

** PUBLIC DISCLOSURE COPY ** Return of Organization Exempt From Income Tax

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

OMB No. 1545-0047 Open to Public

Department of the Treasury Internal Revenue Service

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

Inspection

A	or the	2023 calendar year, or tax year beginning and en	nding		
В	Check if applicable	C Name of organization		D Employer identific	cation number
	Addres				
	Name change	Doing business as		94-17031	55
E	Initial return	'	oom/suite 0 0	E Telephone number (202)332-	
L	lreturn/ termin- ated		00	G Gross receipts \$	20,557,829.
	Amend			H(a) Is this a group re	
F	_ireturn ☐Applic _ition			for subordinates	
·	pendir	SAME AS C ABOVE		H(b) Are all subordinates in	
T -	Гах-ехе	empt status: X 501(c)(3) 501(c) () (insert no.) 4947(a)(1) or	527		list. See instructions
	Websit		<u> </u>	H(c) Group exemption	
_		organization: X Corporation Trust Association Other	L Year		State of legal domicile: DC
	art I	Summary			1
93	1	Briefly describe the organization's mission or most significant activities: ${f SEE} {f PI}$	ART I	II, LINE 1.	
Governance	2	Check this box if the organization discontinued its operations or disposed	d of more	than 25% of its net ass	ete
Š	3	Number of voting manch are of the accoming to the Co. 130 P. d.)		3	13
		Number of independent voting members of the governing body (Part VI, line 1b)			13
9	5	Total number of individuals employed in calendar year 2023 (Part V, line 2a)			45
vitie	6	Total number of volunteers (estimate if necessary)		6	209
Activities &	7 a	Tatal		7a	0.
	b	Net unrelated business taxable income from Form 990-T, Part I, line 11			0.
				Prior Year	Current Year
9	8	Contributions and grants (Part VIII, line 1h)		10,875,020.	15,546,405.
Revenue	9	Program service revenue (Part VIII, line 2g)		2,490.	2,829.
Ř	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		371,682.	708,165.
	111	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		31,613.	30,543.
		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		11,280,805.	16,287,942.
		Grants and similar amounts paid (Part IX, column (A), lines 1-3)		2,136,533.	3,686,655.
		Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.
es	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		4,578,720.	5,033,819.
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)	; ├─	162,000.	168,000.
Exc	170	Total fundraising expenses (Part IX, column (D), line 25) 1,614,218		E OAA EEE	4 250 170
	18	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		5,844,555. 12,721,808.	4,359,170. 13,247,644.
		Revenue less expenses. Subtract line 18 from line 12		-1.441.003.	3,040,298.
or	4	Trevende 1656 expenses. Oubtract line 16 from line 12	Be	ginning of Current Year	End of Year
ets	=	Total assets (Part X, line 16)		27,050,255.	33,416,163.
Ass	21	Total liabilities (Part X, line 26)	····	4,868,872.	4,977,038.
Net		Net assets or fund balances. Subtract line 21 from line 20		22,181,383.	28,439,125.
P	art II	Signature Block			
Und	ler pena	lties of perjury, I declare that I have examined this return, including accompanying schedules a	nd stateme	ents, and to the best of my	knowledge and belief it is
true	, correc	ct, and complete. Declaration of preparer (other than officer) is based on all information of which	h preparer	has any knowledge.	mornings and bollon, it to
Sig	ın	Signature of officer	<u> </u>	Date	1
He	re	JOHN SEAGER, PRESIDENT & CEO	$ \mathcal{C} $	816	,124
		Type or print name and title			
<u>.</u>		Print/Type preparer's name Preparer's signature		Date Check Check	PTIN
Pai		RICHARD J. LOCASTRO, CPA Richard & hocastro		8/05/2024 "self-employ	
	parer	Firm's name GELMAN, ROSENBERG & FREEDMAN		Firm's EIN 5	<u>2-1392008</u>
บริย	Only	Firm's address 4550 MONTGOMERY AVE SUITE 800N		- 22	1 054 0000
		BETHESDA, MD 20814-2930		Phone no. 30	1-951-9090
Ma	y the I	RS discuss this return with the preparer shown above? See instructions			X Yes No

Part	
	Check if Schedule O contains a response or note to any line in this Part III
1 B	riefly describe the organization's mission:
C	OVERPOPULATION THREATENS THE QUALITY OF LIFE FOR PEOPLE EVERYWHERE.
Ī	POPULATION CONNECTION IS THE NATIONAL GRASSROOTS POPULATION
<u></u>	RGANIZATION THAT EDUCATES YOUNG PEOPLE AND ADVOCATES PROGRESSIVE
<i>P</i>	ACTION TO STABILIZE WORLD POPULATION AT A LEVEL THAT CAN BE SUSTAINED
2 D	olid the organization undertake any significant program services during the year which were not listed on the
	rior Form 990 or 990-EZ?
	"Yes," describe these new services on Schedule O.
	olid the organization cease conducting, or make significant changes in how it conducts, any program services?
	"Yes," describe these changes on Schedule O.
	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.
	section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and
	evenue, if any, for each program service reported. Code:) (Expenses \$ 3,398,387. including grants of \$ 3,177,321.) (Revenue \$
`	Code:)(Expenses \$3,398,387. including grants of \$3,177,321.) (Revenue \$FIELD AND OUTREACH: TO ASSIST POPULATION CONNECTION ACTIVISTS
_	NATIONWIDE IN BUILDING AND SUSTAINING STATE AND LOCAL EDUCATIONAL,
_	MEDIA AND LOBBYING EFFORTS ON BEHALF OF POPULATION CONNECTION THROUGH
_	ORGANIZING AND PROVIDING TRAINING, TECHNICAL ASSISTANCE AND FUNDING.
_	REPRESENT POPULATION CONNECTION IN COALITIONS FOCUSED ON GRASSROOTS
_	ACTION AND AT PUBLIC PRESENTATIONS AND EXHIBITIONS AS NEEDED. 2023
_	IIGLIGHTS INCLUDE: OUT ANNUAL, FOURTH VIRTUAL, CAPITOL HILL DAYS
_	ADVOCACY EVENT. ACTIVISTS WHO ATTENDED A VARIETY OF SESSIONS INCLUDING
Ā	WELCOME SESSION AND TRIVIA GAME, A KEYNOTE TALK FROM CONGRESSWOMAN
5	SUSAN WILD (PA-D/07), AN ADVOCACY TRAINING, AND A VIRTUAL LOBBY DAY.
H	HOSTED VIRTUAL EVENTS INCLUDING AN INSTAGRAM LIVE FOCUSED ON TRANS
F	RIGHTS AND REPRODUCTIVE RIGHTS FEATURING A REPRESENTATIVE FROM THE
`	Code:) (Expenses \$2,329,857. including grants of \$13,388.) (Revenue \$
_	POPULATION EDUCATION: TO PROMOTE POPULATION LITERACY AMONG AMERICAN
_	OUTH BY (1) PROVIDING EDUCATORS WITH TEACHING RESOURCES AND
_	PROFESSIONAL DEVELOPMENT WORKSHOPS TO HELP THEM EFFECTIVELY COVER
_	POPULATION DYNAMICS AND THEIR IMPACTS IN K-12 CLASSROOMS; AND (2)
_	PREPARING EDUCATORS TO OFFER TRAINING TO OTHER TEACHERS THROUGH THE POPULATION EDUCATION TRAINING NETWORK (PETNET). FINALLY, TO PROVIDE
_	POPULATION EDUCATION TRAINING NETWORK (PETNET). FINALLY, TO PROVIDE FOLLOW-UP ASSISTANCE AND INFORMATION ENABLING FORMER TRAINEES TO APPLY
_	CHEIR TRAINING MOST EFFECTIVELY. 2023 HIGHLIGHTS INCLUDE:
_	- STAFF AND VOLUNTEER TEACHER TRAINERS CONDUCTED 549 POP ED WORKSHOPS
	BOTH IN-PERSON AND VIRTUAL) FOR EDUCATORS IN 46 U.S. STATES AND
_	PERRITORIES AND 5 CANADIAN PROVINCES.
	- FACILITATE 3 LEADERSHIP INSTITUTES TO TRAIN NEW WORKSHOP
4c (c	Code:) (Expenses \$2, 285, 565 • including grants of \$\$ 54 •) (Revenue \$\$
M	MEMBERSHIP: SUCCESS IN THE AREAS OF ADVOCACY AND PUBLIC EDUCATION
Ī	DEPENDS LARGELY ON THE SUPPORT AND DEDICATION OF THE ORGANIZATION'S
	MEMBERS. WE HAVE 40,000 MEMBERS ACROSS THE NATION, HELPING REACH OUR
_	OALS THROUGH PUBLIC OUTREACH, SUCH AS SHARING INFORMATION AT LOCAL
_	COMMUNITY EVENTS, HOSTING VIRTUAL EVENTS, DISTRIBUTING OUR MAGAZINE, OR
_	VRITING LETTERS TO THE EDITOR OF LOCAL NEWSPAPERS. WE SUPPORT OUR
_	MEMBERS BY PROVIDING MATERIALS FOR THEIR DISTRIBUTION, PAYING
_	REGISTRATION AND LOGISTICAL FEES FOR LOCAL EVENTS SUCH AS EARTH DAY,
_	HOLDING TRAINING AND INFORMATION SESSIONS, RESPONDING TO THEIR
_	CORRESPONDENCE AND REQUESTS FOR INFORMATION, AND ORDERS FOR OUR
	PRODUCTS AND/OR PUBLICATIONS. IN 2023, WE HOSTED 20 VIRTUAL EVENTS CONNECTING MORE THAN 1,000 INDIVIDUALS. OUR EVENTS, INCLUDING GUEST
	Other program services (Describe on Schedule O.)
40 C	Suppose 2 702 034 including graphs of \$ 495 892 in Vigurance \$
4e T	Expenses \$ 2,702,034. including grants of \$ 495,892.) (Revenue \$) Otal program service expenses 10,715,843.

Form 990 (2023) POPULATION CONNECTION Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4	X	
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 Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to	<u> </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,	Ť		
•	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? <i>If</i> "Yes," <i>complete</i>	-		
0	, ,	8		x
0	Schedule D, Part III	-		
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?			x
40	If "Yes," complete Schedule D, Part IV	9		<u> </u>
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments		v	
	or in quasi-endowments? If "Yes," complete Schedule D, Part V	10	X	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X,			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	X	<u> </u>
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		<u> </u>
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			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a		X
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	X	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b	X	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	X	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	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		X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		<u></u>
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
-1	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Х	
	democre government on Fartix, column (-y, interier in Fes. Complete Schedule I, Parts Fand II	<u> </u>		L

Form 990 (2023) POPULATION CONNECTION Part IV Checklist of Required Schedules (continued)

			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			
	Schedule J	23	Х	—
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete	l		7.7
	Schedule K. If "No," go to line 25a	24a		<u> </u>
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		\vdash
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease	24c		
d	any tax-exempt bonds? Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		\vdash
	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		X
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			37
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties? (See the Schedule L, Part IV,			
_	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? f	28a		x
h	"Yes," complete Schedule L, Part IV	28b		X
	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If			
	"Yes," complete Schedule L, Part IV	28c		Х
29	Did the organization receive more than \$25,000 in noncash 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? If "Yes," complete			
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			. v
0.4	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		<u> </u>
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and	34	Х	
35.2	Part V, line 1 Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	X	\vdash
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	000		
-	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b	Х	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?			1
Da	Note: All Form 990 filers are required to complete Schedule O † V Statements Regarding Other IRS Filings and Tax Compliance	38	Х	Щ_
Par				
	Check if Schedule O contains a response or note to any line in this Part V		V	
10	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable		Yes	No
	Enter the number reported in box 3 of Form 1090. Enter -0- if not applicable Enter the number of Forms W-2G included on 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	
332004	1 12-21-23	Form	990	(2023)

Form 990 (2023) POPULATION CONNECTION

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 45	5		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х	
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		_X_
b	at for the calendary year ending with or within the year covered by this return it less to ne is reported on line 2a, did the organization file all required federal employment tax returns? If the organization have unrelated business gross income of \$1,000 or more during the year? Yes, has it filed a Form 990-T for this year? If "No" to line 2b, provide an explanation on Schedule O and you then deep the calendar year, did the organization have an interest in, or a signature or other authority over, a ancial account in a foreign country (such as a bank account, securities account, or other financial account)? Yes, there the name of the foreign country Yes, either the name of the foreign country (such as a bank account, securities account, or other financial account)? Yes, there the name of the foreign country (such as a bank account, securities account, or other financial account)? Yes, the start of thing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAF). The instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAF). The instructions of the instructions for thing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAF). The instruction of the annual prost party to a prohibited tax shelter transaction? Yes' to line 5a or 5b, did the organization file Form 8886-T? ses the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solict y contributions that twere not tax deductible as charitable contributions? Yes, did the organization include with every solicitation an express statement that such contributions or gifts rere not tax deductible? Yes, did the organization service application that was a contribution sunder section 170(c). It is organization to service application that was a contribution sunder section 170(c). It is organization service application that was a contribution sunder section 170(c) and party organization services			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5a		5a		<u>X</u>
b		5b		<u>X</u>
		5c		
6a				37
		6a		_X_
b		۱.,		
7		6b		
7	·	7-		Х
a h	and the same of th	7a 7b		
С		10		
C		7c		х
d		70		
e		7e		Х
f		7f		X
g		7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
	sponsoring organization have excess business holdings at any time during the year? N/A	8		
9	Sponsoring organizations maintaining donor advised funds.			
а		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		4		
		_		
11				
		-		
D				
120	7	12a		
		120		
13				
		13a		
	•			
b	Enter the amount of reserves the organization is required to maintain by the states in which the			
С				
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
b	, p =	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			
		15		_X_
	If "Yes," see the instructions and file Form 4720, Schedule N.			77
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		X
	If "Yes," complete Form 4720, Schedule O.			
17				
	that would result in the imposition of an excise tax under section 4951, 4952 or 4953? N/A	17		
	If "Yes," complete Form 6069.		000	

332005 12-21-23

POPULATION CONNECTION Form 990 (2023) Part VI Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions. X Check if Schedule O contains a response or note to any line in this Part VI Section A. Governing Body and Management No Yes 13 **1a** Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O. 13 **b** Enter the number of voting members included on line 1a, above, who are independent Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other X officer, director, trustee, or key employee? 2 Did the organization delegate control over management duties customarily performed by or under the direct supervision 3 Х of officers, directors, trustees, or key employees to a management company or other person? 3 X Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 5 Did the organization become aware during the year of a significant diversion of the organization's assets? Did the organization have members or stockholders? 6 6 Х 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? Х 7a b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? X 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: Х a The governing body? 8a **b** Each committee with authority to act on behalf of the governing body? Х 8b Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes." provide the names and addresses on Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes Nο 10a Did the organization have local chapters, branches, or affiliates? 10a b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Х 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a b Describe on Schedule O the process, if any, used by the organization to review this Form 990. Х 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 12a Х b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes." describe Х 12c on Schedule O how this was done Did the organization have a written whistleblower policy? Х 13 13 Did the organization have a written document retention and destruction policy? 14 Х 14 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? Х The organization's CEO, Executive Director, or top management official 15a Х Other officers or key employees of the organization 15b If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions. 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a Х taxable entity during the year? 16a b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? 16h Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed SEE SCHEDULE O Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply X Own website Another's website X Upon request ___ Other (explain on Schedule O) Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year. State the name, address, and telephone number of the person who possesses the organization's books and records JOHN SEAGER - (202)332-2200

Form **990** (2023)

2120 L STREET, NW, SUITE 500, WASHINGTON,

20037

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

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See the instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.

