

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)

**2020**

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](http://www.irs.gov/Form990) for instructions and the latest information.

Open to Public Inspection

**A** For the **2020** calendar year, or tax year beginning **JUL 1, 2020** and ending **JUN 30, 2021**

<b>B</b> Check if applicable:  <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	<b>C</b> Name of organization <b>SESAME WORKSHOP</b>		<b>D</b> Employer identification number <b>13-2655731</b>
	Doing business as		<b>E</b> Telephone number <b>212-595-3456</b>
	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	
	1900 BROADWAY		<b>G</b> Gross receipts \$ <b>266,305,711.</b>
	City or town, state or province, country, and ZIP or foreign postal code <b>NEW YORK, NY 10023</b>		
<b>F</b> Name and address of principal officer: <b>STEPHEN YOUNGWOOD</b> <b>SAME AS C ABOVE</b>		<b>H(a)</b> Is this a group return for subordinates? ..... <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <b>H(b)</b> Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. See instructions <b>H(c)</b> Group exemption number ▶	

**I** Tax-exempt status:  501(c)(3)  501(c) ( ) ◀ (insert no.)  4947(a)(1) or  527

**J** Website: ▶ **WWW.SESAMEWORKSHOP.ORG**

**K** Form of organization:  Corporation  Trust  Association  Other ▶ **L** Year of formation: **1970** **M** State of legal domicile: **NY**

**Part I Summary**

<b>Activities &amp; Governance</b>	<b>1</b> Briefly describe the organization's mission or most significant activities: <b>OUR MISSION IS TO HELP KIDS GROW SMARTER, STRONGER AND KINDER.</b>		
	<b>2</b> Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	<b>3</b> Number of voting members of the governing body (Part VI, line 1a)	<b>3</b>	<b>21</b>
	<b>4</b> Number of independent voting members of the governing body (Part VI, line 1b)	<b>4</b>	<b>18</b>
	<b>5</b> Total number of individuals employed in calendar year 2020 (Part V, line 2a)	<b>5</b>	<b>1237</b>
	<b>6</b> Total number of volunteers (estimate if necessary)	<b>6</b>	<b>0</b>
	<b>7 a</b> Total unrelated business revenue from Part VIII, column (C), line 12	<b>7a</b>	<b>689,996.</b>
<b>b</b> Net unrelated business taxable income from Form 990-T, Part I, line 11	<b>7b</b>	<b>172,776.</b>	
<b>Revenue</b>	<b>8</b> Contributions and grants (Part VIII, line 1h)	<b>Prior Year</b>	<b>Current Year</b>
	<b>9</b> Program service revenue (Part VIII, line 2g)	<b>88,573,914.</b>	<b>70,024,054.</b>
	<b>10</b> Investment income (Part VIII, column (A), lines 3, 4, and 7d)	<b>118,900,107.</b>	<b>86,838,611.</b>
	<b>11</b> Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	<b>1,550,815.</b>	<b>4,787,478.</b>
	<b>12</b> Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	<b>37,048,781.</b>	<b>33,898,455.</b>
<b>Expenses</b>	<b>13</b> Grants and similar amounts paid (Part IX, column (A), lines 1-3)	<b>246,073,617.</b>	<b>195,548,598.</b>
	<b>14</b> Benefits paid to or for members (Part IX, column (A), line 4)	<b>22,785,598.</b>	<b>29,367,265.</b>
	<b>15</b> Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	<b>0.</b>	<b>0.</b>
	<b>16a</b> Professional fundraising fees (Part IX, column (A), line 11e)	<b>72,039,544.</b>	<b>75,480,068.</b>
	<b>b</b> Total fundraising expenses (Part IX, column (D), line 25) ▶ <b>6,396,490.</b>	<b>69,516.</b>	<b>70,000.</b>
	<b>17</b> Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	<b>113,310,327.</b>	<b>79,145,082.</b>
<b>18</b> Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	<b>208,204,985.</b>	<b>184,062,415.</b>	
<b>19</b> Revenue less expenses. Subtract line 18 from line 12	<b>37,868,632.</b>	<b>11,486,183.</b>	
<b>Net Assets or Fund Balances</b>	<b>20</b> Total assets (Part X, line 16)	<b>Beginning of Current Year</b>	<b>End of Year</b>
	<b>21</b> Total liabilities (Part X, line 26)	<b>433,633,112.</b>	<b>567,105,457.</b>
	<b>22</b> Net assets or fund balances. Subtract line 21 from line 20	<b>92,031,632.</b>	<b>122,746,243.</b>

