Form **990**

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

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

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.

Open to Public Inspection

a Check Rapitable: Plane or organization INSTITUTE FOR MULTI-STAKEHOLDER INITIATIVE INTEGRITY Demployer identification number A Address change Number and street (or P.O. box If mails not delivered to street address) Poon/suite E Teepfore number B Wather and street (or P.O. box If mails not delivered to street address) Poon/suite E Teepfore number B Wather and street (or P.O. box If mails not delivered to street address) Poon/suite E Teepfore number B Wather and address of privice, country, and 2P or foreign postal code E Teepfore number E Teepfore number Chy Medial Ave STE 100, Pltisfield, MA 01201 H(a) is this agree nem to statisted? Yes No 2 Wetablet: Bol(plt) If an exceept attaux: Bol(plt) If an exceept at	Ā	For the	e 2021 calend	lar year, or tax year beginning 01/01/2021 and ending	12/31/	2021	
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☐ Final return/terminated City or town, state or province, country, and ZIP or foreign postal code G Gross meetipts 3 463,370 ☐ Application pending F Name and address of principal officer: Deval Desai H(a) Is this a group return for standordinte? Yes No ☐ Tax-exempt stature 901(9)(3) 901(9)(1) 4 (in part 10) H(b) Is this a group return for standordinte? Yes No ☐ Mended return F Name and address of principal officer: Deval 10 H(b) Is this a group return for standordinte? Yes No ☐ Tax-exempt stature 901(9)(3) 901(9)(1) 4 (in part 10) H(b) Is this a group return for standordinte? Yes No ☐ Briefly describe the organization? Form of organization Dotter > L Year of form and structure of businesses affects their. Impacts), facilitate learning in the field, and develop tools to evaluate initialitives from a human rights group respective. 2 Check this box >> ☐ If the organization discontinued its operations or disposed of more than 25% of its net assets. S 4 Number of independent voting members of the governing body (Part VI, line 1a). 			°		onvoute		
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Application pending FName and address of principal officer. Deval Desail Hig) here any perform accordinates included? If K ≥ Wendell Ave STE 100, Pittsfield, MA 01201 I Tax-exempt status: S 010(8) S 010(2) If (meet n.o.) 1 4947(a(1) or _ 527 If 'No,'' attach a list. See instructions. J Webatts: ► www.msi-integrity.org He() Group exemption number ► Form of organization Coroup as a state of legal domicle. MA Part I Summary If all all all state of legal domicle. MA I Briefly describe the organization's mission or most significant activities: Research the human rights impact and value of volunary initiatives that address business and human rights (including how the form and structure of businesses affects heir impacts), facilitate learning in the field, and develop tools to evaluate initiatives from a human rights perspective. 2 Check this box ► If the organization discontinued its operations or disposed of more than 25% of its net assets. 3 Number of voling members of the governing body (Part VI, line 1a) 4 4 4 Number of volunteers (estimate if necessary) 7a 5 44 5 Total numehated business taxable income from Form 990-T, Part I, line 11 7a 0 0 0 9 P						G Gross	receipts \$ 163.370
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1 Tax-exempt status: 2 0010(3) 301(e) () () () (0) 4947(a)(1) or 527 H*No.* attach a list. See instructions. 3 Wobsite: ► www.msi-integrity.org H(e) Group exemption number ► H(e) Group exemption number ► 1 Briefly describe the organization's mission or most significant activities: Research the human rights impact and value of undersy initiatives that address business and human rights (including how the form and structure of businesses affects their impacts), facilitate tearning in the field, and develop tools to evaluate initiatives from a human rights perspective. 2 Check this box ► if the organization discontinued its operations or disposed of more than 25% of its net assets. 3 Number of volumeers of the governing body (Part VI, line 1a)		Applicat	tion pending				
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16a Professional fundraising fees (Part IX, column (A), line 11e) 0 0 b Total fundraising expenses (Part IX, column (D), line 25) 58,956 17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e) 68,237 156,254 18 Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25) 306,567 519,543 19 Revenue less expenses. Subtract line 18 from line 12 141,954 -56,173 19 Revenue less expenses. Subtract line 18 from line 12 141,954 -56,173 20 Total assets (Part X, line 16) 482,197 458,562 21 Total liabilities (Part X, line 26) 1,143 33,681 22 Net assets or fund balances. Subtract line 21 from line 20 481,054 424,881 Part II Signature Block 10/28/2022 10/28/2022 Signature of officer Date Date	6	4 -	-			-	
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19 Revenue less expenses. Subtract line 18 from line 12 141,954 -56,173 5 5 6			-				
Beginning of Current Year End of Year 20 Total assets (Part X, line 16) 482,197 458,562 21 Total liabilities (Part X, line 26) 1,143 33,681 22 Net assets or fund balances. Subtract line 21 from line 20 481,054 424,881 Part II Signature Block 481,054 424,881 Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge. 10/28/2022 Sign		-				-	
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Sign Jules Giannini Date	Ur	ider pena	alties of perjury ot, and complete	I declare that I have examined this return, including accompanying schedules and stater e. Declaration of preparer (other than officer) is based on all information of which preparer	has any knowled	dge.	
Sign V Sign&ture of officer Date	_		Docus		10	0/28/20	022
	Si	gn		ire of officer	Date)	

Here	Tyler Giannini, Treasurer Type or print name and title			
Paid Preparer	Print/Type preparer's name Shelby Malvoso	Preparer's signature	Date 10/17/2022	Check 🖌 if self-employed P01968972
Use Only	Firm's name Shelby Malvoso CPA Firm's address State 360 Grand Ave 408, O	akland, CA 94610		s EIN ► e no. 510-473-6240
May the IRS	discuss this return with the preparer			🗹 Yes 🗌 No
For Paperwo	ork Reduction Act Notice, see the separ	ate instructions.	Cat. No. 11282Y	Form 990 (2021)