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

- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. See the instructions for the order in which to list the persons above.

(A) Name and title	(B) Average hours per week	box	not cl	ss per	ition more rson is	than o	n an	(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC/ 1099-NEC)	organizations (W-2/1099-MISC/ 1099-NEC)	compensation from the organization and related organizations
(1) JOHN SEAGER PRESIDENT & CEO	32.75			Х				303,943.	0.	38,525.
(2) PAMELA WASSERMAN	37.50			Λ				303,943.	0.	30,323.
SR. VP FOR EDUCATION	0.00	1				X		241,184.	0.	34,549.
(3) BRIAN DIXON	27.38					22		241,104.		31,313.
SR. VP FOR MEDIA & GOV. REL.	10.12	1				x		245,275.	0.	22,346.
(4) MARIA OROZCO	35.84							213/2/31		22/3101
SR. VP OF ADMINISTRATION/CFO	1.66	1				x		240,793.	0.	23,804.
(5) SHAUNA SCHERER	34.40									
SR. VP FOR ADVANCEMENT	3.10	1				х		235,207.	0.	20,610.
(6) MARIAN STARKEY	35.78									•
VP FOR COMMUNICATIONS	1.72					Х		188,432.	0.	25,160.
(7) ESTELLE RABONI	2.00									
CHAIR	0.00	Х		Х				0.	0.	0.
(8) BRYCE HACH	2.00									
VICE CHAIR	0.00	Х		Х				0.	0.	0.
(9) BOB PETTAPIECE	2.00									
TREASURER	0.00	Х		Х				0.	0.	0.
(10) RODRIGO BARILLAS	2.00									
SECRETARY	0.00	Х		Х				0.	0.	0.
(11) KEVIN WHALEY	2.00]						_	_	_
BOARD MEMBER	0.00	Х						0.	0.	0.
(12) AMY DICKSON	2.00	ļ								
BOARD MEMBER	0.00	Х						0.	0.	0.
(13) MARK HATHAWAY	2.00	l								
BOARD MEMBER	0.00	Х						0.	0.	0.
(14) AARON ALLEN	2.00	ļ							•	•
BOARD MEMBER	1.00	Х						0.	0.	0.
(15) GLADYS KALEMA-ZIKUSOKA	2.00	٠,						_	^	_
BOARD MEMBER		Х	\vdash		_			0.	0.	0.
(16) SEEMA MOHAPATRA	2.00	. ,						_	<u> </u>	_
BOARD MEMBER	0.00	Х	\vdash		_			0.	0.	0.
(17) MELVINE OUYO BOARD MEMBER	0.00	₩						0.	0.	0.
DOWN WENDER	1 0.00	X			<u> </u>		<u> </u>	1 0.	U •	Form 990 (2022)

332007 12-21-23

Part VII Section A. Officers, Directors, Trus	tees, Key Emp	oloye	ees,	and	ΙΗiς	ghes	t Co	ompensated Employee	s (continued)	
(A)	(B)			(0	C)			(D)	(E)	(F)
Name and title	Average hours per week	box, offic	Position (do not check more than one box, unless person is both an officer and a director/trustee)		Reportable compensation from	Reportable compensation from related	Estimated amount of other			
	(list any hours for related organizations below line)	Individual trustee or director	In stit utional tru stee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC/ 1099-NEC)	organizations (W-2/1099-MISC/ 1099-NEC)	compensation from the organization and related organizations
(18) HEATHER SMITH	2.00									
BOARD MEMBER	0.00	Х						0.	0.	0.
(19) MARY BETH WEINBERGER BOARD MEMBER	2.00	Х						0.	0.	0.
								1 454 004		164 004
1b Subtotal								1,454,834.	0.	164,994.
c Total from continuation sheets to Part VI								1,454,834.	0.	164,994.
d Total (add lines 1b and 1c)										1 101,004.

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

Compensation from the organization

Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual

For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual

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

5 X

Section B. Independent Contractors

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

the organization. Hoport compensation for the delendar your original with or within		
(A)	(B)	(C)
Name and business address	Description of services	Compensation
RWT PRODUCTION LLC		
8932 ORANGE HUND LANE, ANNANDALE, VA 22003	PRINTING	986,295.
PEABODY PRESS		
601 NORTH POINT ROAD, BALTIMORE, MD 21237	PRINTING	388,948.
LAUTMAN MASKA NEILL & COMPANY, 1730 RHODE		
ISLAND AVE NW #301, WASHINGTON, DC 20036	CONSULTING	218,500.
EVERYACTION INC., 655 15TH ST. NW SUITE		
650, WASHINGTON, DC 20005	DATA BASE CRM	183,371.
ROSEDALE GREEN CONSULTING		
1323 INGRAHAM ST. NW, WASHINGTON, DC 20005	CONSULTING	151,208.
2 Total number of independent contractors (including but not limited to those listed	d above) who received more than	
\$100,000 of compensation from the organization 10		
		- 000 ()

Form 990 (2023) POPULATION CONNECTION
Part VIII Statement of Revenue

			Check if Schedule O contains	a response	or note to anv lin	e in this Part VIII			
						(A)	(B)	(C)	(D)
						Total revenue	Related or exempt	Unrelated	Revenue excluded from tax under
							function revenue	business revenue	sections 512 - 514
SS	1	_	Federated campaigns	1a					
Contributions, Gifts, Grants and Other Similar Amounts					618,447.				
S S			Membership dues Fundraising events		,				
fts,			Related organizations						
ية إق									
ons,			Government grants (contributions						
utic		T	All other contributions, gifts, grants, a		14,927,958.				
ĕ			similar amounts not included above .		84,714.				
ont		-	Noncash contributions included in lines 1a-1f		04,714.	15 546 405			
O g		n	Total. Add lines 1a-1f		D	15,546,405.			
					Business Code	0.204	0.204		
<u>c</u> e	2		COURSE TUITION		900099	2,304.	2,304.		
erv		b	HONORARIUM		900099	525.	525.		
ı S.		С							
ran 3ev		d							
Program Service Revenue		е							
Ē			All other program service revenue						
		g	Total. Add lines 2a-2f			2,829.			
	3		Investment income (including divident	dends, intere	st, and				
			other similar amounts)			631,253.			631,253.
	4		Income from investment of tax-ex-						
	5		Royalties			25,284.			25,284.
				(i) Real	(ii) Personal				
	6	а	Gross rents 6a						
			Less: rental expenses 6b						
		С	Rental income or (loss) 6c						
		d	Net rental income or (loss)						
	7	а	Gross amount from sales of (i) Securities	(ii) Other				
			assets other than inventory 7a 4	1,346,799.					
		b	Less: cost or other basis						
ē			and sales expenses 7b	1,264,325.	5,562.				
her Revenue		С	Gain or (loss) 7c	82,474.					
Je v			Net gain or (loss)			76,912.			76,912.
e			Gross income from fundraising events						·
g	Ū	_	including \$	_					
			contributions reported on line 1c).						
			Part IV, line 18	I					
		h	Less: direct expenses						
			Net income or (loss) from fundrais		l				
			Gross income from gaming activit						
	•	u	Part IV, line 19	I					
		h	Less: direct expenses						
			Net income or (loss) from gaming						
			Gross sales of inventory, less retu						
	10	а		I	5,259.				
		L	and allowances		,				
			Less: cost of goods sold		-	5,259.	5,259.		
-		C	Net income or (loss) from sales of	miveritory	Business Code	3,233.	3,233.		
sn	44	_			Business Code				
je on	11								
Miscellaneous Revenue		b							
sce Be		C	All all and an annual and an annual and an						
Ξ̈́			All other revenue						
			Total. Add lines 11a-11d			16 007 040	0.000		722 440
	12		Total revenue. See instructions			16,287,942.	8,088.	0.	733,449.

332009 12-21-23

Part IX | Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) Check if Schedule O contains a response or note to any line in this Part IX (**D**)
Fundraising (C) Management and general expenses (B) Do not include amounts reported on lines 6b. Program service expenses Total expenses expenses 7b, 8b, 9b, and 10b of Part VIII. Grants and other assistance to domestic organizations 3,497,287. 3,497,287. and domestic governments. See Part IV, line 21 Grants and other assistance to domestic individuals. See Part IV, line 22 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 189,368. 189,368. Benefits paid to or for members Compensation of current officers, directors, 297,947. 235,378. 17,877. 44,692. trustees, and key employees Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 3,848,991. 2,550,497. 531,085. 767,409. Other salaries and wages 7 Pension plan accruals and contributions (include 195,885. 130,057. 26,747. 39,081. section 401(k) and 403(b) employer contributions) 53,294. 397,619. 265,643. 78,682. Other employee benefits 9 293,377. 196,750. 38,919. 57,708. 10 Payroll taxes 11 Fees for services (nonemployees): Management 23,652. 15,664. 3,515. 4,473. Legal 192,426. 129,073. 26,419. 36,934. Accounting Lobbying 168,000. 168,000. Professional fundraising services. See Part IV, line 17 14,053. 14,053. Investment management fees Other. (If line 11g amount exceeds 10% of line 25, 823,925. 753,729. 66,615. 3,581. column (A), amount, list line 11g expenses on Sch O.) 2,268. 2,268. Advertising and promotion 12 130,951. 88,193.16,535. 26,223. 13 Office expenses 242,107. 166,709. 1,905. 73,493. Information technology 14 112,437. 112,437. Royalties 15 95,028. 61,166. 484,896. 328,702. 16 Occupancy 182,766. 165,971. 4,180. 12,615. 17 Travel Payments of travel or entertainment expenses 18 for any federal, state, or local public officials 63,532. 48,634. 5,088. 9,810. Conferences, conventions, and meetings 19 20 Payments to affiliates 21 103,641. 69,593. 14,308. 19,740. Depreciation, depletion, and amortization 22 62,421. 42,731. 7,963. 11,727. 23 Other expenses. Itemize expenses not covered 24 above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.) 1,101,987. 1,025,808. 496. 75,683. PRINTING AND PRODUCTION POSTAGE AND DELIVERY 563,081. 518,397. 274. 44,410. 134,596. 91,312. 20,851. 22,433. SUBSCRIPTIONS 77,407. 5,976. 3,420. SERVICE CHARGES 86,803. 33,628. 14.235. 2.873. 16,520. e All other expenses 13,247,644. 10,715,843. 917,583. 1,614,218. Total functional expenses. Add lines 1 through 24e 25 Joint costs. Complete this line only if the organization

332010 12-21-23

628,750. Form 990 (2023)

0.

1,418,582.

reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.

Check here X if following SOP 98-2 (ASC 958-720)

789,832

Form 990 (2023)

Part X | Balance Sheet

Pai	rt X	Balance Sheet					
		Check if Schedule O contains a response or no	te to any	line in this Part X			
					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing			1,418,618.	1	1,280,292.
	2	Savings and temporary cash investments			2,288,697.	2	6,272,678.
	3	Pledges and grants receivable, net			86,461.	3	1,341,485.
	4	Accounts receivable, net			489,735.	4	5,708.
	5	Loans and other receivables from any current of					
		trustee, key employee, creator or founder, subs	stantial co	ontributor, or 35%			
		controlled entity or family member of any of the	se perso	nsL		5	
	6	Loans and other receivables from other disqual	ified pers	ons (as defined			
		under section 4958(f)(1)), and persons describe	d in secti	on 4958(c)(3)(B)		6	
<u>s</u>	7	Notes and loans receivable, net				7	
Assets	8	Inventories for sale or use			4,480.	8	31,365. 396,389.
¥	9				313,928.	9	396,389.
	10a	Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D Less: accumulated depreciation	10a	1,044,795.			
	b	Less: accumulated depreciation	10b	732,226.	395,702. 17,735,527.	10c	312,569. 21,361,442.
	11	Investments - publicly traded securities			17,735,527.	11	21,361,442.
	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			4,317,107.		2,414,235.
	16	Total assets. Add lines 1 through 15 (must equ			27,050,255.	16	33,416,163.
	17	Accounts payable and accrued expenses			955,422.	17	890,544.
	18	Grants payable			195,000.	18	0.
	19	Deferred revenue				19	
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Complete				21	
es	22	Loans and other payables to any current or for					
Liabilities		trustee, key employee, creator or founder, subs					
ia p		controlled entity or family member of any of the				22	
_	23	Secured mortgages and notes payable to unrel				23	
	24	Unsecured notes and loans payable to unrelate				24	
	25	Other liabilities (including federal income tax, p.					
		parties, and other liabilities not included on line	•	·	3,718,450.	OE	4,086,494.
	26	of Schedule D Total liabilities. Add lines 17 through 25			4,868,872.	25 26	4,977,038.
	20	Organizations that follow FASB ASC 958, ch	ook horo	X	4,000,072.	20	4,511,030
S		and complete lines 27, 28, 32, and 33.	eck Heie	21			
ğ	27	• , , ,			22,175,383.	27	28,322,809.
3ala	28				6,000.	28	116,316.
Ā		Organizations that do not follow FASB ASC					
Ē		and complete lines 29 through 33.	300, one.				
٥	29	Capital stock or trust principal, or current funds	;			29	
ets	30	Paid-in or capital surplus, or land, building, or e				30	
Ass	31	Retained earnings, endowment, accumulated in				31	
Net Assets or Fund Balances	32				22,181,383.	32	28,439,125.
Z	33				27,050,255.	33	33,416,163.
					, , =	,	Form 990 (2023)

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		<u>,28</u>					
2	Total expenses (must equal Part IX, column (A), line 25)	2		,24					
3	Revenue less expenses. Subtract line 2 from line 1	3		,04					
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A)) Net unrealized gains (losses) on investments 5								
5									
6	Donated services and use of facilities	6							
7	Investment expenses	7							
8	Prior period adjustments	8							
9	Other changes in net assets or fund balances (explain on Schedule O)	9				0.			
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,								
	column (B))	10	28	,43	9,1	25.			
Pa	rt XIII Financial Statements and Reporting								
	Check if Schedule O contains a response or note to any line in this Part XII								
					Yes	No			
1	Accounting method used to prepare the Form 990: Cash X Accrual Other								
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule	Ο.							
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?			2a		X			
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a							
	separate basis, consolidated basis, or both:								
	Separate basis Consolidated basis Both consolidated and separate basis								
b	Were the organization's financial statements audited by an independent accountant?			2b	X				
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	basis,							
	consolidated basis, or both:								
	Separate basis X Consolidated basis Both consolidated and separate basis								
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	audit,							
	review, or compilation of its financial statements and selection of an independent accountant?			2c	X				
	If the organization changed either its oversight process or selection process during the tax year, explain on Scho	edule O.							
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the								
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?			3a		X			
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	ed audit							
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits			3b					
				Form	990	(2023)			

SCHEDULE A

(Form 990)

Total

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

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

Attach to Form 990 or Form 990-EZ.