**Part II Signature Block**

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

<b>Sign Here</b>	Signature of officer		Date		
	JOSEPH SALVO, EVP/GENERAL COUNSEL Type or print name and title				
<b>Paid Preparer Use Only</b>	Print/Type preparer's name SCOTT THOMPSETT	Preparer's signature <i>Scott Thompsett</i>	Date 5/16/2022	Check if self-employed <input type="checkbox"/>	PTIN P00741490
	Firm's name ▶ GRANT THORNTON LLP	Firm's EIN ▶ 36-6055558	Phone no. 212-599-0100		
Firm's address ▶ 757 THIRD AVENUE, 3RD FLOOR NEW YORK, NY 10017-2013					

May the IRS discuss this return with the preparer shown above? See instructions  Yes  No

# Return of Organization Exempt From Income Tax

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

Department of the Treasury  
Internal Revenue Service

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**A** For the **2020** calendar year, or tax year beginning **JUL 1, 2020** and ending **JUN 30, 2021**

<b>B</b> Check if applicable:  <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	<b>C</b> Name of organization <b>SESAME WORKSHOP</b>  Doing business as  Number and street (or P.O. box if mail is not delivered to street address) Room/suite <b>1900 BROADWAY</b>  City or town, state or province, country, and ZIP or foreign postal code <b>NEW YORK, NY 10023</b>  <b>F</b> Name and address of principal officer: <b>STEPHEN YOUNGWOOD</b> <b>SAME AS C ABOVE</b>	<b>D</b> Employer identification number  <b>13-2655731</b>  <b>E</b> Telephone number  <b>212-595-3456</b>  <b>G</b> Gross receipts \$ <b>266,305,711.</b>  <b>H(a)</b> Is this a group return for subordinates? ..... <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <b>H(b)</b> Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. See instructions  <b>H(c)</b> Group exemption number ▶
<b>I</b> Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) ( ) ◀ (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		
<b>J</b> Website: ▶ <b>WWW.SESAMEWORKSHOP.ORG</b>		
<b>K</b> Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶		<b>L</b> Year of formation: <b>1970</b>
		<b>M</b> State of legal domicile: <b>NY</b>

**Part I Summary**

	<b>1</b> Briefly describe the organization's mission or most significant activities: <b>OUR MISSION IS TO HELP KIDS GROW SMARTER, STRONGER AND KINDER.</b>		
	<b>2</b> Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
Activities & Governance	<b>3</b> Number of voting members of the governing body (Part VI, line 1a) .....	<b>3</b>	21
	<b>4</b> Number of independent voting members of the governing body (Part VI, line 1b) .....	<b>4</b>	18
	<b>5</b> Total number of individuals employed in calendar year 2020 (Part V, line 2a) .....	<b>5</b>	1237
	<b>6</b> Total number of volunteers (estimate if necessary) .....	<b>6</b>	0
	<b>7a</b> Total unrelated business revenue from Part VIII, column (C), line 12 .....	<b>7a</b>	689,996.
	<b>b</b> Net unrelated business taxable income from Form 990-T, Part I, line 11 .....	<b>7b</b>	172,776.
	Revenue	<b>8</b> Contributions and grants (Part VIII, line 1h) .....	<b>Prior Year</b>
<b>9</b> Program service revenue (Part VIII, line 2g) .....		88,573,914.	70,024,054.
<b>10</b> Investment income (Part VIII, column (A), lines 3, 4, and 7d) .....		118,900,107.	86,838,611.
<b>11</b> Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) .....		1,550,815.	4,787,478.
<b>12</b> Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) .....		37,048,781.	33,898,455.
		246,073,617.	195,548,598.
Expenses		<b>13</b> Grants and similar amounts paid (Part IX, column (A), lines 1-3) .....	22,785,598.
	<b>14</b> Benefits paid to or for members (Part IX, column (A), line 4) .....	0.	0.
	<b>15</b> Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) .....	72,039,544.	75,480,068.
	<b>16a</b> Professional fundraising fees (Part IX, column (A), line 11e) .....	69,516.	70,000.
	<b>b</b> Total fundraising expenses (Part IX, column (D), line 25) ▶ .....	6,396,490.	
	<b>17</b> Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) .....	113,310,327.	79,145,082.
	<b>18</b> Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) .....	208,204,985.	184,062,415.
<b>19</b> Revenue less expenses. Subtract line 18 from line 12 .....	37,868,632.	11,486,183.	
Net Assets or Fund Balances	<b>20</b> Total assets (Part X, line 16) .....	<b>Beginning of Current Year</b>	<b>End of Year</b>
	<b>21</b> Total liabilities (Part X, line 26) .....	433,633,112.	567,105,457.
	<b>22</b> Net assets or fund balances. Subtract line 21 from line 20 .....	92,031,632.	122,746,243.
		341,601,480.	444,359,214.

