH IT RELIED. THE MOST RECENT EVALUATION TOOK PLACE IN NOVEMBER 2018.

THE PRESIDENT/CEO OF MALALA FUND SETS THE COMPENSATION LEVELS FOR ALL EMPLOYEES OTHER THAN COVERED PERSONS AND DOES SO IN ACCORDANCE AN ANNUAL BOARD APPROVED BUDGET. MALALA FUND EMPLOYEE SALARIES ARE BENCHMARKED AGAINST TWO INDEPENDENT SURVEYS FROM SIMILAR ORGANIZATIONS WITH THE OBJECTIVE OF ENSURING COMPETITIVE COMPENSATION THAT IS STILL REASONABLE AND IN KEEPING WITH MALALA FUND'S STATUS AS A CHARITY.

FORM 990, PART VI, LINE 17, LIST OF STATES RECEIVING COPY OF FORM 990: AL,AR,CA,FL,GA,HI,IL,KS,KY,MA,MD,MI,MN,MS,NC,NH,NJ,NM,NY,OR,PA,RI,SC,TN,UT VA,WV,WI

	FORM	990,	PART	VI,	SECTION	C,	LINE	19:						
	832212 10-	10-18							50			Schedule O (Form 990	or 990-EZ) (2	2018)
08	40091	7 745	960	21883		20	18.04	020	50	MALALA	FUND		21883	1

Schedule O (Form 990 or 990-EZ) (2018)	Page 2
Name of the organization THE MALALA FUND	Employer identification number 81-1397590
THE MALALA FUND'S GOVERNING DOCUMENTS, CONFLICT OF INTERE	ST POLICY AND
AUDITED FINANCIAL STATEMENTS ARE AVAILABLE TO THE PUBLIC	UPON REQUEST. ITS
AUDITED FINANCIAL STATEMENTS ARE ALSO AVAILABLE ON THE OF	GANIZATION'S
WEBSITE.	

FORM 990, PART VII, SECTION A:

FARAH MOHAMED, CEO, WAS PAID BY MALALA FUND UK, AN AFFILIATED

ORGANIZATION THAT IS NOT A RELATED ORGANIZATION FOR PURPOSES OF FORM

990. HER COMPENSATION IS DISCLOSED IN PART VII FOR INFORMATIONAL

PURPOSES ONLY.

FORM 990, PART VII, SECTION B:

THE COST OF RESSEARCH SERVICES FROM HUMANKIND RESEARCH WAS COVERED BY A

\$160,000 RESTRICTED DONATION.

FORM 990, PART IX, LINE 11G, OTHER FEES:

PROFESSIONAL SERVICES - COMMUNICATION:

PROGRAM SERVICE EXPENSES	167,236.
MANAGEMENT AND GENERAL EXPENSES	53,086.
FUNDRAISING EXPENSES	21,709.
TOTAL EXPENSES	242,031.

PROFESSIONAL SERVICES - DIGITAL:

PROGRAM	SERVICE	EXPENSES	
---------	---------	----------	--

MANAGEMENT AND GENERAL EXPENSES 16,827.

FUNDRAISING EXPENSES

TOTAL EXPENSES

832212 10-10-18

53,009.

6,881.

76,717.

Schedule O (Form 990 or 990-EZ) (2018) Name of the organization	Employer identification numl
THE MALALA FUND	81-1397590
PROFESSIONAL SERVICES - GRAPHIC DESIGN:	
PROGRAM SERVICE EXPENSES	17,47
MANAGEMENT AND GENERAL EXPENSES	5,54
FUNDRAISING EXPENSES	2,26
TOTAL EXPENSES	25,28
PROFESSIONAL SERVICES - MEDIA/CONTENT:	
PROGRAM SERVICE EXPENSES	134,54
MANAGEMENT AND GENERAL EXPENSES	42,70
FUNDRAISING EXPENSES	17,46
TOTAL EXPENSES	194,71
PROFESSIONAL SERVICES - HUMAN RESOURCES:	
PROGRAM SERVICE EXPENSES	96,44
MANAGEMENT AND GENERAL EXPENSES	30,61
FUNDRAISING EXPENSES	12,51
TOTAL EXPENSES	139,57
PROFESSIONAL SERVICES - OTHER:	
PROGRAM SERVICE EXPENSES	81,40
MANAGEMENT AND GENERAL EXPENSES	25,84
FUNDRAISING EXPENSES	10,56
TOTAL EXPENSES	117,80
PROFESSIONAL SERVICES - PROGRAMS:	_
PROGRAM SERVICE EXPENSES	55,50
MANAGEMENT AND GENERAL EXPENSES	17,62
832212 10-10-18 52	Schedule O (Form 990 or 990-EZ) (20

Schedule O (Form 990 or 990-EZ) (2018) Name of the organization	Page 2 Employer identification number 81-1397590
THE MALALA FUND FUNDRAISING EXPENSES	7,206.
TOTAL EXPENSES	80,333.
PROFESSIONAL SERVICES - RESEARCH:	
PROGRAM SERVICE EXPENSES	31,914.
MANAGEMENT AND GENERAL EXPENSES	10,131.
FUNDRAISING EXPENSES	4,143.
TOTAL EXPENSES	46,188.
PROFESSIONAL SERVICES- SECURITY:	
PROGRAM SERVICE EXPENSES	58,696.
MANAGEMENT AND GENERAL EXPENSES	18,632.
FUNDRAISING EXPENSES	7,619.
TOTAL EXPENSES	84,947.
PROFESSIONAL SERVICES - STATE SOLICITATIONS:	
PROGRAM SERVICE EXPENSES	7,853.
MANAGEMENT AND GENERAL EXPENSES	2,493.
FUNDRAISING EXPENSES	1,019.
TOTAL EXPENSES	11,365.
PROFESSIONAL SERVICES - IN COUNTRY REPS:	
PROGRAM SERVICE EXPENSES	245,090.
MANAGEMENT AND GENERAL EXPENSES	77,800.
FUNDRAISING EXPENSES	31,816.
TOTAL EXPENSES	354,706.
TOTAL OTHER FEES ON FORM 990, PART IX, LINE 11G, COL A	1,373,675.

832212 10-10-18