Attach to Form 990 or Form 990-EZ.

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

2013

Open to Public Inspection

Employer identification number Name of the organization POPULATION CONNECTION 94-1703155 Part I Reason for Public Charity Status. (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). X An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or 10 An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) 11 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations Provide the following information about the supported organization(s). (iv) Is the organization listed (i) Name of supported (ii) EIN (iii) Type of organization (v) Amount of monetary (vi) Amount of other in your governing document? (described on lines 1-10 organization support (see instructions) support (see instructions) Yes above (see instructions))

Schedule A (Form 990) 2023 POPULATION CONNECTION 94-1703

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	tion
fails to qualify under the tests listed below, please complete Part III.)	

Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	10378424.	8027329.	13258258.	10875020.	<u> 15546405.</u>	58085436.
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge	10050404	0000000	1205050	10075000	15546405	E000E436
	Total. Add lines 1 through 3	10378424.	8027329.	13258258.	10875020.	15546405.	58085436.
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						I
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
_	column (f)						E000E426
	Public support. Subtract line 5 from line 4.						58085436.
		(-) 0040	(1-) 0000	(-) 0004	(4) 0000	(-) 0000	(6) T-1-1
	ndar year (or fiscal year beginning in)	(a) 2019 10378424.	(b) 2020 8027329	(c) 2021	(d) 2022 10875020.	(e) 2023	(f) Total
	Amounts from line 4	103/0424.	002/329.	13230230.	100/3020.	13340403.	50005450.
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,	465,895.	499,812.	180 038	399,806.	656 537	2511988.
9	and income from similar sources Net income from unrelated business	±03,033.	4JJ,012.	400,000	333,000.	030,337.	2311700.
9							
	activities, whether or not the business is regularly carried on						
10	Other income. Do not include gain						
10	or loss from the sale of capital						
	assets (Explain in Part VI.)	14.	46,300.				46,314.
11	Total support. Add lines 7 through 10		20,0001				60643738.
	Gross receipts from related activities,	etc. (see instruction	ins)			12	68,863.
	First 5 years. If the Form 990 is for the	•	,				
	organization, check this box and sto						
Sec	ction C. Computation of Publ						
14	Public support percentage for 2023 (line 6, column (f), d	ivided by line 11, o	column (f))		14	95.78 %
	Public support percentage from 2022					15	95.32 %
	33 1/3% support test - 2023. If the					ore, check this bo	
	stop here. The organization qualifies	as a publicly suppo	orted organization				X
b	33 1/3% support test - 2022. If the	organization did no	t check a box on l	ine 13 or 16a, and	line 15 is 33 1/3%	or more, check th	nis box
	and stop here. The organization qua						
17a	10% -facts-and-circumstances test						
	and if the organization meets the fact	s-and-circumstance	es test, check this	box and stop he	re. Explain in Part	VI how the organiz	zation
	meets the facts-and-circumstances to	est. The organizatio	n qualifies as a pu	blicly supported o	rganization		
b	10% -facts-and-circumstances test	t - 2022. If the org	anization did not d	check a box on line	e 13, 16a, 16b, or 1	7a, and line 15 is	10% or
	more, and if the organization meets the	he facts-and-circum	stances test, che	ck this box and st	top here. Explain i	n Part VI how the	_
	organization meets the facts-and-circ	umstances test. Th	e organization qua	alifies as a publicly	supported organiz	zation	
18	Private foundation. If the organization	on did not check a l	oox on line 13, 16	a, 16b, 17a, or 17b	o, check this box a	nd see instructions	s
						Schedule A	(Form 990) 2023

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

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

Se	ction A. Public Support	elow, please comp	Diete Fait II.)				
Cale	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	(1)	(12)	(2) = = 1	(-7	(5) = 5 = 5	χ,
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the 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						
78	Amounts included on lines 1, 2, and 3 received from disqualified persons						
ŀ	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
(Add lines 7a and 7b						
	Public support. (Subtract line 7c from line 6.)						
Cale	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
	Amounts from line 6	(-, : -	(-,	(-)	(-,	(-,	(-,
	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
k	Unrelated business taxable income (less section 511 taxes) from businesses						
	acquired after June 30, 1975					+	
	Add lines 10a and 10b Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on						
	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
	Total support. (Add lines 9, 10c, 11, and 12.)		<u> </u>		1	1	<u> </u>
14	First 5 years. If the Form 990 is for the	· ·		•	•	. , . ,	· —
<u> </u>	check this box and stop here	a Cummant Da					
	ction C. Computation of Publi					T .= T	
	Public support percentage for 2023 (I	, ,,,	•	column (f))		15	<u>%</u>
	Public support percentage from 2022 ction D. Computation of Inves					16	%
	•			ing 10 galuma (f)		17	0/
	Investment income percentage for 20					17	%
	Investment income percentage from						7 is not
198	a 33 1/3% support tests - 2023. If the					- 4.5	
k	more than 33 1/3%, check this box as 33 1/3% support tests - 2022. If the	organization did r	not check a box or	n line 14 or line 19a	a, and line 16 is m	ore than 33 1/3%, a	nd
	line 18 is not more than 33 1/3%, che	ck this box and st	top here. The orga	anization qualifies	as a publicly supp	orted organization	
20	Private foundation. If the organization	n did not check a	hox on line 14 19	a or 19h check th	nis hox and see in	structions	1 7

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Schedule A (Form 990) 2023

Part IV | Supporting Organizations

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

Section A. All Supporting Organizations

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

		Yes	No
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Par	rt IV Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and			
	11c below, the governing body of a supported organization?	11a		
b	A family member of a person described on line 11a above?	11b		
С	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide			
	detail in Part VI.	11c		
Sect	tion B. Type I Supporting Organizations			
			Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of o	ne or		
	more supported organizations have the power to regularly appoint or elect at least a majority of the organization's of	ficers,		
	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 supp organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among			
	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
	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		
Sect	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		
Sect	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		
	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		
	By reason of the relationship described on line 2, above, did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	· · · · · · · · · · · · · · · · · · ·	3		
Sect	supported organizations played in this regard. tion E. Type III Functionally Integrated Supporting Organizations	•		
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see inst	ructions).		
а	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
С	The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity.	itv (see instruction	s).	
2	Activities Test. Answer lines 2a and 2b below.	, (Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a		
	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		
	Parent of Supported Organizations. Answer lines 3a and 3b below.			
	trustees of each of the supported organizations? If "Yes" or "No" provide details in Part VI.	3a		
	of its supported organizations? If "Yes " describe in Part VI the role played by the organization in this regard	3b		

Part V	Гуре III Non-Functionally Integrated 509(a)(3) Support	ing Organi	zations	
1 C	heck here if the organization satisfied the Integral Part Test as a qualify	ing trust on N	ov. 20, 1970 (<i>explain in</i>	Part VI). See instructions.
	ll other Type III non-functionally integrated supporting organizations mu		·	_
Section A - A	djusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 Net sho	rt-term capital gain	1		
2 Recover	ries of prior-year distributions	2		
3 Other gr	ross income (see instructions)	3		
4 Add line	es 1 through 3.	4		
5 Depreci	ation and depletion	5		
6 Portion	of operating expenses paid or incurred for production or			
collection	on of gross income or for management, conservation, or			
mainten	nance of property held for production of income (see instructions)	6		
7 Other ex	xpenses (see instructions)	7		
8 Adjuste	ed Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Section B - M	linimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1 Aggrega	ate fair market value of all non-exempt-use assets (see			
instructi	ions for short tax year or assets held for part of year):			
a Average	e monthly value of securities	1a		
b Average	e monthly cash balances	1b		
c Fair mar	rket value of other non-exempt-use assets	1c		
d Total (a	dd lines 1a, 1b, and 1c)	1d		
e Discou	nt claimed for blockage or other factors			
(explain	in detail in Part VI):			
2 Acquisit	tion indebtedness applicable to non-exempt-use assets	2		
3 Subtrac	t line 2 from line 1d.	3		
4 Cash de	eemed held for exempt use. Enter 0.015 of line 3 (for greater amount,			
see inst	ructions).	4		
5 Net valu	ue of non-exempt-use assets (subtract line 4 from line 3)	5		
6 Multiply	line 5 by 0.035.	6		
7 Recover	ries of prior-year distributions	7		
8 Minimu	m Asset Amount (add line 7 to line 6)	8		
Section C - D	Distributable Amount			Current Year
1 Adjuste	d net income for prior year (from Section A, line 8, column A)	1		
2 Enter 0.	85 of line 1.	2		
3 Minimur	m asset amount for prior year (from Section B, line 8, column A)	3		
4 Enter gr	reater of line 2 or line 3.	4		
5 Income	tax imposed in prior year	5		
6 Distribu	utable Amount. Subtract line 5 from line 4, unless subject to			
	ncy temporary reduction (see instructions).	6		
$\overline{}$	heck here if the current year is the organization's first as a non-function	nally integrated	d Type III supporting orga	anization (see

Schedule A (Form 990) 2023

instructions).

Par	t V Type III Non-Functionally Integrated 509((a)(3) Supporting Orga	nizations (continu	ıed)	
Secti	on D - Distributions				Current Year
1	Amounts paid to supported organizations to accomplish exer	mpt purposes		1	
2	Amounts paid to perform activity that directly furthers exemp				
	organizations, in excess of income from activity		2		
3	Administrative expenses paid to accomplish exempt purpose	es of supported organizations	S	3	
4	Amounts paid to acquire exempt-use assets	-		4	
5	Qualified set-aside amounts (prior IRS approval required - pro	ovide details in Part VI)		5	
6	Other distributions (describe in Part VI). See instructions.			6	
7	Total annual distributions. Add lines 1 through 6.			7	
8	Distributions to attentive supported organizations to which the	ne organization is responsive			
	(provide details in Part VI). See instructions.			8	
9	Distributable amount for 2023 from Section C, line 6			9	
10	Line 8 amount divided by line 9 amount			10	
Secti	on E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistribution Pre-2023	าร	(iii) Distributable Amount for 2023
1	Distributable amount for 2023 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2023 (reason-				
	able cause required - explain in Part VI). See instructions.				
3	Excess distributions carryover, if any, to 2023				
а	From 2018				
b	From 2019				
с	From 2020				
d	From 2021				
е	From 2022				
f	Total of lines 3a through 3e				
g	Applied to underdistributions of prior years				
h	Applied to 2023 distributable amount				
i_	Carryover from 2018 not applied (see instructions)				
j_	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2023 from Section D,				
	line 7: \$				
<u>a</u>	Applied to underdistributions of prior years				
b	Applied to 2023 distributable amount				
с	Remainder. Subtract lines 4a and 4b from line 4.				
5	Remaining underdistributions for years prior to 2023, 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 2023. Subtract lines 3h				
	and 4b from line 1. For result greater than zero, explain in				
	Part VI. See instructions.				
7	Excess distributions carryover to 2024. Add lines 3j				
	and 4c.				
8	Breakdown of line 7:				
	Excess from 2019				
	Excess from 2020				
	Excess from 2021				
	Excess from 2022				
е	Excess from 2023				

Schedule A (Form 990) 2023

Schedule B

(Form 990)

Department of the Treasury Internal Revenue Service

Schedule of Contributors

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

OMB No. 1545-0047

2023

Name of the organization Employer identification number

POPULATION CONNECTION 94-1703155

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

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

Schedule B (Form 990) (2023)

Schedule B (Form 990) (2023)

Name of organization

Employer identification number

POPULATION CONNECTION

94-1703155

Part I	Contributors (see instructions). Use duplicate copies of Part I if ac	dditional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		\$\$.	Person X Payroll
(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
			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
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

Page 3

Name of organization Employer identification number

POPULATION CONNECTION

94-1703155

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

Page 4

Name of organization **Employer identification number** POPULATION CONNECTION 94-1703155 Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info. once.) Use duplicate copies of Part III if additional space is needed. (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

SCHEDULE C

Department of the Treasury

Internal Revenue Service

(Form 990)

Political Campaign and Lobbying Activities

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.

OMB No. 1545-0047

Open to Public Inspection

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

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

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

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

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

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

	Section 501(c)(4), (5), or (6) o	rganizat	ions: Complete Part III.				
Nam	ne of organization					Emple	oyer identification number
_	POP	ULAT	ION CONNECTION	504()		_	94-1703155
Pa	rt I-A Complete if t	ne org	anization is exempt unde	er section 501(c) o	or is a section 52	orç	ganization.
2	Political campaign activity e	xpendit	ation's direct and indirect politica ures gn activities				
Pa	rt I-B Complete if t	ne org	anization is exempt unde	er section 501(c)(3	3).		
1	Enter the amount of any exc	ise tax	incurred by the organization unde	er section 4955		\$	
			incurred by organization manage				
			n 4955 tax, did it file Form 4720 f				
4a	Was a correction made?						Yes No
	If "Yes," describe in Part IV.						
Pa	rt I-C Complete if t	ne org	anization is exempt unde	er section 501(c),	except section 5	01(c)	(3).
1	Enter the amount directly ex	pended	by the filing organization for sec	tion 527 exempt functi	ion activities	\$	
2		0 0	ization's funds contributed to oth	· ·			
						\$	
3			. Add lines 1 and 2. Enter here ar	<i>'</i>			
			1120-POL for this year?				
5			nployer identification number (EIN				
	• •	-	tion listed, enter the amount paid comptly and directly delivered to a				· · · · · · · · · · · · · · · · · · ·
		•	additional space is needed, provi		·	parace	o bogi ogatou fama of a
	(a) Name	•	(b) Address	(c) EIN	(d) Amount paid t	from	(e) Amount of political
	(a) Name		(b) Address	(0) = 111	filing organization		contributions received and
					funds. If none, ente	er -0	promptly and directly
							delivered to a separate political organization.
							If none, enter -0

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

Schedule C (Form 990) 2023

Part II-A Complete if the org	anization is exem		501(c)(3) and file		ction under			
section 501(h)).		•	(), /	•				
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 shar	e of excess lobbying e	xpenditures).						
B Check if the filing organiza	tion checked box A an	d "limited control" pro	visions apply.					
	Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)							
1a Total lobbying expenditures to influ	uence public opinion (g	rassroots lobbying)		0.				
b Total lobbying expenditures to influ	uence a legislative bod	v (direct lobbving)		16,221.				
c Total lobbying expenditures (add li				16,221.				
d Other exempt purpose expenditure				13,217,370.				
e Total exempt purpose expenditure				13,233,591.				
f Lobbying nontaxable amount. Ente	er the amount from the			811,680.				
If the amount on line 1e, column (a) o	r (b) is; The lobi	oying nontaxable amo	ount is:					
not over \$500,000,	. ,	he amount on line 1e.						
over \$500,000 but not over \$1,000	,000, \$100,00	0 plus 15% of the exce	ess over \$500,000.					
over \$1,000,000 but not over \$1,50	00,000, \$175,00	0 plus 10% of the exce	ess over \$1,000,000.					
over \$1,500,000 but not over \$17,0	000,000, \$225,00	0 plus 5% of the exces	ss over \$1,500,000.					
over \$17,000,000,	\$1,000,0	000.						
g Grassroots nontaxable amount (en	ter 25% of line 1f)			202,920.				
h Subtract line 1g from line 1a. If zero or less, enter -0-				0.				
i Subtract line 1f from line 1c. If zero or less, enter -0-				0.				
j If there is an amount other than zer	ro on either line 1h or li	ne 1i, did the organiza	tion file Form 4720					
reporting section 4911 tax for this	year?				Yes No			
(Some organizations th	nat made a section 50	raging Period Under 01(h) election do not h te instructions for lin	nave to complete all o	of the five columns be	low.			
	Lobbying Expen	ditures During 4-Yea	r Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) Total			
2a Lobbying nontaxable amount	623,706.	602,149.	786,090.	811,680.	2,823,625.			
b Lobbying ceiling amount (150% of line 2a, column(e))					4,235,438.			
c Total lobbying expenditures		19,284.		16,221.	35,505.			
d Grassroots nontaxable amount	155,927.	150,537.	196,523.	202,920.	705,907.			
e Grassroots ceiling amount (150% of line 2d, column (e))					1,058,861.			
f Grassroots lobbying expenditures								