**Part II Signature Block**

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

<b>Sign Here</b>	Signature of officer <b>JOSEPH SALVO, EVP/GENERAL COUNSEL</b> Type or print name and title	Date  
<b>Paid Preparer Use Only</b>	Print/Type preparer's name <b>SCOTT THOMPSETT</b>	Preparer's signature <i>Scott Thompsett</i>
	Date <b>5/16/2022</b>	Check if self-employed <input type="checkbox"/> PTIN <b>P00741490</b>
	Firm's name ▶ <b>GRANT THORNTON LLP</b>	Firm's EIN ▶ <b>36-6055558</b>
	Firm's address ▶ <b>757 THIRD AVENUE, 3RD FLOOR NEW YORK, NY 10017-2013</b>	Phone no. <b>212-599-0100</b>

May the IRS discuss this return with the preparer shown above? See instructions  Yes  No

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission: SESAME WORKSHOP'S MISSION IS TO HELP KIDS GROW SMARTER, STRONGER AND KINDER.

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

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

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.

4a (Code: ) (Expenses \$ 70,190,994. including grants of \$ 150,000. ) (Revenue \$ 87,658,032. ) CREATION AND DISTRIBUTION OF EDUCATIONAL MEDIA

4b (Code: ) (Expenses \$ 18,012,209. including grants of \$ 2,246,293. ) (Revenue \$ 81,336. ) INTERNATIONAL SOCIAL IMPACT

4c (Code: ) (Expenses \$ 13,593,405. including grants of \$ 30,000. ) (Revenue \$ 657. ) U.S. SOCIAL IMPACT

IN ADDITION TO DISTRIBUTING ITS EDUCATIONAL CONTENT ON MASS MEDIA PLATFORMS, SESAME WORKSHOP CREATES AND DISTRIBUTES BILINGUAL MULTI-MEDIA EDUCATIONAL INITIATIVES AND MATERIALS THAT ARE TARGETED TO SPECIFIC AT-RISK AUDIENCES OR THAT ADDRESS SPECIFIC EDUCATIONAL NEEDS.

4d Other program services (Describe on Schedule O.) (Expenses \$ 51,945,822. including grants of \$ 26,940,972. ) (Revenue \$ 0. )

4e Total program service expenses 153,742,430.

**Part IV Checklist of Required Schedules**

	Yes	No
<b>1</b> Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i> .....	X	
<b>2</b> Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> ? .....	X	
<b>3</b> Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i> .....		X
<b>4 Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i> .....	X	
<b>5</b> Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? <i>If "Yes," complete Schedule C, Part III</i> .....		X
<b>6</b> 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> .....		X
<b>7</b> 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> .....		X
<b>8</b> Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i> .....		X
<b>9</b> 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> .....		X
<b>10</b> 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> .....		X
<b>11</b> 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.		
<b>a</b> Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI</i> .....	X	
<b>b</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> .....	X	
<b>c</b> 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> .....		X
<b>d</b> 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> .....		X
<b>e</b> Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i> .....	X	
<b>f</b> 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> .....	X	
<b>12a</b> Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i> .....		X
<b>b</b> Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional</i> .....	X	
<b>13</b> Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i> .....		X
<b>14a</b> Did the organization maintain an office, employees, or agents outside of the United States? .....	X	
<b>b</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> .....	X	
<b>15</b> 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> .....	X	
<b>16</b> 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? <i>If "Yes," complete Schedule F, Parts III and IV</i> .....		X
<b>17</b> 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? <i>If "Yes," complete Schedule G, Part I</i> .....	X	
<b>18</b> Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i> .....	X	
<b>19</b> Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i> .....		X
<b>20a</b> Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i> .....		X
<b>b</b> If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? .....		
<b>21</b> 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? <i>If "Yes," complete Schedule I, Parts I and II</i> .....	X	

Part IV Checklist of Required Schedules (continued)

Table with 3 columns: Question ID, Question Text, Yes, No. Rows include questions 22 through 38 regarding organizational reporting, compensation, tax-exempt bonds, and excess benefit transactions.

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 [X]

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

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

Table with columns for question numbers (2a-16), descriptions, and Yes/No checkboxes. Includes questions about employee counts, tax returns, unrelated business income, foreign accounts, prohibited transactions, and charitable contributions.

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

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

Section A. Governing Body and Management

Table with 3 columns: Question, Yes, No. Rows include 1a (21), 1b (18), 2, 3, 4, 5, 6, 7a, 7b, 8a, 8b, 9.

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

Table with 3 columns: Question, Yes, No. Rows include 10a, 10b, 11a, 11b, 12a, 12b, 12c, 13, 14, 15a, 15b, 16a, 16b.

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed SEE SCHEDULE O
18 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection.
19 Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
20 State the name, address, and telephone number of the person who possesses the organization's books and records

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

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

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

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

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's **current** key employees, if any. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. See instructions for the order in which to list the persons above.