Form 99	0 (2021) Page 2
Part	III Statement of Program Service Accomplishments Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission:
	Research the human rights impact and value of voluntary initiatives that address business and human rights (including how the
	form and structure of businesses affects their impacts), facilitate learning in the field, and develop tools to evaluate initiatives from
	a human rights perspective.
2	Did the organization undertake any significant program services during the year which were not listed on the
L	prior Form 990 or 990-EZ?
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?
	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.
4a	(Code:) (Expenses \$ 367,152 including grants of \$ 0) (Revenue \$ 0)
та	MSI Integrity held multiple public webinars, published articles and blogs, and participated in virtual events and discussions to disseminate the findings of our 235-page report, published in 2020, on the effectiveness of voluntary business and human rights-related initiatives. The organization also engaged a variety of partners and conducted and compiled research into alternative corporate governance structures that are more human rights-centric.
4b	(Code:) (Expenses \$including grants of \$) (Revenue \$)
4c	(Code:) (Expenses \$ including grants of \$) (Revenue \$)
4d	Other program services (Describe on Schedule O.)
4e	(Expenses \$ 0 including grants of \$ 0) (Revenue \$ 0) Total program service expenses > 367,152

Part				-aye U
			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	~	
2 3	Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> ? See instructions	2	v	
	candidates for public office? If "Yes," complete Schedule C, Part I	3		~
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		~
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? <i>If "Yes," complete Schedule C, Part III</i> .	5		~
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</i>	6		~
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>	7		~
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>	8		~
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? <i>If "Yes," complete Schedule D, Part IV</i> .	9		~
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? <i>If "Yes," complete Schedule D, Part V</i> .	10		~
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	~	
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? <i>If "Yes," complete Schedule D, Part VII</i>	11b	•	~
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? <i>If "Yes," complete Schedule D, Part VIII</i>	11c		~
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? <i>If "Yes," complete Schedule D, Part IX</i>	11d		~
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		~
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)? <i>If "Yes," complete Schedule D, Part X</i>	11f		~
12a	Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i>	12a		~
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		~
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		~
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		~
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? <i>If "Yes," complete Schedule F, Parts I and IV.</i>			
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? <i>If "Yes," complete Schedule F, Parts II and IV</i>	14b		
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.	15		
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on	16		
18	Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I.</i> See instructions	17		<i>v</i>
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?	18		
00-	If "Yes," complete Schedule G, Part III	19		~ ~
20a b	Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>	20a 20b		~
21 21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	200		~
		<u></u> 21		-

Form 99	00 (2021)		F	Page 4
Part	V Checklist of Required Schedules (continued)			
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on		Yes	No
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		~
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i> .	23		~
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? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>	24a		~
b c	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24b 24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
2 5a	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		~
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? <i>If "Yes," complete Schedule L, Part I</i>	25b		~
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part II</i>	26		~
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 entity (including an employee thereof) or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>	27		~
28	Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV	28a		~
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		~
с	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		~
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		~
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30		~
31 32	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i> Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	31 32		~
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33		~
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		~
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		~
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2.	35b		
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		>
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? <i>If "Yes," complete Schedule R, Part VI</i>	37		~
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O	38	~	
Part	V Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V			
	· · · ·		Yes	No
-	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 1a 3			
b c	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	V	

Form 99	D (2021)		F	Page 5
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 4			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b	~	
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> . See instructions.			
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		~
	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		~
b	If "Yes," enter the name of the foreign country ►			
_	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).	_		
-	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		~
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		~
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
Va	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		~
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or	Ua		V
D D	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).	0.0		
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
	and services provided to the payor?	7a		~
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7c		~
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		~
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? .	7f		~
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	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?	•		
•		8		
9	Sponsoring organizations maintaining donor advised funds.	9a		
a b	Did the sponsoring organization make any taxable distributions under section 4966?	9a 9b		
10	Section 501(c)(7) organizations. Enter:	30		
a	Initiation fees and capital contributions included on Part VIII, line 12			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . 10b			
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders			
b	Gross income from other sources. (Do not net amounts due or paid to other sources			
	against amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
b	Note: See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
с	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		~
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			
	excess parachute payment(s) during the year?	15		~
	If "Yes," see the instructions and file Form 4720, Schedule N.			
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		~
	If "Yes," complete Form 4720, Schedule O.			
17	Section 501(c)(21) organizations. Did the trust, any disqualified person, or mine operator engage in any			
	activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953?	17		
	If "Yes," complete Form 6069.			

Form 99	90 (2021)		I	-age 6
Part	Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. Check if Schedule O contains a response or note to any line in this Part VI	See ir	nstruc	tions.
Secti	ion A. Governing Body and Management	<u> </u>		
0000			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 5 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.	-		
ь 2	Enter the number of voting members included on line 1a, above, who are independent . 1b 4 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		~
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person? .	3		~
4 5 6 7a	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? Did the organization become aware during the year of a significant diversion of the organization's assets? . Did the organization have members or stockholders?	4 5 6 7a		ン ン ン ン
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		r
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
a b 9	The governing body?	8a 8b 9	レ レ	~
Secti	on B. Policies (This Section B requests information about policies not required by the Internal Reven	-	ode.)	<u> </u>
			Yes	No
10a b	Did the organization have local chapters, branches, or affiliates?	10a 10b		~
11a b 12a b c	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe on Schedule O the process, if any, used by the organization to review this Form 990. Did the organization have a written conflict of interest policy? <i>If "No," go to line 13</i> Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? <i>If "Yes,"</i>	11a 12a 12b	ン ン ン	
13	describe on Schedule O how this was done. . </td <td>12c 13</td> <td><i>v</i> <i>v</i></td> <td></td>	12c 13	<i>v</i> <i>v</i>	
14 15	Did the organization have a written document retention and destruction policy? 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?	14		
a b	The organization's CEO, Executive Director, or top management official	15a 15b		
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		r
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b		
Secti	on C. Disclosure	·		
17 18	List the states with which a copy of this Form 990 is required to be filed ► CA, MA Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990- (3)s only) available for public inspection. Indicate how you made these available. Check all that apply.	T (sec	ction &	501(c)

- ✓ Own website ✓ Upon request Other (explain on Schedule O) Another's website
- 19 Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
- 20 State the name, address, and telephone number of the person who possesses the organization's books and records > Amelia Evans, (617)949-0585

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

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

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

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

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

• List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.