Schedule C (Form 990) 2023

Schedule C (Form 990) 2023 POPULATION CONNECTION 94-17031 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 A	ach "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description	(a)		(b)	
	e lobbying activity.	Yes	No	Amo	ount
a b c d e f g h i	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? Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? Media advertisements? Mailings to members, legislators, or the public? Publications, or published or broadcast statements? Grants to other organizations for lobbying purposes? Direct contact with legislators, their staffs, government officials, or a legislative body? Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? Other activities? Total. Add lines 1c through 1i	Yes	No	Amo	unt
2a b c d	Did the activities in line 1 cause the organization to not be described in section 501(c)(3)? If "Yes," enter the amount of any tax incurred under section 4912 If "Yes," enter the amount of any tax incurred by organization managers under section 4912 If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? **III-A** Complete if the organization is exempt under section 501(c)(4), section 501(c)(6).	n 501(c)(5)	, or sec	etion	
1 2 3 Par	Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the till-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."	e prior year? n 501(c)(5)	2 3 , or sec		No 3, is
5 Par	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exc does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and perspenditures next year? Taxable amount of lobbying and political expenditures. See instructions Topplemental Information	ess olitical	2a 2b 2c 3		
	de the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group actions); and Part II-B, line 1. Also, complete this part for any additional information.	noty, Falt II-A	, illies I d	11U Z (588	

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

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

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

OMB No. 1545-0047 Inspection

Name of the organization

POPULATION CONNECTION

Employer identification number 94-1703155

Pai			or Accounts. Complete if the
	organization answered "Yes" on Form 990, Part IV, lir	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at and of year	(a) Bonor advised fands	(b) i dilas ana otner accounts
2	Total number at end of year		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in	writing that the assets held in donor advis	sed funds
Ū	are the organization's property, subject to the organization's	-	
6	Did the organization inform all grantees, donors, and donor a		
•	for charitable purposes and not for the benefit of the donor of		
Pai			
1	Purpose(s) of conservation easements held by the organizati		
	Preservation of land for public use (for example, recrea		f a historically important land area
	Protection of natural habitat	Preservation o	f a certified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a quali	fied 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
b	Total acreage restricted by conservation easements		2b
С	Number of conservation easements on a certified historic str	ucture included on line 2a	2c
d	Number of conservation easements included on line 2c acqu	ired after July 25, 2006, and not	
	on a historic structure listed in the National Register		
3	Number of conservation easements modified, transferred, re-	leased, extinguished, or terminated by the	e organization during the tax
	year		
4	Number of states where property subject to conservation eas		
5	Does the organization have a written policy regarding the per		
	violations, and enforcement of the conservation easements in		
6	Staff and volunteer hours devoted to monitoring, inspecting,	handling of violations, and enforcing con	servation easements during the year
7	Amount of expanses incurred in manitaring inspecting base	dling of violations, and enforcing concerns	ation accoments during the year
′	Amount of expenses incurred in monitoring, inspecting, hand	alling of violations, and emorcing conserva	dion easements during the year
8	Does each conservation easement reported on line 2d above	e satisfy the requirements of section 170/b	a)(4)(R)(i)
Ū		sounds, the requirements of section in ele	
9	In Part XIII, describe how the organization reports conservati		
	balance sheet, and include, if applicable, the text of the footr	•	
	organization's accounting for conservation easements.	3	
Par	t III Organizations Maintaining Collections of	f Art, Historical Treasures, or O	ther Similar Assets.
	Complete if the organization answered "Yes" on Form	n 990, Part IV, line 8.	
1a	If the organization elected, as permitted under FASB ASC 95	58, not to report in its revenue statement	and balance sheet works
	of art, historical treasures, or other similar assets held for pul	blic exhibition, education, or research in f	urtherance of public
	service, provide in Part XIII the text of the footnote to its final	ncial statements that describes these iten	ns.
b	If the organization elected, as permitted under FASB ASC 95	58, to report in its revenue statement and	balance sheet works of
	art, historical treasures, or other similar assets held for public	exhibition, education, or research in furt	herance of public service,
	provide the following amounts relating to these items.		
	(i) Revenue included on Form 990, Part VIII, line 1		
	(ii) Assets included in Form 990, Part X		\$
2	If the organization received or held works of art, historical tre	asures, or other similar assets for financia	al gain, provide
	the following amounts required to be reported under FASB A	ASC 958 relating to these items:	
а	Revenue included on Form 990, Part VIII, line 1		\$
	Assets included in Form 990, Part X		\$
LHA	For Paperwork Reduction Act Notice, see the Instructions	s for Form 990.	Schedule D (Form 990) 2023

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

Pai	t III Organizations Maintaining C	ollections of Art	, Historical Tre	easures, or	Other	Similar	Assets	(contin	ued)	
3	Using the organization's acquisition, accession	on, and other records	s, check any of the	following that	make sig	nificant u	se of its		-	
	collection items (check all that apply).									
а	Public exhibition	d	Loan or exc	hange progra	ım					
b	Scholarly research	е	Other							
С	Preservation for future generations									
4	Provide a description of the organization's co	ollections and explain	how they further th	ne organizatio	n's exem	pt purpos	e in Part	XIII.		
5	During the year, did the organization solicit o	r receive donations o	f art, historical trea	sures, or othe	r similar a	assets				
	to be sold to raise funds rather than to be ma							Yes		No
Pai	t IV Escrow and Custodial Arrang	gements Complet	e if the organization	n answered "\	es" on F	orm 990,	Part IV, liı	ne 9, or		
	reported an amount on Form 990, Par	t X, line 21.								
1a	Is the organization an agent, trustee, custodi	an, or other intermed	iary for contributior	ns or other as:	sets not i	ncluded				_
	on Form 990, Part X?						\square	Yes		No
b	If "Yes," explain the arrangement in Part XIII									
								Amount	t	
С	Beginning balance					1c				
d	Additions during the year					1d				
е	Distributions during the year					1e				
f	Ending balance					1f				.—
2 a	Did the organization include an amount on Fe	orm 990, Part X, line	21, for escrow or co	ustodial accou	unt liabilit	y?	L	Yes		No
	If "Yes," explain the arrangement in Part XIII.							<u></u>		
Pai	t V Endowment Funds Complete if									
		(a) Current year	(b) Prior year	(c) Two year		d) Three ye		(e) Four		
1a	Beginning of year balance	1,000.	1,000.	1	,000.		1,000.		1,	000.
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	1,000.	1,000.	1	,000.		1,000.		1,	000.
2	Provide the estimated percentage of the curr	ent year end balance	(line 1g, column (a)) held as:						
а	Board designated or quasi-endowment		_%							
b	Permanent endowment100	%								
С	Term endowment	%								
	The percentages on lines 2a, 2b, and 2c sho	uld equal 100%.								
За	Are there endowment funds not in the posse	ssion of the organiza	tion that are held a	nd administer	ed for the	•		r		
	organization by:								Yes	No
	(i) Unrelated organizations?							3a(i)		<u>X</u>
								3a(ii)		<u>X</u>
b	If "Yes" on line 3a(ii), are the related organiza	tions listed as require	ed on Schedule R?					3b		
4	Describe in Part XIII the intended uses of the		vment funds.							
Pai	t VI Land, Buildings, and Equipm									
	Complete if the organization answered	d "Yes" on Form 990	, Part IV, line 11a. S	See Form 990	, Part X, I	ine 10.				
	Description of property	(a) Cost or ot	` ,	or other	` '	cumulate	d	(d) Book	k value)
		basis (investm	nent) basis	(other)	dep	reciation	\perp			
	Land									
b	Buildings			2 2 2 2						
С	Leasehold improvements			9,863.		38,80			1,06	
	Equipment			6,071.	1	64,37			1,69	
	Other		•	8,861.		29,04	.7.		9,81	
Total	I. Add lines 1a through 1e. (Column (d) must e	qual Form 990 Part)	(line 10c column	(R))				312	2,56	9.

Schedule D (Form 990) 2023

Schedule D (Form 990) 2023 POPULATION (CONNECTION	94	-1703155 Page
Part VII Investments - Other Securities			
Complete if the organization answered "Yes" of a) Description of security or category (including name of security)	on Form 990, Part IV, line (b) Book value	(c) Method of valuation: Cost or end	d of year market value
	(b) Book value	(c) Wethod of Valuation. Cost of end	1-01-year market value
1) Financial derivatives			
Closely held equity interests Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
Fotal. (Col. (b) must equal Form 990, Part X, line 12, col. (B))			
Part VIII Investments - Program Related.			
Complete if the organization answered "Yes" of			
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end	d-of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Col. (b) must equal Form 990, Part X, line 13, col. (B)) Part IX Other Assets			
Complete if the organization answered "Yes" of	on Form 990 Part IV line	11d See Form 990 Part X line 15	
	Description	Tru. dec Form 350, Fart X, line 15.	(b) Book value
(1) DEPOSITS	Scoonption		33,720
(2) DUE FROM RELATED PARTY			577,519
(3) RIGHT OF USE ASSET			1,802,996
(4)			2,002,330
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, line 15, col. Part X Other Liabilities	(B))		2,414,235
Complete if the organization answered "Yes" of	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) GIFT ANNUITY LIABILITY			936,106
` /			0 5 0 6 4 0
(3) DUE TO RELATED PARTY			958,649
(3) DUE TO RELATED PARTY (4) OPERATING LEASE LIABILITY			958,649 2,191,739

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

4,086,494.

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

Schedule D (Form 990) 2023

(7) (8) (9)

Pa	rt XI Reconciliation of Revenue per Audited Financial State		Revenue per Re	turn	
_	Complete if the organization answered "Yes" on Form 990, Part IV, line				19,674,956.
1				1	19,074,930.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	ا ء ا	3 217 ///		
a			3,217,444. 183,623.	-	
b			105,025.		
C C	Recoveries of prior year grants Other (Describe in Part XIII.)			-	
d				2e	3 401 067
е 3	•			3	3,401,067. 16,273,889.
4	Subtract line 2e from line 1 Amounts included on Form 990. Part VIII. line 12. but not on line 1:			3	10,275,005.
4 a		4a	14,053.		
a b			11,033.	-	
C				4c	14 053.
					14,053. 16,287,942.
Pa	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	ements Wit	n Expenses per F	Retur	n
	Complete if the organization answered "Yes" on Form 990, Part IV, line				
1	Total expenses and losses per audited financial statements			1	13,417,214.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			•	23/12//2210
a		2a	183,623.		
b			100,0101		
c					
d					
e				2e	183,623.
3	Subtract line 2e from line 1			3	183,623. 13,233,591.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
a		4a	14,053.		
b					
	Add lines 4a and 4b	·		4c	14,053.
	Total expenses. Add lines 3 and 4c. (This must equal Form 990. Part I. line 18.)			5	14,053.
	rt XIII Supplemental Information				
Prov	ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; F	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 infor	mation.		
PAI	RT V, LINE 4:				
PEI	RMANENTLY RESTRICTED NET ASSETS REPRESENT	THE LE	S CORSA FUN	D E	STABLISHED
	4000				
<u>IN</u>	1988. THE INCOME EARNED ON THE INVESTMEN	IT OF TH	E ORIGINAL	CON	TRIBUTIONS
<u>IS</u>	TO BE USED TO PROVIDE AN ANNUAL AWARD FO	R THE P	OPULATION C	ONN	ECTION
MEI	MBER WHO HAS MADE OUTSTANDING CONTRIBUTION	ONS IN T	HE LIETD OF	РО	PULATION
POI	LICY AND FAMILY PLANNING.				

SCHEDULE F (Form 990)

Statement of Activities Outside the United States

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

Open to Public

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

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

Inspection

Name of the organization **Employer identification number** POPULATION CONNECTION 94-1703155 General Information on Activities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 14b. 1 For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, X Yes the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States. 3 Activities per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.) (e) If activity listed in (d) (b) Number of (c) Number of (d) Activities conducted in the region (f) Total (a) Region employees, agents, and expenditures offices (by type) (such as, fundraising, prois a program service, for and in the region gram services, investments, grants to describe specific type independent investments contractors recipients located in the region) of service(s) in the region in the region in the region GRANTS TO RECIPIENTS SUB-SAHARAN AFRICA 0 LOCATED IN REGION 154,368. GRANTS TO RECIPIENTS SOUTH ASIA 0 0 LOCATED IN REGION 35,000. 0 0 189,368. 3 a Subtotal **b** Total from continuation 0 sheets to Part I c Totals (add lines 3a 189,368. and 3b)

LHA 332071 11-29-23

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

Schedule F (Form 990) 2023

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)
		SUB-SAHARAN						
		AFRICA	PROGRAM SUPPORT	52,068.	WIRE	0.		
		SUB-SAHARAN						
			PROGRAM SUPPORT	32,300.	WIRE	0.		
		III RI CZI	I ROOMIN BUITORI	32,300.	WIKE	0.		
		SUB-SAHARAN						
		AFRICA	PROGRAM SUPPORT	30,000.	WIRE	0.		
		SUB-SAHARAN AFRICA	PROGRAM SUPPORT	20,000.	WIDE	0.		
		AFRICA	FROGRAM SUFFORT	20,000.	WIKE	0.		
		SUB-SAHARAN						
		AFRICA	PROGRAM SUPPORT	10,000.	WIRE	0.		
		SUB-SAHARAN AFRICA	PROGRAM SUPPORT	10 000	MIDE	0.		
		AFRICA	PROGRAM SUPPORT	10,000.	WIKE	0.		
		SOUTH ASIA	PROGRAM SUPPORT	35,000.	WIRE	0.		
2 Enter total number of			cecognized as charities by the f	<u> </u>	<u> </u>			