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) JEFFREY DUNN PRESIDENT/CEO (THRU 12/31/2020)	60.00 2.00	X		X				1,090,227.	0.	61,582.
(2) STEPHEN YOUNGWOOD CEO (AS OF 01/01/21)	60.00 1.00	X		X				662,671.	0.	28,414.
(3) SHERRIE WESTIN PRESIDENT (AS OF 01/01/21)	60.00 1.00			X				649,499.	0.	31,894.
(4) JOSEPH SALVO EVP GENERAL COUNSEL	60.00 2.00			X				496,376.	0.	66,539.
(5) DARYL MINTZ EVP, CFO	60.00 2.00			X				466,770.	0.	71,700.
(6) TANYA Z. HAIDER EVP STRATEGY RESEARCH&VENTURES	60.00					X		441,096.	0.	60,475.
(7) GORDON SCOTT CHAMBERS SVP/GM, EDU. MEDIA & LICENSING	60.00					X		418,284.	0.	61,515.
(8) DIANA LEE CHIEF HUMAN RESOURCES OFFICER	60.00					X		417,660.	0.	61,107.
(9) SHARI ROSENFELD SVP INTERNATIONAL SOCIAL IMPACT	60.00				X			426,673.	0.	39,864.
(10) GEORGE E. WELLS EVP & HEAD OF GLOBAL MEDIA AND EDUCA	60.00				X			426,280.	0.	39,733.
(11) KAY N. WILSON STALLINGS EVP, CREATIVE & PRODUCTION	60.00				X			438,929.	0.	21,230.
(12) SAMANTHA A. SALTIEL EVP & CHIEF MARKETING OFFICER	60.00					X		389,709.	0.	43,264.
(13) BENJAMIN LEHMANN SVP & HEAD OF SESAME STREET AND LIVE	60.00					X		374,008.	0.	58,042.
(14) JANE HARTLEY CHAIRMAN OF THE BOARD	0.50	X						0.	0.	0.
(15) JEFFREY N. WATANABE, CHAIRMAN EMERITUS OF THE BOARD	0.50	X						0.	0.	0.
(16) JOAN GANZ COONEY HONORARY TRUSTEE (NON-VOTING)	0.50	X						0.	0.	0.
(17) LLOYD N. MORRISETT HONORARY TRUSTEE (NON-VOTING)	0.50	X						0.	0.	0.



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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(18) FRANS HIJKOOP TRUSTEE	0.50	X						0.	0.	0.
(19) MILTON CHEN, PHD TRUSTEE	0.50	X						0.	0.	0.
(20) MARLENE HESS TRUSTEE	0.50	X						0.	0.	0.
(21) MICHAEL G. MANASSE TRUSTEE	0.50	X						0.	0.	0.
(22) DR. AMY BETH JORDAN, PHD TRUSTEE	0.50	X						0.	0.	0.
(23) JEFFREY WEISS TRUSTEE	0.50	X						0.	0.	0.
(24) PAUL LINDLEY TRUSTEE	0.50	X						0.	0.	0.
(25) ANN RUBINSTEIN TISCH TRUSTEE	0.50	X						0.	0.	0.
(26) JENNA MACK TRUSTEE	0.50	X						0.	0.	0.
<b>1b Subtotal</b>								6,698,182.	0.	645,359.
<b>c Total from continuation sheets to Part VII, Section A</b>								0.	0.	0.
<b>d Total (add lines 1b and 1c)</b>								6,698,182.	0.	645,359.

**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 186

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

**Section B. Independent Contractors**

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

(A) Name and business address	(B) Description of services	(C) Compensation
JORDAN PIONEERS, COMPLEX NO. 8, SHUKRI SHAHSHAAH ST, AMMAN, JORDAN	PRODUCTION SERVICES	5,032,224.
CONSCIOUS CONTENT MEDIA INC., 460 PARK AVENUE SOUTH, 4TH FLOOR, NEW YORK, NY	CONSUMER SERVICES	5,000,000.
GURU ANIMATION STUDIO LTD., 110 SPADINA AVENUE, UNIT 500, TORONTO, ONTARIO, CANADA	ANIMATION STUDIO	3,733,291.
A PRODUCTIONS LIMITED, 52 OLD MARKET STREET, BRISTOL, UNITED KINGDOM BS2 0ER	ANIMATION STUDIO	2,529,390.
RENEGADE ANIMATION, 111 EAST BROADWAY, SUITE 208, GLENDALE, CA 91205	ANIMATION STUDIO	1,607,171.

**2** Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization 104

SEE PART VII, SECTION A CONTINUATION SHEETS

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(27) VARUN CHANDRA TRUSTEE	0.50	X						0.	0.	0.
(28) LEE EASTMAN TRUSTEE	0.50	X						0.	0.	0.
(29) GABRIELLE SULZBERGER TRUSTEE	0.50	X						0.	0.	0.
(30) KATHLEEN G. ELSESSER TRUSTEE	0.50	X						0.	0.	0.
(31) THASUNDA BROWN DUCKETT TRUSTEE (AS OF 2/2021)	0.50	X						0.	0.	0.
(32) CARLA HARRIS TRUSTEE (AS OF 2/2021)	0.50	X						0.	0.	0.
(33) VALERIE JARRETT TRUSTEE (AS OF 1/2021)	0.50	X						0.	0.	0.
(34) DR. BEVERLY DANIEL TATUM TRUSTEE (AS OF 1/2021)	0.50	X						0.	0.	0.
(35) RACHEL HINES TRUSTEE (THRU 10/2020)	0.50	X						0.	0.	0.
(36) ADAM FRANKEL TRUSTEE (THRU 10/2020)	0.50	X						0.	0.	0.
Total to Part VII, Section A, line 1c .....										