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

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

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

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

				(0	C)					
(A)	(B)				ition			(D)	(E)	(F)
Name and title	Average					e than o is both		Reportable	Reportable	Estimated amount
	hours					or/trust		compensation	compensation	of other
	per week (list any hours for related organizations below dotted line)	Individua or directo	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/ 1099-MISC/ 1099-NEC)	from related organizations (W-2/ 1099-MISC/ 1099-NEC)	compensation from the organization and related organizations
Amelia Evans	40.00	ļ								
Executive Director	0.00	~		~				76,344	0	15,108
Deval Desai	1.00	-								
Board Chair	0.00	~		~				0	0	0
Tyler Giannini	1.00	-								
Treasuer	0.00	~		~				0	0	0
Fola Adeleke	1.00	-								
Clerk	0.00	~		~				0	0	0
Bonita Meyersfeld	1.00	ļ								
Board Member	0.00	~						0	0	0
		-								
		-								
	•	•	·	·	•	•	•	-		Court 000 (0001)

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Part	VII Section A. Officers, Directors, 1	rustees,	Key I	Emj			s, an	d F	lighest Compe	nsated Emplo	oyees (contir	nued,
	(A) Name and title	(B) Average hours per week	box,	unles	Pos neck ss pe	rson	e than o is both or/trus	n an	(D) Reportable compensation from the	(E) Reportable compensation from related	0	(F) ated am of other opensati	
		(list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former		organizations (W-2, 1099-MISC/ 1099-NEC)	í fi orgar	om the nization organiz	and
			-										
			-										
1b	Subtotal								76,344	0		1	5,108
c d							•		76,344	0		1	5,108
2	Total number of individuals (including but reportable compensation from the organi		d to th	iose	e list	ed	above	e) w	ho received more 0	e than \$100,000) of	_	
3	Did the organization list any former of employee on line 1a? If "Yes," complete s								loyee, or highes		3	Yes	No V
4	For any individual listed on line 1a, is the organization and related organizations individual .	sum of re	portal	ble	con	npei	nsatic	n a	nd other compe	nsation from the	e 1		
5	Did any person listed on line 1a receive of for services rendered to the organization?									tion or individua	4 1 5		~ ~
Secti	on B. Independent Contractors		-										
1	Complete this table for your five high compensation from the organization. Rep												
	(A) Name and business add	ress							(B) Description of serv	vices	(C) Compen		
None													
2	Total number of independent contractor			+	<u></u>	inait	ad to	. +6	and listed show				

received more that	n \$100,000 of	^c compensation	from the organization >

0

0

	90 (202 ⁻						Page
Part	VIII	Statement of Revenue Check if Schedule O contains a response or note t	to onvili	no in thio Do	r t \////		г
				(A) Fotal revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue exclude from tax under sections 512–51
ų, s	1a	Federated campaigns 1a	0				
and Other Similar Amounts	b	Membership dues	0				
	с	Fundraising events 1c	0				
r A	d	Related organizations 1d	0				
nila			s,452				
Sin	f	All other contributions, gifts, grants,					
Jer			,710				
0 T	g	Noncash contributions included in					
and	_	lines 1a–1f	0				
שכ	h	Total. Add lines 1a-1f		463,162			
D	•	Business Co	ode				
2	2a						
ani	b						
Program Service Revenue	С С						
	d						
Ő	e f	All other program service revenue					
	g	Total. Add lines 2a–2f .		0			
	3	Investment income (including dividends, interest,					
		other similar amounts)	•	208	0	0	
	4	Income from investment of tax-exempt bond proceeds	s 🕨 📃	0	0	0	
	5	Royalties		0	0	0	
		(i) Real (ii) Persona	al				
	6a	Gross rents 6a					
	b	Less: rental expenses 6b					
	С	Rental income or (loss) 6c 0	0				
	d	Net rental income or (loss)					
	7a	Gross amount from (i) Securities (ii) Other	·				
		sales of assets					
	_	other than inventory 7a					
ue	b	Less: cost or other basis					
/en		and sales expenses . 7b	_				
Other Revei		Gain or (loss) 7c 0	0				
er		Net gain or (loss)	•				
Oth	8a	Gross income from fundraising					
•		events (not including \$0 of contributions reported on line					
		1c). See Part IV, line 18 8a					
	b	Less: direct expenses 8b	_				
		Net income or (loss) from fundraising events	•				
		Gross income from gaming					
		activities. See Part IV, line 19 . 9a					
	b	Less: direct expenses 9b					
		Net income or (loss) from gaming activities					
	10a	Gross sales of inventory, less					
		returns and allowances 10a					
		Less: cost of goods sold 10b					
	С	Net income or (loss) from sales of inventory					
Sh		Business Co	ode				
ne	11a						
Revenue	b						
Rev	С С						
Revenue		All other revenue					
	е			0			

Sectic	n 501(c)(3) and 501(c)(4) organizations must comple	ete all columns. All	other organizations	must complete colun	nn (A).
	Check if Schedule O contains a response				
	t include amounts reported on lines 6b, 7b, , and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 .				
2	Grants and other assistance to domestic individuals. See Part IV, line 22				
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees	98,876	59,326	19,775	19,77
6	Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) .				
7 8	Other salaries and wages Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	225,181	152,341	43,654	29,18
9	Other employee benefits	16,862	11,716	3,372	1,774
10	Payroll taxes	22,370	14,706	4,354	3,31
11 а	Fees for services (nonemployees): Management				
b					
C		10,455		10,455	
d	Lobbying	0			
e f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Schedule O.)	95,153	93,825	1,328	
12	Advertising and promotion				
13	Office expenses	5,246	2,648	2,003	59
14	Information technology	34,017	28,331	2,353	3,33
15	Royalties				
16 17	Occupancy	5,251	3,413	1,050	78
18	Travel				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization .	1,301	846	260	19
23		4,831		4,831	
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.)				
a b					
c d					
е	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	519,543	367,152	93,435	58,95
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ▶ ☐ if following SOP 98-2 (ASC 958-720)				