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

7

3 Enter total number of other organizations or entities

			tes. Complete i	f the organization answered "Yes"	on Form 990, Part	IV, line 16.	
Type of grant or assistance	(b) Region		(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 can be duplicated if a	Part III can be duplicated if additional space is neede	Part III can be duplicated if additional space is needed.	Part III can be duplicated if additional space is needed.	Part III can be duplicated if additional space is needed.	Part III can be duplicated if additional space is needed. Type of grant or assistance (b) Region (c) Number of recipients cash grant (d) Amount of cash disbursement (f) Amount of noncash	Type of grant or assistance (b) Region (c) Number of recipients cash grant (d) Amount of cash disbursement (f) Amount of noncash assistance

Page 4

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

Schedule F (Form 990) 2023

Schedule F (Form 990) 2023

SCHEDULE G (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" on Form 990, Part IV, line 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2023

Open to Public Inspection

Name of the organization						1	ntification number
	ION CONNECTION					94-1703	
Fundraising Activities. required to complete this par	 Complete if the organization answer t. 	ered "Y	es" or	n Form 990, Part IV, I	ine 1	7. Form 990-EZ	filers are not
 1 Indicate whether the organization rais a X Mail solicitations b X Internet and email solicitations c Phone solicitations d In-person solicitations 2 a Did the organization have a written of key employees listed in Form 990, P b If "Yes," list the 10 highest paid individed compensated at least \$5,000 by the 	e Solicita f Solicita g Special or oral agreement with any individual art VII) or entity in connection with p	tion of tion of fundra (includ	non-g gover aising ling of onal fu	overnment grants nment grants events ficers, directors, trus undraising services?		X Yes	
or entity (fundraiser)		(iii) Did fundraiser have custody or control of contributions?		er (iv) Gross receipts t		Amount paid or retained by) fundraiser ted in col. (i)	(vi) Amount paid to (or retained by) organization
LAUTMAN MASKA NEILL & COMPANY	STRATEGIC CONSULT.,	Yes	No				
- 1730 RHODE ISLAND AVE, NW	SEGMENTATION, CREATIVE		Х	1,147,530.		168,000.	979,530.
				1,147,530.	:4 :-	168,000.	979,530.
3 List all states in which the organization or licensing.	n is registered or licensed to solicit (contribi	utions	or has been notified	It IS	exempt from re	gistration
AL, AR, CA, CO, CT, DC, FL,	GA, HI, IL, KS, KY, MA, I	MD,M	Œ,M	II,MN,MS,NC	, NI	NH,NJ,	NV,NY,NM
OH, OK, OR, PA, RI, SC, TN,						, , ,	

LHA 332081 09-13-23

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

SEE PART IV FOR CONTINUATIONS

Schedule G (Form 990) 2023

Pa	ırt II					
		of fundraising event contributions and gro				s greater than \$5,000.
			(a) Event #1	(b) Event #2	(c) Other events	(d) Total events (add col. (a) through
4)			(event type)	(event type)	(total number)	col. (c))
Revenue						
Reve	1	Gross receipts				
		Less: Contributions				
	3	Gross income (line 1 minus line 2)				
	4	Cash prizes				
"	5	Noncash prizes				
)ense	6	Rent/facility costs				
Direct Expenses	7	Food and beverages				
	8	Entertainment				
		Other direct expenses				
		Direct expense summary. Add lines 4 through				
Da	11 rt	Net income summary. Subtract line 10 from line II Gaming. Complete if the organization a		. 000 Dest IV line 10 and		
Г	11 (11	\$15,000 on Form 990-EZ, line 6a.	answered "Yes" on Form	1990, Part IV, line 19, or r	eported more than	
		\$10,000 0111 01111 330 EZ, IIIIC 0a.		(b) Pull tabs/instant		(d) Total gaming (add
Revenue			(a) Bingo	bingo/progressive bingo	(c) Other gaming	col. (a) through col. (c))
<u> </u>	1	Gross revenue				
Se	2	Cash prizes				
Direct Expenses	3	Noncash prizes				
Direct E	4	Rent/facility costs				
	5	Other direct expenses				
		Volunteer labor	Yes % No	Yes % No	Yes % No	
	7	Direct expense summary. Add lines 2 through	5 in column (d)			
	8	Net gaming income summary. Subtract line 7	from line 1, column (d)			
9		er the state(s) in which the organization condu	_			
		he organization licensed to conduct gaming ac				Yes No
b	If "N	No," explain:				
		re any of the organization's gaming licenses re			ear?	Yes No
3320	32 09-	-13-23			Sche	dule G (Form 990) 2023

Sch	ledule G (Form 990) 2023 POPULATION CONNECTION 94-	-1703155	Page 3
11	Does the organization conduct gaming activities with nonmembers?	. Yes	☐ No
12	Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed		
	to administer charitable gaming?	Yes	☐ No
13	Indicate the percentage of gaming activity conducted in:		
á	The organization's facility	13a	%
	An outside facility		%
	Enter the name and address of the person who prepares the organization's gaming/special events books and records:		
	Name		
	Address		
15a	a Does the organization have a contract with a third party from whom the organization receives gaming revenue?	Yes	No
	book and digametation have a domated want a time party from whom the digametation received garning revolute.		
ŀ	If "Yes," enter the amount of gaming revenue received by the organization \$ and the amount		
•	of gaming revenue retained by the third party \$		
,	If "Yes," enter name and address of the third party:		
(: in Yes, entername and address of the third party.		
	None		
	Name		
	Address		
16	Gaming manager information:		
	Name		
	Gaming manager compensation \$		
	Description of services provided		
	Director/officer Employee Independent contractor		
17	Mandatory distributions:		
á	a Is the organization required under state law to make charitable distributions from the gaming proceeds to		
	retain the state gaming license?	L Yes	L No
k	Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the		
_	organization's own exempt activities during the tax year \$		
Pa	Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and F	'art III, lines 9,	9b, 10b,
	15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.		
SC	HEDULE G, PART I, LINE 2B, LIST OF TEN HIGHEST PAID FUNDRAISEF	≀S:	
(I) NAME OF FUNDRAISER: LAUTMAN MASKA NEILL & COMPANY		
(I) ADDRESS OF FUNDRAISER:		
17	30 RHODE ISLAND AVE, NW STE 301, WASHINGTON, DC 20036		
	, ······		
(I	I) ACTIVITY: STRATEGIC CONSULT., SEGMENTATION, CREATIVE SVCS.	& REPOR	TING
<u>. </u>			
_			

Schedule G (Form 990)	POPULATION CONNECTION	94-1703155 Page 4
Schedule G (Form 990) Part IV Supplemental I	nformation (continued)	
,		

SCHEDULE I (Form 990)

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

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

Attach to Form 990.

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization							Employer identification number
	ON CONNECT	ION					94-1703155
Part I General Information on Grants	and Assistance						
 Does the organization maintain records criteria used to award the grants or ass Describe in Part IV the organization's p 	sistance?				-		on X Yes No
Part II Grants and Other Assistance to recipient that received more than					anization answered "	Yes" on Form 990, Part	IV, line 21, for any
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
POPULATION CONNECTION ACTION FUND 2120 L STREET NW SUITE 500 WASHINGTON, DC 20037	46-3083014	501(C)(4)	3,300,000.	0.			PROGRAM SUPPORT
THE PARTNERSHIP PROJECT INC PO BOX 65826 WASHINGTON, DC 20035	52-2192070	501(C)(3)	70,000.	0.			PROGRAM SUPPORT
LEMUR LOVE ORGANIZATION 7972 AVENIDA NAVIDAD APT86 SAN DIEGO, CA 92122	46-1174853	501(C)(3)	50,000.	0.			PROGRAM SUPPORT
GREENLATINOS 1919 14TH ST. STE 700 BOULDER, CO 80302	26-3386082	501(C)(3)	13,000.	0.			PROGRAM SUPPORT
GREEN 2.0 1730 RHODE ISLAND AVE NW SUITE 610 WASHINGTON, DC 20036	46-5220283	501(C)(3)	15,000.	0.			PROGRAM SUPPORT
WINGS 1043 GRAND AVE #299 ST. PAUL, MN 55105	31-1759515	501(C)(3)	10,000.	0.			PROGRAM SUPPORT
2 Enter total number of section 501(c)(3) 3 Enter total number of other organization	and government or	ganizations listed in th	· · · · · · · · · · · · · · · · · · ·				<u>5.</u>

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

Schedule I (Form 990) 2023

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
Part IV Supplemental Information. Provide the information	required in Part I, lin	e 2; Part III, columr	(b); and any other ad	dditional information.	
PART I, LINE 2:					
POPULATION CONNECTION GAVE A GRAN	T TO A REL	ATED ORGAI	NIZATION, P	OPULATION	
CONNECTION ACTION FUND. POPULATIO	N CONNECTI	ON IS THE	SOLE VOTIN	G MEMBER OF	
THE ACTION FUND, AND ITS RECORD K	EEPING IS	MAINTAINEI	O BY POPULA	TION	
CONNECTION STAFF. THEREFORE, MONI	TORING OF	THE GRANT	IS DONE ON	A	
CONTINUOUS BASIS.					
POPCONN ALSO SUPPORTS LIKE MINDED	ORGANIZAT	IONS WITH	COMPATIBLE	GOALS AND	
torcomm nubo borronib bind niinbbr					

Schedule I (Form 990)

SCHEDULE J (Form 990)

Compensation Information

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

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

Attach to Form 990.

2023

OMB No. 1545-0047

Open to Public Inspection

Internal Revenue Service Name of the organization

Department of the Treasury

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

POPULATION CONNECTION

 $\begin{array}{c} \textbf{Employer identification number} \\ 94-1703155 \end{array}$

Pa	art i Questions Regarding Compensation			
	_		Yes	No
1 a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990,			
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	First-class or charter travel Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (such as maid, chauffeur, chef)			
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or			
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors,			
	trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?	2		
3	Indicate which, if any, of the following the organization used to establish the compensation of the organization's			
	CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to			
	establish compensation of the CEO/Executive Director, but explain in Part III.			
	X Compensation committee Written employment contract			
	Independent compensation consultant X Compensation survey or study			
	Form 990 of other organizations X Approval by the board or compensation committee			
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing			
	organization or a related organization:			
а	Receive a severance payment or change-of-control payment?	а		Х
b	Participate in or receive payment from a supplemental nonqualified retirement plan?	b		Х
С	Participate in or receive payment from an equity-based compensation arrangement?	c		X
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
				l
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the revenues of:			
а	The organization?	ia		X
b	Any related organization?	b		Х
	If "Yes" on line 5a or 5b, describe in Part III.			
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the net earnings of:			
а	The organization?	ìa		X
b		b		X
	If "Yes" on line 6a or 6b, describe in Part III.			
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments			
	not described on lines 5 and 6? If "Yes," describe in Part III	7	Х	
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the			
	initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	В		X
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 53.4958-6(c)?	9		

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

Schedule J (Form 990) 2023

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-MISO compensation	C and/or 1099-NEC	(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B)	
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation			reported as deferred on prior Form 990	
(1) JOHN SEAGER	(i)	303,943.	0.	0.	18,068.	20,457.	342,468.	0.	
PRESIDENT & CEO	(ii)	0.	0.	0.	0.	0.	0.	0.	
(2) PAMELA WASSERMAN	(i)	216,184.	25,000.	0.	14,207.	20,342.	275,733.	0.	
SR. VP FOR EDUCATION	(ii)	0.	0.	0.	0.	0.	0.	0.	
(3) BRIAN DIXON	(i)	220,275.	25,000.	0.	12,118.	10,228.	267,621.	0.	
SR. VP FOR MEDIA & GOV. REL.	(ii)	0.	0.	0.	0.	0.	0.	0.	
(4) MARIA OROZCO	(i)	215,793.	25,000.	0.	14,491.	9,313.	264,597.	0.	
SR. VP OF ADMINISTRATION/CFO	(ii)	0.	0.	0.	0.	0.	0.	0.	
(5) SHAUNA SCHERER	(i)	210,207.	25,000.	0.	0.	20,610.	255,817.	0.	
SR. VP FOR ADVANCEMENT	(ii)	0.	0.	0.	0.	0.	0.	0.	
(6) MARIAN STARKEY	(i)	163,432.	25,000.	0.	10,429.	14,731.	213,592.	0.	
VP FOR COMMUNICATIONS	(ii)	0.	0.	0.	0.	0.	0.	0.	
	(i)								
	(ii)								
	(i)								
	(ii)								
	(i)								
	(ii)								
	(i)								
	(ii)								
	(i)								
	(ii)								
	(i)								
	(ii)								
	(i)								
	(ii)								
	(i)								
	(ii)								
	(i)								
	(ii)								
	(i)								
	(ii)							(5	

Part III Supplemental Information	
Provide the information, explanation, or description	ns required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.
PART I, LINE 7:	
THE FOLLOWING BONUSES WERE	E INCLUDED ON PART VII OF THE 990:
PAMELA WASSERMAN	\$25,000
BRIAN DIXON	\$25,000
MARIA OROZCO	\$25,000
SHAUNA SCHERER	\$25,000
MARIAN STARKEY	\$25,000

SCHEDULE M (Form 990)

Noncash Contributions

OMB No. 1545-0047

2023

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

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.

POPULATION CONNECTION Employer identification number 94-1703155

Par	t I Types of Property							
		(a)	(b)	(c)	(d)			
		Check if	Number of contributions or	Noncash contribution amounts reported on	Method of de		•	
	ľ	applicable		Form 990, Part VIII, line 1g	noncash contribu	tion ar	nounts	S
1	Art - Works of art			, ,				
2	Art - Historical treasures							
3	Art - Fractional interests							
4	Books and publications							
5	Clothing and household goods							
6	Cars and other vehicles							
7	Boats and planes							
8	Intellectual property							
9	Securities - Publicly traded	X	21	84,714.	FMV			
10	Securities - Closely held stock							
11	Securities - Partnership, LLC, or							
	trust interests							
12	Securities - Miscellaneous							
13	Qualified conservation contribution -							
	Historic structures							
14	Qualified conservation contribution - Other							
15	Real estate - Residential							
16	Real estate - Commercial							
17	Real estate - Other							
18	Collectibles							
19	Food inventory							
20	Drugs and medical supplies							
21	Taxidermy							
22	Historical artifacts							
23	Scientific specimens							
24	Archeological artifacts							
25	Other ()							
26	Other ()							
27	Other ()							
28	Other ()							
29	Number of Forms 8283 received by the organization	ation during	the tax year for co	ontributions				
	for which the organization completed Form 8283	3, Part V, D	onee Acknowledge	ement 29			0	
							Yes	No
30a	During the year, did the organization receive by							
	must hold for at least 3 years from the date of the	ne initial coi	ntribution, and whi	ch isn't required to be used t	or			
	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 po		•	•	ions?	31	Х	
32a	Does the organization hire or use third parties or	,	5	, ,				7.7
	contributions?					32a		X
	If "Yes," describe in Part II.							
33	If the organization didn't report an amount in co	iumn (c) for	a type of property	tor which column (a) is chec	kea,			

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

Schedule M (Form 990) 2023

332142 09-11-23 Schedule M (Form 990) 2023

SCHEDULE O (Form 990)

Department of the Treasury

Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or Form 990-EZ.

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

2023
Open to Public Inspection

OMB No. 1545-0047

Name of the organization

POPULATION CONNECTION

Employer identification number 94-1703155

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
BY EARTH'S RESOURCES.

FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS: TRANS WOMEN OF COLOR COLLECTIVE AND WYANDOT BEHAVIORAL HEALTH NETWORK AND A REPRESENTATIVE FROM TRANSGENDER JUSTICE INITIATIVE AT THE HUMAN RIGHTS CAMPAIGN AND ADVOCATES FOR BETTER CARE ATLANTA. HOSTED A VIRTUAL KICKOFF OF OUR #FIGHT4HER CAMPAIGN FEATURING COLLEAGUES FROM VARIOUS ORGANIZATIONS IN EAST AFRICA INCLUDING TARETO AFRICA, NAWEZA TENA, AWAKENING HORN FOR INCLUSIVE DEVELOPMENT, TUNAWEZA FOUNDATION, THE ALLIANCE OF WOMEN ADVOCATING FOR CHANGE, AND HOPE FOR KENYA SLUM ADOLESCENTS INITIATIVE. THESE COLLEAGUES TALKED ABOUT THEIR RESPECTIVE WORK IN SEXUAL AND REPRODUCTIVE HEALTH AND THE IMPORTANCE OF ACTIVISTS HERE IN THE U.S. WORKING TOWARD REPRODUCTIVE HEALTH AND RIGHTS FOR ALL. ONE OF OUR FIELD STAFF ATTENDED THE NETROOTS NATION PROGRESSIVE AND AS AN ORGANIZATION WE SPONSORED 10 ACTIVISTS FROM CONFERENCE, AROUND THE COUNTRY TO ATTEND THE EVENT, AS WELL. WE ALSO HAD ACTIVISTS TAKE ONLINE ACTION BY PLEDGING TO #FIGHT4HER, AND CONTACTING THEIR LEGISLATORS ASKING THEM TO SUPPORT THE GLOBAL HER ACT. WE ALSO ASKED PEOPLE TO SIGN A "PEOPLE'S PLEDGE" TO PROTECT MIFEPRISTONE MEDICATION ABORTION) AND TO PREVENT JUDICIAL OVERREACH ON REPRODUCTIVE HEALTH ISSUES.

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

FACILITATORS. THESE WERE HELD IN NEW ORLEANS, SEATTLE AND ST. LOUIS FOR

A TOTAL OF 58 NEW TRAINERS.

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

Schedule O (Form 990) 2023

<u>Schedule O (Form 990) 2023</u> Page **2**

Name of the organization **Employer identification number** 94-1703155 POPULATION CONNECTION - JUDGED 2,384 STUDENT VIDEO SUBMISSIONS TO THE 12TH ANNUAL WORLD OF 7 BILLION VIDEO CONTEST FOR MIDDLE AND HIGH SCHOOL STUDENTS, COVERING THE TOPICS OF CLIMATE CHANGE, GENDER EQUALITY, AND WASTE FACILITATED A GRADUATE-LEVEL ONLINE COURSE FOR 30 MIDDLE AND HIGH SCHOOL SCIENCE AND SOCIAL STUDIES TEACHERS THROUGH ADAMS STATE UNIVERSITY DURING THE SUMMER AND FALL SEMESTERS (2 OFFERINGS). PRODUCED A NEW WORLD POPULATION MAP (CARTOGRAM) FOR DISTRIBUTION TO **TEACHERS** PRODUCED A NEW POSTER, "A QUICK TRIP TO 8 BILLION" (DOUBLE-SIDED WITH A HISTORICAL TIMELINE AND NEW INFOGRAPHICS) EXHIBITED MATERIALS AT TWO MAJOR TEACHER CONVENTIONS (NATIONAL SCIENCE TEACHERS ASSOCIATION ATLANTA; NATIONAL COUNCIL FOR THE SOCIAL STUDIES IN NASHVILLE). - WE HAD 196 ACTIVE VOLUNTEERS IN 2023. FORM 990, PART III, LINE 4C, PROGRAM SERVICE ACCOMPLISHMENTS: SPEAKERS, A PHOTO CONTEST, GLOBAL PARTNER PRESENTATIONS, AND BOOK CLUB DISCUSSIONS, HAVE FOSTERED A VIBRANT COMMUNITY DIALOGUE ON POPULATION TRENDS, REPRODUCTIVE RIGHTS, AND SUSTAINABLE DEVELOPMENT. FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES: COMMUNICATIONS: TO KEEP POPULATION CONNECTION MEMBERS AND SUPPORTERS, FEDERAL DECISIONMAKERS, AND JOURNALISTS UP-TO-DATE ON U.S. AND GLOBAL POPULATION ISSUES. POPULATION CONNECTION PUBLISHED: FOUR ISSUES OF POPULATION CONNECTION MAGAZINE, CIRCULATION =65,000; HARD COPIES MAILED TO POPULATION CONNECTION MEMBERS, EVERY MEMBER OF

- FIVE LETTERS TO THE EDITOR IN U.S. NEWSPAPERS, TWO OF THEM IN THE NEW

CONGRESS, AND OVER 3,000 PUBLIC AND UNIVERSITY LIBRARIES.

Employer identification number Name of the organization 94-1703155 POPULATION CONNECTION YORK TIMES AND ONE IN THE BOSTON GLOBE 40 BLOG POSTS ON THE POPULATION CONNECTION WEBSITE, RANGING IN TOPIC FROM LONG-RANGE POPULATION PROJECTIONS TO CHINA'S POPULATION PEAK TO DEFORESTATION AND HABITAT LOSS DAILY FACEBOOK, TWITTER/X, AND INSTAGRAM SOCIAL MEDIA CONTENT NEW WEBSITE CONTENT AND UPDATES POPULATION CONNECTION STAFF: - GAVE VIRTUAL PRESENTATIONS TO OVER 75 COLLEGE AND UNIVERSITY CLASSES AROUND THE COUNTRY - TAUGHT A FIVE-WEEK VIRTUAL SUMMER CLASS AT THE UNIVERSITY OF NORTH CAROLINA GREENSBORO PARTICIPATED IN INTERVIEWS ON THREE DIFFERENT PODCASTS HOSTED A WEBINAR FOR MEMBERS AND SUPPORTERS ON WORLD POPULATION DAY RESPONDED TO HUNDREDS OF INFORMATION REQUESTS FROM STUDENTS, DONORS, AND MEMBERS OF THE GENERAL PUBLIC EXPENSES \$ 2,153,468. INCLUDING GRANTS OF \$ 195,874. REVENUE \$ 0. GOVERNMENT RELATIONS: TO INFORM CONGRESS AND THE ADMINISTRATION ABOUT POPULATION ISSUES AND TO ADVOCATE THE ADOPTION OF MEASURES TO MOVE THE UNITED STATES AND THE WORLD TOWARDS STABILIZING POPULATION; TO INFLUENCE POPULATION-RELATED LEGISLATION; TO MOBILIZE MEMBERS TO TAKE ACTION: 2022 HIGHLIGHTS: POPULATION CONNECTION CONTINUES TO STRENGTHEN OUR RELATIONSHIPS WITH INTERNATIONAL NON-GOVERNMENTAL ORGANIZATIONS (NGOS) IN AFRICA AND LATIN AMERICA. WE LOOK FOR THE TYPE OF NGO THAT'S BEEN EMBEDDED IN ITS COMMUNITY AND IS AN ORGANIC PART OF THE COMMUNITY, WITH THE MISSION TO IMPROVE THE RELATIONSHIP BETWEEN PEOPLE AND THE ENVIRONMENT. THE VISION OF THESE NGOS IS COMPLEMENTARY WITH POPULATION CONNECTION'S MISSION TO STABILIZE POPULATION AT A LEVEL THAT CAN BE Schedule O (Form 990) 2023 <u>Schedule O (Form 990) 2023</u> Page **2**

Name of the organization POPULATION CONNECTION Employer identification number 94-1703155

SUSTAINED BY THE ENVIRONMENT.

INTERNATIONAL ENGAGEMENT 2023 HIGHLIGHTS

THROUGHOUT 2023, POPULATION CONNECTION CONTINUED TO SUPPORT OUR GLOBAL

PARTNERS IN THE GLOBAL PARTNER PROGRAM. WE'VE FINANCED THE GPP FOR

ABOUT FOUR YEARS; THE PROGRAM CONSISTS OF PINPOINTING (OFTEN BY WORD OF

MOUTH), AND VETTING SMALL, INDIGENOUS, AND GRASSROOTS LEVEL NONPROFIT

ORGANIZATIONS, MOST OF ARE SMALL IN STAFF AND BUDGET. WE AWARD GRANTS

TO ABOUT 21 NGOS, MOST OF WHICH ARE IN AFRICA AND LATIN AMERICA. WE

REQUIRE THE "GPPS" THAT THE NGO "JOIN" (AT NO COST) THE GLOBAL PARTNERS

PROGRAM, SIGN A GRANT AGREEMENT, AND SUBMIT ANNUAL GRANT AND FINANCIAL

REPORTS. SOME OF THE NGOS GO ON TO WORK WITH US ON VARIOUS INITIATIVES;

OTHERS PARTICIPATE IN VIRTUAL PRESENTATIONS ABOUT THEIR WORK AND FUTURE

PLANS. THESE PRESENTATIONS ALLOWS OUR MEMBERS AND SUPPORTERS A WAY TO

MEET AND BECOME FAMILIAR WITH THESE AMAZING GROUPS.

THERE ARE ABOUT 21 NONPROFIT ORGANIZATIONS IN THE PROGRAM; WE DON'T

PLAN TO TAKE ON MORE THAN A FEW NEW GROUPS (IF AT ALL). HAVING A SMALL,

CAREFULLY CHOSEN GROUP OF 21 ALLOWS US TO NURTURE RELATIONSHIPS WITH

THE ORGANIZATION'S TEAM, AND ENCOURAGES OUR GLOBAL PARTNERS TO KEEP US

"IN THE LOOP" ABOUT BOTH THEIR SUCCESSES, AND CHALLENGES. FURTHER, AND

TO OUR ADVANTAGE, WE'VE GROWN FAMILIAR WITH THE OPERATIONAL SIDE OF A

SMALL NGO, AND HOW THE NGO RESPONDS TO CHALLENGES AND ADAPTS TO NEW

OBJECTIVES.

THE MISSIONS OF OUR GLOBAL PARTNERS ARE COMPLEMENTARY TO THE POPULATION

CONNECTION MISSION OF EMPOWERING WOMEN, ALIGNING POPULATION NUMBERS

Name of the organization
POPULATION CONNECTION
POPULATION CONNECTION
94-1703155

WITH ENVIRONMENTAL SUSTAINABILITY, AND HUMAN NEED. OF COURSE, THE

GROUPS ARE NOT A MONOLITH; THEY HAVE EXPERIENCE IN THEIR NICHES,

WHETHER THAT IS GIRLS' (AND BOYS') EDUCATION; ANIMAL OR PLANT

CONSERVATION, HEALTH CARE, ETC.

WE LOOK FOR NGOS EMBEDDED IN, AND ORGANIC TO, THEIR COMMUNITY. MANY OF

THE GROUPS'S MISSIONS ARE SIMILAR, LIKE IMPROVING THE FUTURES OF

CHILDREN VIA CLASSROOM-TYPE EDUCATION, AND OFFERING ADULT EDUCATION

THAT IMPROVES ADULT LIVES, VIA FINANCIAL STABILITY. THE END GOAL, OF

COURSE, OF THE NGO ACTIVITIES IS TO NURTURE HEALTHY FAMILIES; BRING OR

IMPROVE LITERACY TO THE COMMUNITY; AND CREATE AND MAINTAIN EASY ACCESS

TO HEALTH CARE, INCLUDING REPRODUCTIVE AND MATERNAL HEALTH.

AS NOTED ABOVE, WE HAVE A GRANT PORTFOLIO OF APPROXIMATELY 21 NGOS,

INCLUDING GROUPS WE'VE DONATED TO. (WE DON'T HAVE ANY REQUIREMENTS FOR

NGOS THAT RECEIVE DONATIONS, AS OPPOSED TO GRANTS.) MOST GPS HAVE GOALS

SIMILAR TO OUR OWN (WOMEN'S EMPOWERMENT, ENVIRONMENTAL STABILITY, ETC.)

WE ALSO INCLUDE GROUPS DOING A RANGE OF SERVICE WORK IN THEIR

COMMUNITIES. WE HAVE INDIGENOUS GROUPS, GROUPS FOUNDED AND RUN BY

WOMEN, AND GROUPS THAT WORK WITH YOUTH. ALL FOCUS ON URGENT, TIMELY

ISSUES. FOR EXAMPLE, WE HAVE NGOS DISTRIBUTING CONTRACEPTION TO THEIR

CLIENTS, AND PROVIDING SEXUAL AND REPRODUCTIVE HEALTH EDUCATION TO

YOUTH AND ADULTS. EVERY COMMUNITY THAT HOUSES ONE OF THE GP'S IS VERY

POOR, WHETHER IN LATIN AMERICA OR AFRICA. THE LOCATION LACKS BASIC

HEALTHCARE, FOOD, AND WATER, AND ACCESS BEYOND A PRIMARY SCHOOL

EDUCATION. ALL HAVE WOMEN LACK ACCESS TO BASIC HEALTHCARE, AND

REPRODUCTIVE HEALTH CARE. WHAT THESE NGOS PROVIDE TO THEIR STAKEHOLDERS

AND CLIENTS CAN BE LIFE CHANGING (AND LIFE SAVING) FOR THE PEOPLE IN

Schedule O (Form 990) 2023

Name of the organization POPULATION CONNECTION Employer identification number 94-1703155

THE COMMUNITY.

POPULATION CONNECTION IS A VOCAL AND VISIBLE ADVOCATE FOR INTERNATIONAL

FAMILY PLANNING FUNDING AND THE KIND OF ISSUES THAT ESPECIALLY IMPACT

WOMEN AND FAMILIES. HOWEVER, WE WORK IN THE US, AND WE AREN'T SERVICE

PROVIDERS TO WOMEN IN AFRICA OR LATIN AMERICA. WORKING WITH OUR

INTERNATIONAL PARTNERS THROUGH GRANT PROVISION ALLOWS US TO SEE GROUPS

PROVIDING DIRECT SERVICE TO TARGET POPULATIONS, AND IMPROVING THE

ENVIRONMENT.

WORKING WITH UNDER-RESOURCED NGOS CATCHES THE ATTENTION OF OUR

STAKEHOLDERS, MEMBERS, AND STAFF THAT THERE ARE REAL WORLD PROGRAMS

SUCCESSFULLY OPERATING IN VERY CHALLENGING CIRCUMSTANCES. WE'VE GOTTEN

A SIGNIFICANT AMOUNT OF FEEDBACK FROM THE GPS THAT THEY APPRECIATE OUR

GRANTS. OUR RELATIONSHIPS WITH THE GLOBAL PARTNERS ALLOWS US TO ASSIST

THEM IN ACCOMPLISHING THEIR GOALS VIZ. HUMANS, THE ENVIRONMENT, AND

ANIMALS, RAISING THE QUALITY OF LIFE FOR ALL.