**Part VIII Statement of Revenue**

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

			(A)	(B)	(C)	(D)	
			Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512 - 514	
Contributions, Gifts, Grants and Other Similar Amounts	<b>1 a</b> Federated campaigns	<b>1a</b>					
	<b>b</b> Membership dues	<b>1b</b>					
	<b>c</b> Fundraising events	<b>1c</b>	2,447,602.				
	<b>d</b> Related organizations	<b>1d</b>					
	<b>e</b> Government grants (contributions)	<b>1e</b>	2,827,241.				
	<b>f</b> All other contributions, gifts, grants, and similar amounts not included above	<b>1f</b>	64,749,211.				
	<b>g</b> Noncash contributions included in lines 1a-1f	<b>1g</b>	\$				
	<b>h Total.</b> Add lines 1a-1f			70,024,054.			
Program Service Revenue	<b>2 a</b> DISTRIBUTION FEES	<b>Business Code</b>					
		900099	86,838,611.	86,373,739.	464,872.		
	<b>b</b>						
	<b>c</b>						
	<b>d</b>						
	<b>e</b>						
	<b>f</b> All other program service revenue						
<b>g Total.</b> Add lines 2a-2f			86,838,611.				
Other Revenue	<b>3</b> Investment income (including dividends, interest, and other similar amounts)		1,905,406.		223,441.	1,681,965.	
	<b>4</b> Income from investment of tax-exempt bond proceeds						
	<b>5</b> Royalties		33,613,430.		1,683.	33,611,747.	
	<b>6 a</b> Gross rents	<b>6a</b>	(i) Real				
			(ii) Personal				
	<b>b</b> Less: rental expenses	<b>6b</b>					
	<b>c</b> Rental income or (loss)	<b>6c</b>					
	<b>d</b> Net rental income or (loss)						
	<b>7 a</b> Gross amount from sales of assets other than inventory	<b>7a</b>	(i) Securities				
			(ii) Other				
				72,887,000.			
	<b>b</b> Less: cost or other basis and sales expenses	<b>7b</b>	70,004,928.				
	<b>c</b> Gain or (loss)	<b>7c</b>	2,882,072.				
	<b>d</b> Net gain or (loss)			2,882,072.		2,882,072.	
<b>8 a</b> Gross income from fundraising events (not including \$ 2,447,602. of contributions reported on line 1c). See Part IV, line 18	<b>8a</b>						
			0.				
<b>b</b> Less: direct expenses	<b>8b</b>	616,389.					
<b>c</b> Net income or (loss) from fundraising events			-616,389.		-616,389.		
<b>9 a</b> Gross income from gaming activities. See Part IV, line 19	<b>9a</b>						
<b>b</b> Less: direct expenses	<b>9b</b>						
<b>c</b> Net income or (loss) from gaming activities							
<b>10 a</b> Gross sales of inventory, less returns and allowances	<b>10a</b>		1,037,210.				
<b>b</b> Less: cost of goods sold	<b>10b</b>	135,796.					
<b>c</b> Net income or (loss) from sales of inventory			901,414.	901,414.			
Miscellaneous Revenue	<b>11 a</b>	<b>Business Code</b>					
	<b>b</b>						
	<b>c</b>						
	<b>d</b> All other revenue						
	<b>e Total.</b> Add lines 11a-11d						
<b>12 Total revenue.</b> See instructions			195,548,598.	87,275,153.	689,996.	37,559,395.	