PartX Balance Sheet Check if Schedule O contains a response or note to any line in this Part X (h) (b) Image: Control of the second of the sec		1 990 (20				Page II
(A) Beginning of year 1 Cash—non-interest-bearing 457,899 1 450,292 2 Savings and temporary cash investments 3 450,292 2 3 Piedges and grants receivable, net 3 4 4 Accounts receivable, net 4 4 5 Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons. 6 6 Loans and other receivables from other disqualified persons (as defined under section 4958(c)(3)(B) 6 7 Notes and bars receivable, net 7 8 Inventories for sale or use 8 9 Prepaid expenses and deferred charges 22,500 9 6,275 10a 8,744 10b 6,749 1,995 11 11 12 11 Investments – other securities. See Part IV, line 11 12 13 14 14 15 Other assets. See Part IV, line 11 13 14 15 16 458,562 11 Investments – other securities. See Part IV, line 11 12	P	art X		+ V		
2 Savings and temporary cash investments 3 3 Pledges and grants receivable, net 3 4 Accounts receivables from any current or former officer, director, trustes, key amployee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons 5 6 Loans and other receivables from any current or former officer, director, trustes, key amployee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons 5 6 Loans and other receivables from other disqualified persons (as defined under section 4958(0)(3)(B) 6 7 Notes and loans receivable, net 7 8 Inventories for sale or use 22,500 9 Prepaid expenses and deferred charges 22,500 10a 8,744 2 11 Investmentspublicly traded securities 11 12 Investmentspublicly traded securities 11 13 Investmentspublicly traded securities 11 14 13 144 15 Other assets. See Part IV, line 11 13 14 14 14 15 Other assets. See Part IV, line 13 482,197 16			Check in Schedule O contains a response of note to any line in this Pai	(A)		(B)
2 Savings and temporary cash investments 2 3 Pledges and grants receivable, net 3 4 Accounts receivables from any current or former officer, director, trustes, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons 5 6 Loans and other receivables from any current or former officer, director, trustes, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons 5 6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1), and persons described in section 4958(c)(3)(B) 6 7 Notes and loans receivable, net 7 8 Inventories for sale or use 2 9 Prepaid expenses and deferred charges 22,500 10a 8,744 10b b Less: accumulated depreciation 10a 11 Investimentspublicly traded securities 11 12 Investimentspublicly traded securities 11 13 Investimentsgraphice Rep Part IV, line 11 13 14 15 14 15 16 20 16 Total assets. Add lines 1 through 15 (must equal line 3) <td></td> <td>1</td> <td>Cash-non-interest-bearing</td> <td>457,899</td> <td>1</td> <td>450,292</td>		1	Cash-non-interest-bearing	457,899	1	450,292
3 Pledges and grants receivable, net 3 4 Accounts receivables, from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons 5 6 Loans and other receivables from other disqualified persons (as defined under section 4958(0(1))), and persons described in section 4958(c)(3(B)) 6 7 Notes and loans receivable, net 7 9 Prepaid expenses and deferred charges 22,500 10a 8,744 9 Leass cancumulated depreciation 10a 11 Investments—publicly traded securities 11 12 Investments—other securities. See Part IV, line 11 12 13 Investments—other securities. See Part IV, line 11 13 14 Intangible assets. 114 15 Total assets. Add lines 1 through 15 (must equal line 33) 442,197 16 16 Total assets. See Part IV, line 11 13 14 18 Grants payable 114 13 3,681 19 Daterred revenue 19 24 20 21 20 Accounts payable to unrelated third parties <		2			2	
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19 Deferred revenue 19 20 Tax-exempt bond liabilities 20 21 Escrow or custodial account liability. Complete Part IV of Schedule D 21 22 Loans and other payables to any current or former officer, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons 22 23 Secured mortgages and notes payable to unrelated third parties 23 24 Unsecured notes and loans payable to unrelated third parties 24 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17–24). Complete Part X of Schedule D 25 26 Total liabilities. Add lines 17 through 25 1,143 26 33,681 0rganizations that follow FASB ASC 958, check here ▶ 300,000 28 31,855 27 Net assets with donor restrictions 181,054 27 393,026 28 Net assets with do not follow FASB ASC 958, check here ▶ □ 300,000 28 31,855 30 Paid-in or capital surplus, or land, building, or equipment fund 30 30 31 31 Total net assets or fund balances		17		1,143	17	33,681
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	ž				33	458,562

rm 990 (202	21)	

Form 9	90 (2021)			Pa	ge 12
Par	t XI Reconciliation of Net Assets			1	
	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			3,370
2	Total expenses (must equal Part IX, column (A), line 25)	2		51	9,543
3	Revenue less expenses. Subtract line 2 from line 1	3		-5	6,173
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A)) .	4		48	1,054
5	Net unrealized gains (losses) on investments	5			0
6	Donated services and use of facilities	6			0
7	Investment expenses	7			0
8	Prior period adjustments	8			0
9	Other changes in net assets or fund balances (explain on Schedule O)	9			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		42	4,881
Part	XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990: Cash Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," ex Schedule O.	kplain o	n		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were cor		or 2a	~	

reviewed on a sepa	rate basis, consolidated b	oasis, or both:	

 Separate basis 	Consolidated basis	Both consolidated and separate basis
Mare the ergenization	na's financial statements	audited by an independent appauntent?

b	Were the organization's financial statements audited by an independent accountant?
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a
	separate basis, consolidated basis, or both:

```
Consolidated basis Both consolidated and separate basis
Separate basis
```

If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of С the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits .

Form **990** (2021)