AS A CONDITION TO BECOMING AND RETAINING A GLOBAL PARTNER POSITION,

EACH NGO SIGNS A GRANT AGREEMENT (GA), WITH SEVERAL REQUIREMENTS. THE

MOST IMPORTANT REQUIREMENT IS THEY SUBMIT AN END OF YEAR, NARRATIVE

REPORT AND FINANCIAL REPORT ABOUT THEIR ACTIVITIES, CHALLENGES,

SUCCESSES, AND FUTURE PLANS. THE REPORTS TOGETHER INFORM US ABOUT THE

STATUS AND ACCOMPLISHMENTS OF THE NGO'S WORK.

AS NOTED EARLIER IN THIS REPORT, THE GPP SOMETIMES DONATES MONEY TO A
FEW NGOS. THESE NGOS ARE NEW TO THE GLOBAL PARTNER PROGRAM, AND/OR ARE
A START UP WITH A SMALL BUDGET AND A SMALL STAFF. DEPENDING ON HOW THE

Name of the organization
POPULATION CONNECTION
POPULATION CONNECTION

RELATIONSHIP PROGRESSES, WE OFTEN INCREASE THE DONATION, AND SOMETIMES

OFFER A GRANT. DONATIONS DON'T HAVE REQUIREMENTS, SINCE WE DON'T KNOW

IF THESE NGOS WILL BECOME GPP MEMBERS.

THE FOLLOWING CASE STUDIES ARE DERIVED FROM END OF YEAR REPORTS FROM

GLOBAL PARTNERS, COVERING GOALS AND OBJECTIVES, ACTIVITIES, SUCCESSES,

AND CHALLENGES ENCOUNTERED IN 2023. THE FOLLOWING ARE CASE STUDIES FOR

SEVERAL GLOBAL PARTNERS.

WINGS GUATEMALA: WINGS GUATEMALA PROVIDES QUALITY REPRODUCTIVE HEALTH

EDUCATION AND SERVICES TO UNDERSERVED, PRIMARILY RURAL, GUATEMALAN

YOUTH, WOMEN, AND MEN. WINGS WAS AN EARLY GLOBAL PARTNER, AND HAS BEEN

AN EXCELLENT PARTNER FOR US. THE GROUP SERVES LOCAL COMMUNITIES,

PROVIDING ACCESS TO REPRODUCTIVE HEALTH. THIS GOAL HAS BEEN MET SINCE

COVID IMPACTED THE NGO. WINGS' WORK ALLOWS WOMEN AND FAMILIES TO

CONTROL THEIR FERTILITY, THEREBY SLOWING GUATEMALA'S RAPIDLY GROWING

POPULATION, AND LOWERING THE USE OF NATURAL RESOURCES.

ONE IN THREE (33%) OF INDIGENOUS WOMEN HAS NO ACCESS TO HEALTH AND

FAMILY PLANNING SERVICES. 80% OF GUATEMALA'S INDIGENOUS POPULATION

LIVES IN POVERTYIN PART DUE TO THIS UNMET NEED. POPULATION CONNECTION'S

SUPPORT HELPS WINGS BRING ESSENTIAL REPRODUCTIVE HEALTH CARE TO THE

COMMUNITY VIA MOBILE MEDICAL UNITS, STATIONARY CLINICS, SATELLITE

TEAMS, AND BY PARTNERING WITH LOCAL HOSPITALS.

THE ORGANIZATION OFFERS ACCESS TO THE FULL RANGE OF TEMPORARY AND

PERMANENT CONTRACEPTION, AS WELL AS GENERAL REPRODUCTIVE HEALTH

SERVICES, INCLUDING CERVICAL CANCER PREVENTION SERVICES AND TREATMENT

Name of the organization Employer identification number POPULATION CONNECTION 94-1703155

FOR COMMONLY OCCURRING SEXUALLY TRANSMITTED INFECTIONS (STIS).

AS THE PANDEMIC HAS BECOME LESS OF AN IMMEDIATE THREAT, AND HEALTH CARE

IS EASIER TO PROVIDE IN GUATEMALA, WINGS HAS GRADUALLY INCREASED ITS

LEVEL OF HEALTH CARE IN THE COMMUNITY. IT HAS NEARLY RETURNED TO ITS

PRE-2020 NUMBERS.

SOME ACCOMPLISHMENTS INCLUDE: THREE-QUARTERS OF THE WAY THROUGH 2023,
WINGS REACHED 66% OF THEIR ANNUAL PROJECTION FOR TUBAL LIGATIONS, 75%

OF THE PROJECTION FOR VASECTOMIES, AND 70% OF THE ANNUAL PROJECTION FOR
LONG-ACTING REVERSIBLE CONTRACEPTION (IUDS AND IMPLANTS). THE

ORGANIZATION LAUNCHED SERVICES IN JUTIAPA DEPARTMENT IN SEPTEMBER, AND
HAD MUCH MORE INITIAL DEMAND THAN ANTICIPATED. (A GUATEMALAN DEPARTMENT
IS SIMILAR TO A STATE IN THE US, WITH JUTIAPA BORDERING EL SALVADOR AND
THE PACIFIC OCEAN) WINGS PLANS TO REPLICATE SERVICES IN THE DEPARTMENTS
OF EL PROGRESO AND JALAPA, BRINGING THEIR COVERAGE REGION TO A TOTAL OF
19 AREAS ACROSS GUATEMALA.

WINGS HAS TWO COMMUNITY ADVISORY BOARDS (CAB), ONE BASED IN THE CENTRAL

REGION AD ONE IN ALTA VERAPAZ. THE CABS CONTINUED TO MEET THROUGHOUT

2023, SERVING AS AN AVENUE TO ENSURING THE MEANINGFUL INCLUSION OF

COMMUNITY VOICES IN THE ORGANIZATION'S DECISION-MAKING PROCESSES. THE

CABS PROVIDE INSIGHT INTO COMMUNITY NEEDS AND PERCEPTIONS OF WINGS'

SERVICES, ASSIST WINGS IN TROUBLESHOOTING DIFFICULTIES THEIR PROGRAMS

MAY BE FACING, SHAPE THE VISION FOR FUTURE PROGRAMMING, AND HELP

EVALUATE CURRENT ACTIVITIES.

EXPENSES \$ 548,566. INCLUDING GRANTS OF \$ 300,018. REVENUE \$ 0.

Page 2

Schedule O (Form 990) 2023 **Employer identification number** Name of the organization 94-1703155 POPULATION CONNECTION FORM 990, PART III, LINE 4D CONTINUATION: STRETCHERS YOUTH ORGANIZATION: STRETCHERS, IS A MEMBERSHIP, YOUTH-LED COMMUNITY-BASED NONPROFIT THAT PROMOTES HEALTH RIGHTS, GOOD GOVERNANCE, AND GENDER EQUALITY AMONG INDIGENOUS YOUTH AND WOMEN IN UNDERSERVED SECTIONS OF KENYA. STRETCHERS WORKS ON INTEGRATION OF CAPACITY BUILDING, AS WELL AS ADVOCACY AND INFORMATION SHARING THROUGH LINKAGE TO SERVICES FOR A SUSTAINABLE SOCIETY. THE GROUP'S GOALS: IMPROVE HEALTH, GOVERNANCE, GENDER EQUALITY, AND SUSTAINABILITY MAKE IT AN EXCELLENT PARTNER FOR POPULATION CONNECTION. IN 2022, THE ADOLESCENTS AND YOUTH EMPOWERMENT FOR HEALTH ADVOCACY PROJECT (AYEHA) TOOK UP THE MANTLE, SEEKING TO BRIDGE THE INFORMATION GAP FOR ADOLESCENTS AND YOUNG PEOPLE ABOUT ALL HEALTH ISSUES. THE YOUNG PEOPLE THEMSELVES DROVE THE SPECIFIC NEEDS THAT THEY WANTED TO ADDRESS. ADOLESCENTS AND YOUNG PEOPLE ARE AT THE FOREFRONT, AND ACTIVELY CONTRIBUTE SUGGESTIONS AND CONCERNS. THE AYEHA PROJECT FOCUSES ON COMPREHENSIVE SEXUALITY EDUCATION, HUMAN RIGHTS, GENDER EQUALITY, AND EMPOWERMENT. IN 2023, STRETCHERS LAUNCHED THE SECOND PHASE OF THE PROJECT IN MOMBASA AND KWALE COUNTY, LEVERAGING PREVIOUS ACCOMPLISHMENTS WHILE INTRODUCING INNOVATIVE APPROACHES TO ADDRESS IDENTIFIED ISSUES. ULTIMATELY, STRETCHERS STRATEGIC GOAL FOR THE NEXT YEAR IS TO CONTRIBUTE TO THE IMPROVED HEALTH AND WELL-BEING OF

AMONG STRETCHERS 2023 ACHIEVEMENTS WERE THE FOLLOWING:

ADOLESCENTS LEARNED ABOUT FAMILY PLANNING AND COMMITTED TO EDUCATING THEIR PEERS ON RESPONSIBLE USAGE, ADDRESSING CONCERNS RELATED TO

ADOLESCENTS AND YOUNG PEOPLE.

Schedule O (Form 990) 2023 Page 2 Name of the organization **Employer identification number** 94-1703155 POPULATION CONNECTION EMERGENCY PILL MISUSE. 3 SCHOOLS ACROSS MOMBASA COUNTY EXPRESSED INTEREST IN MENTORSHIP SESSIONS, WITH CURRENT 70% OF PARTICIPANTS REQUESTING ADDITIONAL SESSIONS IN THEIR SCHOOLS. MENTORSHIP SESSIONS EMPOWERED STUDENTS TO BECOME PEER EDUCATORS, SHARING KNOWLEDGE GAINED FROM THESE SESSIONS WITH THEIR FRIENDS. THE PROJECT FORGED ROBUST PARTNERSHIPS BETWEEN STRETCHERS YOUTH ORGANIZATION, OTHER CSOS, AND AYP COORDINATORS, ACTIVELY PARTICIPATING IN COMMUNITY FORUMS. - ADOLESCENTS VOICED THEIR CONCERNS AND SUBMITTED THEM TO KEY FIGURES, SUCH AS THE OFFICE OF THE GOVERNOR NAIROBI COUNTY, WOMEN REPRESENTATIVE NAIROBI COUNTY, AND CABINET SECRETARY FOR YOUTH AFFAIRS, SPORTS, AND ARTS, DURING THE GIRL SUMMIT EVENT. THE GIRL SUMMIT EVENT FACILITATED VALUABLE PARTNERSHIPS BETWEEN STRETCHERS YOUTH ORGANIZATION, THE NATIONAL GOVERNMENT, NAIROBI COUNTY GOVERNMENT, AND LOCAL STAKEHOLDERS. EARLY IN 2023, WE INFORMED THE GLOBAL PARTNERS THAT WE'D CONSIDER APPLICATIONS FOR FUNDING TO ATTEND CONFERENCES. GIVING NGOS THE ABILITY TO ATTEND AND SOMETIMES HAVE THE OPPORTUNITY TO PARTICIPATE IN CONFERENCES, WORKSHOPS, SEMINARS, ETC. IS A POSITIVE ASPECT OF GETTING TO KNOW THEM. CONFERENCES OFFER A GLOBAL PARTNER A CHANCE TO NETWORK WITH THEIR PEERS IN-COUNTRY AND OUTSIDE OF THEIR COUNTRY, MANY OF THESE NGOS ARE LOCATED IN SIMILAR LOCATIONS, AND THUS FACE SIMILAR CHALLENGES. CONFERENCES GIVE OUR ORGANIZATIONS THE OPPORTUNIT Y

Schedule O (Form 990) 2023

OUANTITATIVE AREAS. MEETING PEOPLE WORKING IN NGOS ON ISSUES SIMILAR TO

58

TO NETWORK WITH EXPERTS IN THE FIELD OR RESEARCHING QUALITATIVE AND

Name of the organization

POPULATION CONNECTION

Employer identification number
94-1703155

THOSE OF THE GLOBAL PARTNERS MAY PROVIDE NEW AND DIFFERENT APPROACHES

TO A VARIETY OF CONTINUED ISSUES. NETWORKING CAN REIFY THE GP'S CURRENT

ACTIVITY, AND HELP SEE THE "BIG PICTURE," PUTTING THEIR ENVIRONMENTAL,

WOMEN'S, CHILDREN'S WORK, ETC., INTO CONTEXT.

THIS JULY 2024, WE'LL BE SPONSORING THE EXECUTIVE DIRECTOR OF

STRETCHERS YOUTH ORGANIZATION. DICKSON OKONG'O WILL ATTEND THE

INTERNATIONAL AIDS CONFERENCE WHICH IN MUNICH. DICKSON WILL NOT ONLY

ATTEND AN EVENT OF 15,000+ ATTENDEES, HE'LL PARTICIPATE IN A WORKSHOP

ABOUT BEST PRACTICES IN SEXUAL AND REPRODUCTIVE HEALTH AND RIGHTS

TRAINING. WE EXPECT HIM TO REPORT BACK, AND WE'RE CONFIDENT THE EVENT

ITSELF, AND PARTICIPATING IN THIS WORKSHOP, WILL PROVIDE DICKSON WITH

PLENTY OF NEW IDEAS.

NASARUNI ACADEMY FOR MAASAI GIRLS: WHILE THE GLOBAL PARTNER PROGRAM WAS

INITIATED IN 2020, IT WASN'T UNTIL 2022 THAT THE GRANT-GIVING EXPANDED

TO MORE NGOS IN AFRICA AND LATIN AMERICA. IT WAS IN 2022, IN FACT, THAT

WE FIRST PROVIDED FUNDING TO THE NASARUNI ACADEMY FOR MAASAI GIRLS. WE

WERE INTRODUCED TO THE SCHOOL AND ITS LEADERSHIP BY ONE OF OUR

STAFFERS, WHO IS ON THE BOARD OF NASARUNI. AFTER CLOSELY REVIEWING THE

SCHOOL'S ACTIVITIES, FINANCIALS, ETC., WE SAW THAT IT'S AN EXCELLENT

PROGRAM, AND EDUCATES MAASAI GIRLS WHO UNDER NORMAL CIRCUMSTANCES DON'T

HAVE THE OPPORTUNITY FOR EDUCATION BEYOND PRIMARY SCHOOL.