**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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
<b>1</b> Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 ...	22,603,107.	22,603,107.		
<b>2</b> Grants and other assistance to domestic individuals. See Part IV, line 22 .....				
<b>3</b> Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 .....	6,764,158.	6,764,158.		
<b>4</b> Benefits paid to or for members .....				
<b>5</b> Compensation of current officers, directors, trustees, and key employees .....	5,337,870.	4,685,131.	413,133.	239,606.
<b>6</b> Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) .....				
<b>7</b> Other salaries and wages .....	56,030,837.	41,851,504.	11,958,977.	2,220,356.
<b>8</b> Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	3,595,211.	2,368,960.	932,427.	293,824.
<b>9</b> Other employee benefits .....	6,590,766.	5,017,261.	1,233,192.	340,313.
<b>10</b> Payroll taxes .....	3,925,384.	2,667,184.	990,087.	268,113.
<b>11</b> Fees for services (nonemployees):				
<b>a</b> Management .....				
<b>b</b> Legal .....	1,045,993.	834,301.	193,558.	18,134.
<b>c</b> Accounting .....	688,455.	146,158.	539,159.	3,138.
<b>d</b> Lobbying .....	32,111.	32,111.		
<b>e</b> Professional fundraising services. See Part IV, line 17	70,000.			70,000.
<b>f</b> Investment management fees .....	1,249,038.		1,249,038.	
<b>g</b> Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch. O.)	5,354,006.	4,034,683.	1,148,279.	171,044.
<b>12</b> Advertising and promotion .....	3,278,598.	1,249,337.	15,254.	2,014,007.
<b>13</b> Office expenses .....	2,342,184.	1,882,001.	407,607.	52,576.
<b>14</b> Information technology .....	4,168,208.	2,521,056.	1,597,102.	50,050.
<b>15</b> Royalties .....	758,104.	758,104.		
<b>16</b> Occupancy .....	6,829,371.	4,857,578.	1,590,039.	381,754.
<b>17</b> Travel .....	303,912.	260,060.	43,829.	23.
<b>18</b> Payments of travel or entertainment expenses for any federal, state, or local public officials ...				
<b>19</b> Conferences, conventions, and meetings .....	313,867.	161,901.	151,004.	962.
<b>20</b> Interest .....	15,208.		15,208.	
<b>21</b> Payments to affiliates .....				
<b>22</b> Depreciation, depletion, and amortization .....	6,287,422.	5,102,681.	952,894.	231,847.
<b>23</b> Insurance .....	617,405.	419,081.	157,581.	40,743.
<b>24</b> 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.)				
<b>a</b> PRODUCTION EXPENSE	45,459,738.	45,459,738.		
<b>b</b> DISTRIBUTION EXPENSE	66,335.	66,335.		
<b>c</b> _____				
<b>d</b> _____				
<b>e</b> All other expenses _____	335,127.		335,127.	
<b>25</b> Total functional expenses. Add lines 1 through 24e	184,062,415.	153,742,430.	23,923,495.	6,396,490.
<b>26</b> 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)

**Part X Balance Sheet**

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

		(A) Beginning of year		(B) End of year
<b>Assets</b>	<b>1</b> Cash - non-interest-bearing .....		<b>1</b>	
	<b>2</b> Savings and temporary cash investments .....	49,239,094.	<b>2</b>	32,497,643.
	<b>3</b> Pledges and grants receivable, net .....	23,782,783.	<b>3</b>	22,318,934.
	<b>4</b> Accounts receivable, net .....	28,419,899.	<b>4</b>	22,218,338.
	<b>5</b> 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 .....		<b>5</b>	
	<b>6</b> Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B) .....		<b>6</b>	
	<b>7</b> Notes and loans receivable, net .....		<b>7</b>	
	<b>8</b> Inventories for sale or use .....	118,171.	<b>8</b>	101,480.
	<b>9</b> Prepaid expenses and deferred charges .....	39,055,739.	<b>9</b>	70,842,888.
	<b>10a</b> Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D .....	<b>10a</b> 40,780,301.		
	<b>b</b> Less: accumulated depreciation .....	<b>10b</b> 20,351,304.		
	<b>11</b> Investments - publicly traded securities .....	19,675,523.	<b>10c</b>	20,428,997.
	<b>12</b> Investments - other securities. See Part IV, line 11 .....	60,094,696.	<b>11</b>	97,386,385.
	<b>13</b> Investments - program-related. See Part IV, line 11 .....	175,692,995.	<b>12</b>	265,853,000.
	<b>14</b> Intangible assets .....		<b>13</b>	
	<b>15</b> Other assets. See Part IV, line 11 .....	30,408,840.	<b>14</b>	28,381,588.
<b>16</b> <b>Total assets.</b> Add lines 1 through 15 (must equal line 33) .....	7,145,372.	<b>15</b>	7,076,204.	
	433,633,112.	<b>16</b>	567,105,457.	
<b>Liabilities</b>	<b>17</b> Accounts payable and accrued expenses .....	42,479,323.	<b>17</b>	58,021,639.
	<b>18</b> Grants payable .....		<b>18</b>	
	<b>19</b> Deferred revenue .....	36,989,323.	<b>19</b>	53,178,246.
	<b>20</b> Tax-exempt bond liabilities .....		<b>20</b>	
	<b>21</b> Escrow or custodial account liability. Complete Part IV of Schedule D .....		<b>21</b>	
	<b>22</b> Loans and other 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 .....		<b>22</b>	
	<b>23</b> Secured mortgages and notes payable to unrelated third parties .....		<b>23</b>	
	<b>24</b> Unsecured notes and loans payable to unrelated third parties .....		<b>24</b>	
	<b>25</b> 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 .....	12,562,986.	<b>25</b>	11,546,358.
	<b>26</b> <b>Total liabilities.</b> Add lines 17 through 25 .....	92,031,632.	<b>26</b>	122,746,243.
<b>Net Assets or Fund Balances</b>	<b>Organizations that follow FASB ASC 958, check here</b> <input checked="" type="checkbox"/> <b>and complete lines 27, 28, 32, and 33.</b>			
	<b>27</b> Net assets without donor restrictions .....	275,691,080.	<b>27</b>	386,625,594.
	<b>28</b> Net assets with donor restrictions .....	65,910,400.	<b>28</b>	57,733,620.
	<b>Organizations that do not follow FASB ASC 958, check here</b> <input type="checkbox"/> <b>and complete lines 29 through 33.</b>			
	<b>29</b> Capital stock or trust principal, or current funds .....		<b>29</b>	
	<b>30</b> Paid-in or capital surplus, or land, building, or equipment fund .....		<b>30</b>	
	<b>31</b> Retained earnings, endowment, accumulated income, or other funds .....		<b>31</b>	
	<b>32</b> Total net assets or fund balances .....	341,601,480.	<b>32</b>	444,359,214.
<b>33</b> Total liabilities and net assets/fund balances .....	433,633,112.	<b>33</b>	567,105,457.	