2b

2c

3a

3b

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		ULE / 0 or 99					harity Status and Public Support					021
(1 0111	100	0 01 00	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Complete	if the orgar		s a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.					
		t of the T venue Se			► Go		ch to Form 990 or Forn orm990 for instructions a		est inform	ation		to Public
			nization		P GU	to www.iis.gov/rt				Emplover identification		pection
		-		I-STAKEH		NITIATIVE INTEG	RITY				453455	
Pa							l organizations mus	t comple	ete this p			
						- ,	s: (For lines 1 through	-	•	,		
1	-			•			on of churches descri			,		
2		A sch	ool des	scribed in	section	170(b)(1)(A)(ii).	(Attach Schedule E (F	orm 990)	.)			
3			•	•			ganization described i					
4		hospit	tal's na	ime, city, a	and state	e:	onjunction with a hosp					
5		sectio	on 170	(b)(1)(A)(iv). (Comp	olete Part II.)	college or university		-		ntal unit	described in
6					•	•	mental unit described					
7		descr	ibed in	section 1	70(b)(1)	(A)(vi). (Complet	,	-	i a goveri	nmental unit or fro	m the g	eneral public
8			-				(1)(A)(vi). (Complete	-				
9			versity				d in section 170(b)(1) iculture (see instruction					
10		receip	ots fron	n activities	related	to its exempt fu	e than 33 ¹ /3% of its sunctions, subject to ce	rtain exce	eptions: a	and (2) no more tha	n 331/39	6 of its
							related business taxal 75. See section 509(a				n busine	esses
11		•	-	•			sively to test for public		•	,		
12		An org	ganizati	ion organiz	zed and o	operated exclusi	vely for the benefit of,	to perfor	m the fun	ctions of, or to carr	y out th	e purposes of
							escribed in section 5					
					•		the type of supporting			•		•
а		th	e supp	orted orga	nization	(s) the power to	l, supervised, or contr regularly appoint or e ete Part IV, Sections	elect a ma	jority of t			
b		_				-	ed or controlled in co			upported organiza	tion(s) I	ov having
		co	ontrol o	r managei	ment of t	he supporting o	rganization vested in V, Sections A and C .	the same				
с							ting organization oper ns). You must comp				nally inte	egrated with,
d		th	at is no	t function	ally integ	rated. The orga	pporting organization nization generally mu	st satisfy	a distribu	ition requirement a		
		re	quirem	ent (see ir	structior	ns). You must c	omplete Part IV, Sec	ctions A a	and D, ar	nd Part V.		
e		fu	nctiona	ally integra	ted, or T	ype III non-func	a written determination to a written determination to a written and the set of the set o				be II, Ty	pe III
f						- <u>J</u>						
g				•			oorted organization(s).	1				
	(I) f	Name of	r support	ed organizati	on	(ii) EIN	(iii) Type of organization (described on lines 1–10 above (see instructions))	listed in you	rganization ur governing ment?	(v) Amount of monetary support (see instructions)	othe) Amount of r support (see structions)
								Yes	No			
(A)												
(B)												
(C)												
(D)												

(E) Total

Page 2

Schedule A (Form 990 or 990-EZ) 2021 Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) Part II (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to gualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.) Section A. Public Support Calendar year (or fiscal year beginning in) ► (a) 2017 **(b)** 2018 (c) 2019 (d) 2020 (e) 2021 (f) Total Gifts, grants, contributions, and 1 membership fees received. (Do not include any "unusual grants.") . . 966,889 17,582 150,000 448,408 463,162 2,046,041 Tax revenues levied for the 2 organization's benefit and either paid to or expended on its behalf 0 0 0 0 0 0 The value of services or facilities 3 furnished by a governmental unit to the organization without charge 0 0 0 0 0 0 Total. Add lines 1 through 3. 4 966,889 17,582 150,000 448,408 463,162 2,046,041 5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) 1,537,208 **Public support.** Subtract line 5 from line 4 6 508,833 Section B. Total Support Calendar year (or fiscal year beginning in) ► (a) 2017 (b) 2018 (c) 2019 (d) 2020 (e) 2021 (f) Total 7 Amounts from line 4 966,889 150,000 463,162 17,582 448,408 2,046,041 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources 30 137 208 6 113 494 Net income from unrelated business 9 activities, whether or not the business is regularly carried on 0 0 0 0 0 0 10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) 0 0 0 0 0 0 **Total support.** Add lines 7 through 10 11 2,046,535 Gross receipts from related activities, etc. (see instructions) 12 12 400 13 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) Section C. Computation of Public Support Percentage 14 Public support percentage for 2021 (line 6, column (f), divided by line 11, column (f)) 14 24.86 % 15 15 19.16 % 331/3% support test-2021. If the organization did not check the box on line 13, and line 14 is 331/3% or more, check this 16a box and **stop here.** The organization qualifies as a publicly supported organization 331/3% support test-2020. If the organization did not check a box on line 13 or 16a, and line 15 is 331/3% or more, check b 17a 10%-facts-and-circumstances test-2021. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported 10%-facts-and-circumstances test-2020. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line b 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported

Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see 18

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.)

Secti	on A. Public Support						
Calen	dar year (or fiscal year beginning in) 🕨	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
1	Gifts, grants, contributions, and membership fees						
	received. (Do not include any "unusual grants.")						
2	Gross receipts from admissions, merchandise sold or services performed, or facilities						
	furnished in any activity that is related to the						
	organization's tax-exempt purpose						
3	Gross receipts from activities that are not an						
	unrelated trade or business under section 513						
4	Tax revenues levied for the						
	organization's benefit and either paid to						
	or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to the						
	organization without charge						
6	Total. Add lines 1 through 5.						
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons .						
b	Amounts included on lines 2 and 3						
	received from other than disqualified						
	persons that exceed the greater of \$5,000						
	or 1% of the amount on line 13 for the year						
С	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from						
	line 6.)						
	on B. Total Support						
	dar year (or fiscal year beginning in) 🕨	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
9	Amounts from line 6						
10a	Gross income from interest, dividends, payments received on securities loans, rents,						
	royalties, and income from similar sources .						
b	Unrelated business taxable income (less						
	section 511 taxes) from businesses						
	acquired after June 30, 1975						
	Add lines 10a and 10b						
11	Net income from unrelated business						
	activities not included on line 10b, whether or not the business is regularly carried on						
10							
12	Other income. Do not include gain or loss from the sale of capital assets						
	(Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11,						
	and 12.)						
14	First 5 years. If the Form 990 is for the	organization'	s first, second	, third, fourth,	or fifth tax ye	ar as a secti	on 501(c)(3)
	organization, check this box and stop her	е					🕨 🗌
Secti	on C. Computation of Public Suppor	t Percentag	е				
15	Public support percentage for 2021 (line 8			, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		15	%
16	Public support percentage from 2020 Sch					16	%
	on D. Computation of Investment Inc						
17	Investment income percentage for 2021 (I			-			%
18 10a	Investment income percentage from 2020 33 ¹ / ₃ % support tests – 2021. If the organi						% and line
19a	17 is not more than $33^{1}/_{3}$ %, check this box a						
b	33 ¹ / ₃ % support tests – 2020. If the organize	-	-	-		-	
U U	line 18 is not more than $33^{1/3}$ %, check this b						
20	Private foundation. If the organization did	-	-	-			
				,,, .			90 or 990-EZ) 2021

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

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

Yes No 1 2 3a 3b 3c 4a 4b 4c 5a 5b 5c 6 7 8 9a 9b 9c 10a 10b

Schedule A (F	Form 990 or 990-EZ) 2021	Page
Part IV	Supporting Organizations (continued)	
		Yes No

- 11 Has the organization accepted a gift or contribution from any of the following persons? A person who directly or indirectly controls, either alone or together with persons described on lines 11b and а
- 11c below, the governing body of a supported organization?
- **b** A family member of a person described on line 11a above?
- c 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.