MAASAI GIRLS ARE EXTREMELY MARGINALIZED IN THE MAASAI COMMUNITY, WHICH

IS A VERY PATRIARCHAL CULTURE. GIRLS ARE CIRCUMCISED BETWEEN THE AGES

OF 10 -12; THEY MARRY SOON AFTER, BUT CANNOT CHOOSE THEIR HUSBAND. THEY

MIGHT ATTEND PRIMARY SCHOOL BUT ONLY 5% ARE ABLE TO CONTINUE THEIR

Page 2

Schedule O (Form 990) 2023 Name of the organization **Employer identification number** 94-1703155 POPULATION CONNECTION SCHOOLING BEYOND THAT. NASARUNI WAS FOUNDED IN 2013 TO ADDRESS SOME OF THOSE AWFUL CONDITIONS. AND WE'RE HAPPY TO REPORT THAT POPULATION CONNECTION'S HELP HAS BEEN INVALUABLE TO THE SCHOOL. ACCORDING TO THE SCHOOL'S 2023 REPORT, NASARUNI CURRENTLY HAS 200+ GIRLS IN GRADES PRE-K - 11TH GRADE, AND EMPLOY 14 "AMAZING, DEDICATED TEACHERS" AND STAFF MEMBERS. ALSO ACCORDING TO THE REPORT, "POPULATION CONNECTION [GRANTS] HAVE HELPED US OVER THE LAST FEW YEARS" TO EXPAND, AND START TO MEET "THE INCREASED NEED FOR HIGH SCHOOL AND COMPETENCY-BASED EDUCATION." THE REPORT CONTINUES WITH "PC WAS A MAJOR CONTRIBUTOR IN HELPING THE SCHOOLEXPAND ITS PHYSICAL FOOTPRINT ALLOWING US TO PROVIDE STUDENTS WITH A WELL-ROUNDED EDUCATION." SEVERAL BUILDINGS ON THE NASARUNI CAMPUS OPENED IN THE LAST YEAR, " IN A FINISHED, UPDATED , AND/OR UPGRADED STATE. THOSE BUILDINGS "ARE ALREADY HOSTING STUDENTS, INCLUDING THE LIBRARY, AND THE SCIENCE LAB. THE STUDENTS LOVE HAVING ACCESS TO A SAFE AND CLEAN LIBRARY COMPLETE WITH ACCESS TO BOOKS, AND COMPUTERS TO PRACTICE THEIR SKILLS."

FURTHER, STUDENTS CAN PARTICIPATE IN "HANDS-ON EXPERIMENTS AND LESSONS IN THE SCIENCE LAB, WHERE THEY CAN LEARN ABOUT THE WORLD AROUND THEM." THE ADMINISTRATION BUILDING IS NOW AN ACCESSIBLE, "FULLY FUNCTIONING PRIMARY AND SECONDARY SCHOOL."

BESIDES HELPING TO BUILD UP THE INFRASTRUCTURE FOR THE FIRST TIME SINCE THE SCHOOL OPENED IN 2013, POPULATION CONNECTION'S GRANT ALLOWED NASARUNI TO ASSURE THAT TEACHERS WOULD BE PAID ON A REGULAR BASIS FOR

Schedule O (Form 990) 2023

Name of the organization POPULATION CONNECTION Employer identification number 94-1703155

THE FIRST TIME. THIS IS A CRUCIAL ITEM, GIVEN THAT MISSING A PAYCHECK

CAN MAKE A HARSH ECONOMIC IMPACT ON A TEACHER.

AS REPORTED BY OUR CONTACT, MICHELLE CUDE, WHO IS HEAD OF NASARUNI'S

US-BASED BOARD OF DIRECTORS (NASARUNI HAS TWO BOARDS OF DIRECTORS,

WITH THE OTHER BOARD BASED IN AFRICA.) LAST YEAR SAW TERRIBLE DROUGHT

CONDITIONS IN EAST AFRICA, INCREASING THE COST OF FOOD, AND STARVING

FAMILIES, AND THEIR ANIMALS. WITH THE HELP OF DONATIONS INCLUDING OURS,

NASARUNI FED HUNDREDS OF PEOPLE IN THE SURROUNDING COMMUNITIES NEAR

NASARUNI. THEY DISTRIBUTED UNGA (FLOUR), RICE, TEA, AND COOKING OIL

NEEDED TO SUSTAIN FAMILIES THROUGH THE WORST PARTS OF THE DISASTER.

AND FINALLY, POPULATION CONNECTION PUBLISHED A FEATURE ARTICLE IN ITS

MAGAZINE ABOUT NASARUNI ACADEMY, CALLING ATTENTION TO THE SCHOOL. WE'RE

HOPING THAT SOME OF OUR MEMBERS AND OTHER READERS FELT INSPIRED TO

CONTRIBUTE TO NASARUNI THEMSELVES.

WOMEN FOR CONSERVATION (W4C): W4C IS A FAIRLY NEW (2 YEARS) NGO THAT WE

HAVE GIVEN TWO (2) GENERAL SUPPORT GRANTS AS PART OF THE GLOBAL PARTNER

PROGRAM (GPP). THE GROUP WAS STARTED BY A MOTHER/DAUGHTER TEAM; AMPARO,

THE MOTHER , WHO PASSED AWAY, AT WHICH POINT HER DAUGHTER TOOK THE

REINS OF THE ORGANIZATION.

HERE ARE THE TYPES OF ACHIEVEMENTS W4C HAD IN 2023, WITH SOME HELP FROM POPULATION CONNECTION:

W4C PROVIDED 354 WOMEN AND GIRLS WITH ACCESS TO FAMILY PLANNING

RESOURCES IN 2023. THE VAST MAJORITY OF GIRLS AND WOMEN CHOOSE TO

<u>Schedule O (Form 990) 2023</u> Page **2**

Name of the organization

POPULATION CONNECTION

RECEIVE REVERSIBLE JADELLE HORMONE IMPLANTS IN THEIR ARMS, WHILE OTHERS

RECEIVE FAMILY PLANNING EDUCATION, CANCER SCREENINGS, OR TUBAL

LIGATIONS.

BY 2022, W4C WAS GETTING "REQUESTS FROM MEN WHO WANTED VASECTOMIES, IN

AN EFFORT TO LIFT THE BURDEN OF FAMILY PLANNING OFF OF WOMEN'S

SHOULDERS. A SUCCESS THAT WE ARE INCREDIBLY PROUD OF IS DESTIGNATIZING

FAMILY PLANNING, AS IN THE PAST FAMILY PLANNING WAS SOMETIMES SEEN AS A

TABOO TOPIC IN THE COMMUNITIES WHERE WE WORK.

THROUGH EDUCATION AND YEARS OF BUILDING TRUST IN THESE COMMUNITIES,

WOMEN AND GIRLS ARE NOW PROUD TO SHARE THEIR FAMILY PLANNING SUCCESS

STORIES AND PROMOTE THE IMPORTANCE OF REPRODUCTIVE HEALTHCARE AMONG

THEIR FAMILY AND FRIENDS. W4C'S GROWING POPULARITY HAS RESULTED IN LONG

FAMILY PLANNING WAITING LISTS IN THE COMMUNITIES WHERE WE WORK.

AND FINALLY, AS W4C NOTED, "OUR BIGGEST CHALLENGE IS ATTAINING THE

FUNDING TO MEET THE DEMAND, AS THERE IS A GROWING CONSCIOUSNESS OF THE

IMPORTANCE OF FAMILY PLANNING."

FORM 990, PART III, LINE 4D CONTINUATION:

POPULATION CONNECTION IS VERY HAPPY WITH ALL THE NGOS WE FUNDED FOR

2023. THEY'VE SUCCEEDED AGAINST THE ODDS AND A RANGE OF CHALLENGES TO

DO AMAZING THINGS. OUR GRANTS ARE MAINLY EXTENDED TO NGOS WHO HAVE

SMALL STAFFS, SMALL BUDGETS, AND FEW RESOURCES. NONETHELESS, WE BELIEVE

WE'VE CHOSEN SOME EXCELLENT, CREATIVE, PERSISTENT, AND RESOURCEFUL

NONPROFITS WORKING ON ISSUES THAT IMPACT POPULATION, LIKE THE

ENVIRONMENT, ACCESS TO WOMEN'S HEALTH CARE, AND ULTIMATELY WOMEN'S

Schedule O (Form 990) 2023

Name of the organization POPULATION CONNECTION Employer identification number 94-1703155

EMPOWERMENT.

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

THE FORM 990 WAS PREPARED BY THE OUTSIDE ACCOUNTANTS AND REVIEWED BY THE
PRESIDENT AND BOARD MEMBERS. A COPY OF THE FINAL 990 WAS GIVEN TO THE
ENTIRE BOARD PRIOR TO FILING WITH THE IRS.

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

POPULATION CONNECTION MONITORS AND ENFORCES COMPLIANCE OF A WRITTEN

CONFLICT OF INTEREST POLICY WITH ITS BOARD OF DIRECTORS AND STAFF MEMBERS.

DIRECTORS AND STAFF ARE REQUIRED TO PERIODICALLY DISCLOSE CONFLICTS, SHOULD THEY ARISE.

IF A CONFLICT ARISES, IT IS BROUGHT IMMEDIATELY TO THE ATTENTION OF BOTH

THE CHAIR AND THE PRESIDENT. IF THE BOARD IS TO TAKE ACTION IN SUCH A

SITUATION, THE PERSON HAVING A CONFLICT DOES NOT PARTICIPATE IN THE FINAL

DELIBERATION OR DECISION REGARDING THE MATTER UNDER CONSIDERATION AND,

AFTER PROVIDING ALL RELEVANT INFORMATION REGARDING THE MATTER, RETIRES FROM

THE PROCEEDINGS AND ROOM IN WHICH THE BOARD IS MEETING AND DOES NOT

PARTICIPATE IN THE VOTE.

WHEN THERE IS DOUBT AS TO WHETHER A CONFLICT EXISTS, SUCH MATTER IS

RESOLVED BY THE BOARD IN AN OFFICIAL VOTE, EXCLUDING FROM THE VOTE THE

PERSON WHO MAY HAVE A CONFLICT. THE BOARD SEEKS SUCH OUTSIDE COUNSEL OR

LEGAL ADVICE AS IT DEEMS NECESSARY IN ORDER TO BETTER ENABLE IT TO MAKE A

DECISION.

Schedule O (Form 990) 2023

Name of the organization POPULATION CONNECTION	Employer identification number 94-1703155
FORM 990, PART VI, SECTION B, LINE 15:	
COMPARABLE DATA WAS USED BY THE BOARD TO DETERMINE THE CEO	'S SALARY.
SIMILAR ORGANIZATIONS WERE EXAMINED TO ASCERTAIN COMPARABL	E LEVELS OF
COMPENSATION FOR OFFICERS AND KEY EMPLOYEES. THE EXECUTIVE	COMMITTEE OF THE
BOARD DETERMINES THE CEO'S SALARY AND THEN IS PRESENTED TO	THE WHOLE BOARD.
THE DECISION IS DOCUMENTED. THE LAST COMPENSATION REVIEW T	OOK PLACE IN MAY
2024.	
FORM 990, PART VI, LINE 17, LIST OF STATES RECEIVING COPY	OF FORM 990:
AL, AR, CA, FL, GA, HI, IL, KS, KY, MD, MA, MN, MS, NH, NM, NJ, NY, NC, OR, P	A,RI,SC,TN,UT,VA
wv,wi	
FORM 990, PART VI, SECTION C, LINE 19:	
THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS, CONFLICT O	F INTEREST POLICY
AND FINANCIAL STATEMENTS AVAILABLE UPON REQUEST.	

SCHEDULE R (Form 990)

Part I

Related Organizations and Unrelated Partnerships

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

Attach to Form 990.

Department of the Treasury Internal Revenue Service

Name of the organization

POPULATION CONNECTION

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

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

2023

OMB No. 1545-0047

Open to Public Inspection

Employer identification number

Schedule R (Form 990) 2023

94-1703155

(a)	(b)	(c)	(d)	(e)		(f) Direct controlling		
Name, address, and EIN (if applicable) of disregarded entity	Primary activity	Primary activity Legal domicile (state or Total income End-of-ye foreign country)			ontrolling	9		
	4							
	1							
]							
	-							
	-							
Part II Identification of Related Tax-Exempt Organizations during the tax year.	ntions. Complete if the organization	answered "Yes" on Form 990), Part IV, line 34, I	pecause it had one	e or more related tax-exer	npt		
(a)	(b)	(c)	(d)	(e)	(f)	(g) 512(b)(13)	
Name, address, and EIN	Primary activity	Legal domicile (state or	Exempt Code	Public charity	Direct controlling	contr	rolled	
of related organization		foreign country)	section	status (if section 501(c)(3))	entity		ity?	
POPULATION CONNECTION ACTION FUND -				33.(5)(5)/		Yes	No	
46-3083014, 2120 L STREET NW, #500,	TO EDUCATE AND ADVOCATE				POPULATION			
WASHINGTON, DC 20037	PROGRESSIVE	DISTRICT OF COLUMBIA	501(C)(4)	N/A	CONNECTION	Х		
POPULATION CONNECTION ACTION FUND FUND PAC -					POPULATION			
61-1739943, 2120 L STREET NW, #500,	ORGANIZES SUPPORT FOR				CONNECTION ACTION			
WASHINGTON, DC 20037	POLITICAL CANDIDATES	DISTRICT OF COLUMBIA	527	N/A	FUND	X		
	4							
-	-							

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

		0 11 77 1	"\"	
David III	Identification of Related Organizations Taxable as a Partnership.	Complete if the organization answered	"Yes" on Form 990, Part IV, line 3	34, because it had one or more related
Part III	organizations treated as a partnership during the tax year.		, ,	•
	organizations treated as a partition input uning the tax year.			

(a) Name, address, and EIN of related organization	(b) Primary activity	Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations? Yes No		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	Gener mana partr	ral or laging ner?	(k) Percentage ownership
		country)		000000000000000000000000000000000000000			res	NO	111111111111111111111111111111111111111	163	NO	

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

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

Page 3

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

Not	Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.		_		Yes	No			
1	During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?								
а	a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity			1a	Х				
	Gift, grant, or capital contribution to related organization(s)								
	c Gift, grant, or capital contribution from related organization(s)			1c		X			
	d Loans or loan guarantees to or for related organization(s)			1d	Х				
	e Loans or loan guarantees by related organization(s)			1e		X			
f	f Dividends from related organization(s)			1f		X			
g Sale of assets to related organization(s)									
h	h Purchase of assets from related organization(s)			1h		X			
i	i Exchange of assets with related organization(s)			1i		X			
i	j Lease of facilities, equipment, or other assets to related organization(s)			1j		X			
·									
k Lease of facilities, equipment, or other assets from related organization(s)									
Performance of services or membership or fundraising solicitations for related organization(s)									
	m Performance of services or membership or fundraising solicitations by related organization(s)			1m		X			
	n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)			1n	Х				
	Sharing of paid employees with related organization(s)			10	Х				
p	p Reimbursement paid to related organization(s) for expenses			1p		Х			
	q Reimbursement paid by related organization(s) for expenses			1q	Х				
,	1								
r	r Other transfer of cash or property to related organization(s)			1r		Х			
	s Other transfer of cash or property from related organization(s)			1s		X			
	2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this li		·						
(a) Name of related organization (b) Transaction type (a-s) (c) Amount involved Method of determining amount involved type (a-s)									

(1) POPULATION CONNECTION ACTION FUND 3,338.FMV Α (2) POPULATION CONNECTION ACTION FUND 3,300,000.FMV В 353,352.FMV (3) POPULATION CONNECTION ACTION FUND D (4) POPULATION CONNECTION ACTION FUND 91,087.FMV Ν 609,251.FMV (5) POPULATION CONNECTION ACTION FUND 0 (6) POPULATION CONNECTION ACTION FUND 1,000,000.FMV 0

Page 4

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

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

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	Are all partners sec 501(c)(3) orgs.?	(g) Share of end-of-year assets	Dispretion allocat	opor- late tions?	General manage partner	(k) Percentage ownership
	_								000) 0000