**Part XI Reconciliation of Net Assets**

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

<b>1</b>	Total revenue (must equal Part VIII, column (A), line 12)	<b>1</b>	195,548,598.
<b>2</b>	Total expenses (must equal Part IX, column (A), line 25)	<b>2</b>	184,062,415.
<b>3</b>	Revenue less expenses. Subtract line 2 from line 1	<b>3</b>	11,486,183.
<b>4</b>	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	<b>4</b>	341,601,480.
<b>5</b>	Net unrealized gains (losses) on investments	<b>5</b>	91,504,077.
<b>6</b>	Donated services and use of facilities	<b>6</b>	
<b>7</b>	Investment expenses	<b>7</b>	
<b>8</b>	Prior period adjustments	<b>8</b>	
<b>9</b>	Other changes in net assets or fund balances (explain on Schedule O)	<b>9</b>	-232,526.
<b>10</b>	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	<b>10</b>	444,359,214.

**Part XII Financial Statements and Reporting**

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

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

	Yes	No
<b>2a</b>		X
<b>2b</b>	X	
<b>2c</b>	X	
<b>3a</b>	X	
<b>3b</b>	X	

Form **990** (2020)

SCHEDULE A  
(Form 990 or 990-EZ)

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.

▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047

2020

Open to Public  
Inspection

Name of the organization <p style="text-align:center">SESAME WORKSHOP</p>	Employer identification number <p style="text-align:center">13-2655731</p>
--	---

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

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

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

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

**Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)**

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

**Section A. Public Support**

Calendar year (or fiscal year beginning in) ►	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") .....	26,052,680.	44,958,091.	66,175,311.	88,573,914.	70,024,054.	295,784,050.
<b>2</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf .....						
<b>3</b> The value of services or facilities furnished by a governmental unit to the organization without charge .....						
<b>4 Total.</b> Add lines 1 through 3 .....	26,052,680.	44,958,091.	66,175,311.	88,573,914.	70,024,054.	295,784,050.
<b>5</b> 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) .....						118,497,196.
<b>6 Public support.</b> Subtract line 5 from line 4.						177,286,854.

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ►	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
<b>7</b> Amounts from line 4 .....	26,052,680.	44,958,091.	66,175,311.	88,573,914.	70,024,054.	295,784,050.
<b>8</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources .....	34,264,392.	34,720,789.	35,273,095.	36,601,553.	35,293,712.	176,153,541.
<b>9</b> Net income from unrelated business activities, whether or not the business is regularly carried on .....	0.	0.	164,988.	892,068.	689,996.	1,747,052.
<b>10</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) .....	139,200.	148,500.	280,500.			568,200.
<b>11 Total support.</b> Add lines 7 through 10						474,252,843.
<b>12</b> Gross receipts from related activities, etc. (see instructions) .....					12	375,362,163.
<b>13 First 5 years.</b> If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and <b>stop here</b> .....						<input type="checkbox"/>

**Section C. Computation of Public Support Percentage**

<b>14</b> Public support percentage for 2020 (line 6, column (f), divided by line 11, column (f)) .....	<b>14</b>	37.38 %
<b>15</b> Public support percentage from 2019 Schedule A, Part II, line 14 .....	<b>15</b>	40.23 %
<b>16a 33 1/3% support test - 2020.</b> If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization .....		<input checked="" type="checkbox"/>
<b>b 33 1/3% support test - 2019.</b> If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization .....		<input type="checkbox"/>
<b>17a 10% -facts-and-circumstances test - 2020.</b> 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 <b>stop here.</b> Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization .....		<input type="checkbox"/>
<b>b 10% -facts-and-circumstances test - 2019.</b> If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and <b>stop here.</b> Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization .....		<input type="checkbox"/>
<b>18 Private foundation.</b> If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions .....		<input type="checkbox"/>