Section B. Type I Supporting Organizations

- 1 Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.
- 2 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.

Section C. Type II Supporting Organizations

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).

Section D. All Type III Supporting Organizations

Yes No 1 Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided? 1 2 Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s). 2 3 By reason of the relationship described on line 2, above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.

Section E. Type III Functionally Integrated Supporting Organizations

- Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions). 1
- а The organization satisfied the Activities Test. Complete **line 2** below.
- The organization is the parent of each of its supported organizations. *Complete line 3 below.* b
- С The organization supported a governmental entity. Describe in **Part VI** how you supported a governmental entity (see instructions).
- 2 Activities Test. Answer lines 2a and 2b below.
- Did substantially all of the organization's activities during the tax year directly further the exempt purposes of а 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.
- **b** Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.
- Parent of Supported Organizations. Answer lines 3a and 3b below.
- a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? If "Yes" or "No," provide details in Part VI.
- Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each b of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.

Yes No

1

3

2a

2b

3a

3b

Yes No

11a

11b

11c

Page **6**

Part V	Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations						
1 🗌 C	1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI). See						
	instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E.						

Sect	ion A—Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or collection			
	of gross income or for management, conservation, or maintenance of			
	property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect	ion B—Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
С	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other factors (explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 0.035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C-Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6		
7	Check here if the current year is the organization's first as a non-function	- 1	ate grated Type III eyeppe	uting organization

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

-	e A (Form 990 or 990-EZ) 2021			Page 7
Part	V Type III Non-Functionally Integrated 509(a)(3	8) Supporting Organi	zations (continued)	
Secti	on D—Distributions			Current Year
1	Amounts paid to supported organizations to accomplish e	exempt purposes	1	
2	Amounts paid to perform activity that directly furthers exe	empt purposes of suppo	orted	
	organizations, in excess of income from activity		2	
3	Administrative expenses paid to accomplish exempt purp	oses of supported orga	nizations 3	
4	Amounts paid to acquire exempt-use assets		4	
5	Qualified set-aside amounts (prior IRS approval required-	–provide details in Part	<i>VI</i>) 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 whic (provide details in Part VI). See instructions.	h the organization is res	ponsive	
9	Distributable amount for 2021 from Section C, line 6		9	
10	Line 8 amount divided by line 9 amount		10)
Sect	on E—Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2021	(iii) Distributable Amount for 2021
1	Distributable amount for 2021 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2021 (reasonable cause required— <i>explain in Part VI</i>). See instructions.			
3	Excess distributions carryover, if any, to 2021			
	From 2016			
	From 2017			
	From 2018			
	From 2019			
	From 2020			
f	Total of lines 3a through 3e			
g	Applied to underdistributions of prior years			
h	Applied to 2021 distributable amount			
i	Carryover from 2016 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4	Distributions for 2021 from Section D, line 7: \$			
а	Applied to underdistributions of prior years			
b	Applied to 2021 distributable amount			
С	Remainder. Subtract lines 4a and 4b from line 4.			
5	Remaining underdistributions for years prior to 2021, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, <i>explain in Part VI.</i> See instructions.			
6	Remaining underdistributions for 2021. Subtract lines 3h and 4b from line 1. For result greater than zero, <i>explain in Part VI</i> . See instructions.			
7	Excess distributions carryover to 2022. Add lines 3j and 4c.			
8	Breakdown of line 7:			
а	Excess from 2017			
b	Excess from 2018			
С	Excess from 2019			
d	Excess from 2020			
е	Excess from 2021			

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

Schedule A, Part VI, Statement 1

Form: Schedule A (2021)

Page: 2

INSTITUTE FOR MULTI-STAKEHOLDER INITIATIVE INTEGRITY

EIN: 46-1453455

Part II, Section C, Line 17

Facts And Circumstances Test Explanations

Facts And Circumstances Test

It is our conclusion that MSI Integrity passes the 10% Facts and Circumstance Test based on the following: 170(A)-9(F)(3)(ii)- Attraction of public support- MSI Integrity's mission is to research the human rights impact and value of voluntary initiatives in business that address business and human rights, facilitate learning in the field, and develop tools to evaluate initiatives from a human rights perspective. These initiatives, such as Fairtrade and Roundtable on Sustainable Palm Oil certifications, are relied on by the general public. We provide free assessment tools that are available for the public to use to measure their effectiveness from a human rights perspective and hold free public events such as webinars and online discussions. We are also preparing research and materials about business models, such as worker cooperatives and steward ownership, that can lead to more economic justice for the wider workforce and public. These activities have the potential to attract support from governments and public charities, and we have a portal on our website to encourage direct public donations. 170(A)-9(F)(3)(iii)(A).(B)- Percentage of financial support and Sources of financial support-MSI Integrity has been fortunate to develop relationships with two large, national, private foundations that provide continuous support to grow the organization in size and capacity. Both ended their funding for us this year, which will result in changes in funding sources in the future; our hope is to attract more public funding in their place. These two professional foundations each have over 100 staff members, and the foundations both have a significant public presence. We worked with multiple different program officers at these foundations; they were not the result of personal or private relationships with individuals nor were they family-managed foundations. These grants were multi-year in nature and in accordance with GAAP recorded in full when awarded. No employee or board member of MSI Integrity has business or family relations with either of these two foundations, or any of their staff. In addition to the last of the large multi-year grants received from the two foundations, this year we received smaller project-based grants from two other private foundations, both specifically to generate research and materials for different sectors of the public (ethical investors and communities/workers, respectively). This year, for the second year running, our proportion of public funding again increased from previous years and was 24.863%. We are committed to increasing it in future years MSI Integrity's fundraising, historically, has been conducted primarily by direct, personal contact with potential donors, carried out under the supervision of officers and directors of MSI Integrity. MSI Integrity is actively working to diversify its funding sources to build up wider public support. 170(A)-9(F)(3)(iii)(C) Representative governing body- MSI Integrity is governed by a board of directors comprised of five public-interest lawyers and academics who have special knowledge and expertise about human rights and global governance. It does not have any representation from the foundations or donors who support it. We are exploring alternative and additional board members who have special knowledge or expertise in the field of the organization. 170(A)-9(F)(3)(iii)(D) Availability of public facilities or services; public participation in programs or policies.- MSI Integrity publishes scholarly studies and tools that are widely available and used by colleges, universities, and members of the general public. In 2018, the organization developed a global research network of MSIs to help facilitate dialogue and critical reflection on MSIs among researchers and practitioners. In 2020, MSI Integrity published a report and digital tool to help academics, economists, lawyers, activists, and the public understand MSIs and their impact on business and human rights. In 2021, the organization translated the report into Spanish for wider public use. In addition, the staff of MSI Integrity regularly participated in dialogues, conferences and research workshops to share research and good practices. Where possible, all these events, discussions and dialogues are recorded and made publicly available on our website.

SCHEDULE D			al Financial Statements			OMB No. 1545-0047
(Form 990)		► Complete if the org	► 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.			
	ent of the Treasury	▶	Attach to Form 990.			Open to Public
Internal Revenue Service Go to www.irs.gov/Form990 for instructions and the latest inform			90 for instructions and the latest informa		vor ide	Inspection
	Ime of the organization Employer ider ISTITUTE FOR MULTI-STAKEHOLDER INITIATIVE INTEGRITY				46-1453455	
Par			sed Funds or Other Similar Fund	s or A	1000	
I UI		ete if the organization answered "			1000	
			(a) Donor advised funds		(b) Fu	unds and other accounts
1	Total number	at end of year				
2		ue of contributions to (during year) .				
3	Aggregate val	ue of grants from (during year)				
4		ue at end of year				
5	•		advisors in writing that the assets hel			
6	Did the organi only for charit	zation inform all grantees, donors, ar able purposes and not for the benefi	organization's exclusive legal control? ad donor advisors in writing that grant t of the donor or donor advisor, or for	funds any c	can other	be used purpose
Par	Conse	rvation Easements.				
	Comple	ete if the organization answered "	Yes" on Form 990, Part IV, line 7.			
1	Preservation Protection	conservation easements held by the c of land for public use (for example, recreat of natural habitat on of open space	ation or education)			lly important land area historic structure
2	Complete lines		d a qualified conservation contribution	in the		
-				-		Held at the End of the Tax Year
a b		of conservation easements	· · · · · · · · · · · · · · · · · · ·		2a 2b	
c	-	-	storic structure included in (a)		20 2c	
d						
3	Number of contax year ►	nservation easements modified, trans	ferred, released, extinguished, or term	inated	l by t	he organization during the
4 5	Does the org		vation easement is located ► arding the periodic monitoring, inspe ements it holds?		, han	idling of · · D Yes D No
6	Staff and volun	teer hours devoted to monitoring, inspec	ting, handling of violations, and enforcing	conse	rvatio	n easements during the year
7	Amount of exp ► \$	enses incurred in monitoring, inspecting	g, handling of violations, and enforcing c	onserv	ation/	easements during the year
8	and section 17	′0(h)(4)(B)(ii)?	2(d) above satisfy the requirements of s			· · DYes DNo
9	balance sheet		onservation easements in its revenue a the footnote to the organization's finar nts.			
Part	•	izations Maintaining Collections ete if the organization answered "	of Art, Historical Treasures, or C Yes" on Form 990, Part IV, line 8.	Other	Sim	ilar Assets.
1a	If the organiza of art, historic service, provid	tion elected, as permitted under FAS cal treasures, or other similar assets de in Part XIII the text of the footnote t	B ASC 958, not to report in its revenue held for public exhibition, education, o its financial statements that describe	or res s thes	searc e iter	h in furtherance of public ns.
b	art, historical t provide the fol	reasures, or other similar assets held llowing amounts relating to these item		earch i	in fur	therance of public service,
2	If the organiza	ation received or held works of art, unts required to be reported under FA	historical treasures, or other similar a SB ASC 958 relating to these items:	issets	for f	inancial gain, provide the
a b	Revenue inclu Assets include	ded on Form 990, Part VIII, line 1 .		• •	.)	► \$ ► \$

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Schedu	le D (Form 990) 2021							Page 2
Par	III Organizations Maintaining	Collection	s of Art, Hi	storical '	Treasures	, or Otl	ner Similar Ass	ets (continued)
3	Using the organization's acquisition, collection items (check all that apply):		nd other rec	ords, cheo	ck any of th	e follow	ing that make sig	gnificant use of its
а	Public exhibition		d	🗌 Loan	or exchang	e proara	am	
b	Scholarly research		e	Othe				
≂ C	Preservation for future generations	5	Ū					
4	Provide a description of the organiza		ons and exp	lain how t	they further	the org	anization's exem	pt purpose in Parl
	XIII.							
5	During the year, did the organization assets to be sold to raise funds rathe							□ Yes □ No
Par	IV Escrow and Custodial Arra	angements.						
	Complete if the organizatior 990, Part X, line 21.	n answered '	'Yes" on Fo	orm 990,	Part IV, line	e 9, or i	reported an amo	ount on Form
1a	Is the organization an agent, trustee included on Form 990, Part X?							: □ Yes □ No
Ь	If "Yes," explain the arrangement in P							
D			Simplete the	unowing t	aule.		٨٣	nount
с	Beginning balance					1c		lount
d	Additions during the year					1d		
e	Distributions during the year					1e		
f	Ending balance					16 1f		
2a	Did the organization include an amou						account liability?	
	If "Yes," explain the arrangement in P						-	
	t V Endowment Funds.			5/1prairiatio		provide		· · · <u> </u>
	Complete if the organization	n answered '	'Yes" on Fo	rm 990,	Part IV, line	e 10.		
		(a) Current ye		rior year	(c) Two yea		(d) Three years back	(e) Four years back
1a	Beginning of year balance							
b	Contributions							
c	Net investment earnings, gains, and							
d	Grants or scholarships							
e	Other expenditures for facilities and							
	programs							
f	Administrative expenses							
g	End of year balance							
2	Provide the estimated percentage of	the current ve	ar end balar	ce (line 10	d. column (a	a)) held a	IS:	
а	Board designated or quasi-endowme	•	%) , (-	,,, , , , , , , , , , , , , , , , , , ,		
b	Permanent endowment ►	%						
C	Term endowment)						
	The percentages on lines 2a, 2b, and	2c should eq	ual 100%.					
3a	Are there endowment funds not in th			nization th	at are held	and adr	ninistered for the)
	organization by:		-					Yes No
	(i) Unrelated organizations							3a(i)
	.,							3a(ii)
b	If "Yes" on line 3a(ii), are the related of							3b
4	Describe in Part XIII the intended use	-						
Par								
	Complete if the organization		'Yes" on Fo	rm 990,	Part IV, line	e 11a. S	See Form 990, F	Part X, line 10.
	Description of property		st or other basis ivestment)		or other basis other)		ccumulated preciation	(d) Book value
- 1a	Land)	0			0
b	Buildings			2	0		0	0
c	Leasehold improvements			2	0		0	0
d	Equipment	.		2	8,744		6,749	1,995
e	Other	.		2	0,744		0	0
	Add lines 1a through 1e. (Column (d) r			-	-	Dc.).	-	1,995
			,	,	, ,,	- ,		1,775

Schedule D (Form 990) 2021

Schedule D (For	rm 990) 2021		Page 3
Part VII	Investments-Other Securities.		
	Complete if the organization answered "Yes" on Form 990, Part IV	/, line 11b. See F	Form 990, Part X, line 12.
	(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial	derivatives		
• •	eld equity interests		
(2) Other			
(A)			
(B)			
(C)			
(D)			
(F)			
(F)			
(C)			
<u>(/</u> (H)			
``	nn (b) must equal Form 990, Part X, col. (B) line 12.) . ►		
Part VIII	Investments – Program Related.		
	Complete if the organization answered "Yes" on Form 990, Part IV	/ line 11c See F	orm 990 Part X line 13
	(a) Description of investment	(b) Book value	(c) Method of valuation:
	(a) Description of investment	(b) BOOK value	Cost or end-of-year market value
(1)			
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9) Tatal (Calu			
Part IX	mn (b) must equal Form 990, Part X, col. (B) line 13.) .		
	Complete if the organization answered "Yes" on Form 990, Part IV	/ line 11d See E	Form 000 Part V line 15
	(a) Description	v, line i lu. See i	(b) Book value
(1)	(a) Description		(b) Book value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9) Tatal (Oaler			
	mn (b) must equal Form 990, Part X, col. (B) line 15.)		
Part X	Other Liabilities.	/ 1	
	Complete if the organization answered "Yes" on Form 990, Part IV	v, line the or this	. See Form 990, Part X,
	line 25.		
<u>1.</u>	(a) Description of liability		(b) Book value
(1) Federal in	come taxes		
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
	mn (b) must equal Form 990, Part X, col. (B) line 25.)	<u></u> .	
2. Liability for	uncertain tax positions. In Part XIII, provide the text of the footnote to the organi	zation's financial sta	tements 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) 2021

Pag	е	4

Schedu	e D (Form 990) 2021				Page 4
Part	-			Retu	rn.
	Complete if the organization answered "Yes" on Form 990,				
1	Total revenue, gains, and other support per audited financial statements	• •		1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		1		
а	Net unrealized gains (losses) on investments	2a			
b	Donated services and use of facilities	2b			
С	Recoveries of prior year grants				
d	Other (Describe in Part XIII.)				
е	Add lines 2a through 2d			2e	
3	Subtract line 2e from line 1	· ·		3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b				
b	Other (Describe in Part XIII.)				
С	Add lines 4a and 4b			4c	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line			5	
Part				er Re	turn.
	Complete if the organization answered "Yes" on Form 990,				
1	Total expenses and losses per audited financial statements			1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		1		
а	Donated services and use of facilities	2a			
b	Prior year adjustments				
С	Other losses				
d	Other (Describe in Part XIII.)	2d			
е	Add lines 2a through 2d			2e	
3	Subtract line 2e from line 1	· ·		3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)	4b			
С	Add lines 4a and 4b			4c	
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, lin	1e 18.)		5	
	XIII Supplemental Information.				
	e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a ar				
2; Par	t XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part	t to pro	ovide any additional in	forma	tion.

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SCHEDULE O	Supplemental Information to Form 990 or 990-EZ	OMB No. 1545-0047
(Form 990 or 990-EZ)	° 20 21	
Department of the Treasury Internal Revenue Service	 Attach to Form 990 or Form 990-EZ. Go to www.irs.gov/Form990 for the latest information. 	Open to Public Inspection
Name of the organization		Employer identification number
INSTITUTE FOR MULTI-S	STAKEHOLDER INITIATIVE INTEGRITY	46-1453455
	n B, Line 11b - The 990 was prepared by MSI Integrity's external accountant in co was reviewed by the entire board of MSI Integrity for accuracy and is also made	
	n B, Line 12c - Policies are communicated with staff upon hiring and MSI Integrity these policies on a quarterly basis.	y's Executive Director and staff
United States in a similar two members of the Boar appropriate compensational all staff, including the Ex	n B, Line 15 - In late 2014, external lawyers reviewed pay rates for researchers an r position as our top employee. The actual compensation level was then independent rd of Directors, independent from the Executive Director. More recently, a compre- on levels began in 2018 and was completed in 2019. This resulted in the creation of recutive Director.	dently reviewed and approved by ehensive process for ensuring that of organization-wide pay bands for
	n C, Line 19 - The organization makes its governing documents, conflict of intere nsi-integrity.org/funding-and-financials/ and upon request.	
Form 990, Part IX, Line 1	1g - Research contractors \$93,825, payroll service fees \$1,328	

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