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

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

**Section A. Public Support**

Calendar year (or fiscal year beginning in) ►	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") .....						
<b>2</b> 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 .....						
<b>3</b> Gross receipts from activities that are not an unrelated trade or business under section 513 .....						
<b>4</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf .....						
<b>5</b> The value of services or facilities furnished by a governmental unit to the organization without charge .....						
<b>6 Total.</b> Add lines 1 through 5 .....						
<b>7a</b> Amounts included on lines 1, 2, and 3 received from disqualified persons .....						
<b>b</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 .....						
<b>c</b> Add lines 7a and 7b .....						
<b>8 Public support.</b> (Subtract line 7c from line 6.)						

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ►	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
<b>9</b> Amounts from line 6 .....						
<b>10a</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources .....						
<b>b</b> Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 .....						
<b>c</b> Add lines 10a and 10b .....						
<b>11</b> Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on .....						
<b>12</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) .....						
<b>13 Total support.</b> (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 year as a section 501(c)(3) organization, check this box and **stop here** .....

**Section C. Computation of Public Support Percentage**

<b>15</b> Public support percentage for 2020 (line 8, column (f), divided by line 13, column (f)) .....	<b>15</b>	%
<b>16</b> Public support percentage from 2019 Schedule A, Part III, line 15 .....	<b>16</b>	%

**Section D. Computation of Investment Income Percentage**

<b>17</b> Investment income percentage for <b>2020</b> (line 10c, column (f), divided by line 13, column (f)) .....	<b>17</b>	%
<b>18</b> Investment income percentage from <b>2019</b> Schedule A, Part III, line 17 .....	<b>18</b>	%

**19a 33 1/3% support tests - 2020.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization .....

**b 33 1/3% support tests - 2019.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization .....

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

**Part IV Supporting Organizations**

(Complete only if you checked a box in line 12 on Part I. If you checked 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**

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

**Part IV Supporting Organizations** (continued)

	Yes	No
<b>11</b> Has the organization accepted a gift or contribution from any of the following persons?		
<b>a</b> A person who directly or indirectly controls, either alone or together with persons described in lines 11b and 11c below, the governing body of a supported organization?		
<b>11a</b>		
<b>b</b> A family member of a person described in line 11a above?		
<b>11b</b>		
<b>c</b> A 35% controlled entity of a person described in line 11a or 11b above? <i>If "Yes" to line 11a, 11b, or 11c, provide detail in Part VI.</i>		
<b>11c</b>		

**Section B. Type I Supporting Organizations**

	Yes	No
<b>1</b> 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? <i>If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove 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.</i>		
<b>1</b>		
<b>2</b> Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? <i>If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.</i>		
<b>2</b>		

**Section C. Type II Supporting Organizations**

	Yes	No
<b>1</b> Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? <i>If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).</i>		
<b>1</b>		

**Section D. All Type III Supporting Organizations**

	Yes	No
<b>1</b> 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?		
<b>1</b>		
<b>2</b> Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? <i>If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).</i>		
<b>2</b>		
<b>3</b> By reason of the relationship described in 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? <i>If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.</i>		
<b>3</b>		

**Section E. Type III Functionally Integrated Supporting Organizations**

<b>1</b> Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).		
<b>a</b> <input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.		
<b>b</b> <input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.		
<b>c</b> <input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see instructions).		
<b>2</b> Activities Test. Answer lines 2a and 2b below.		
<b>a</b> Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? <i>If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.</i>	Yes	No
<b>2a</b>		
<b>b</b> Did the activities described in 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? <i>If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.</i>		
<b>2b</b>		
<b>3</b> Parent of Supported Organizations. Answer lines 3a and 3b below.		
<b>a</b> Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>If "Yes" or "No" provide details in Part VI.</i>		
<b>3a</b>		
<b>b</b> Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? <i>If "Yes," describe in Part VI the role played by the organization in this regard.</i>		
<b>3b</b>		

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

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

<b>Section A - Adjusted Net Income</b>		(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	<b>Adjusted Net Income</b> (subtract lines 5, 6, and 7 from line 4)	8	

<b>Section B - Minimum Asset Amount</b>		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):		
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	<b>Total</b> (add lines 1a, 1b, and 1c)	1d	
e	<b>Discount</b> claimed for blockage or other factors ( <i>explain in detail in Part VI</i> ):		
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	<b>Minimum Asset Amount</b> (add line 7 to line 6)	8	

<b>Section C - Distributable Amount</b>			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	<b>Distributable Amount.</b> Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6	
7	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).		

Schedule A (Form 990 or 990-EZ) 2020

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

<b>Section D - Distributions</b>		<b>Current Year</b>
<b>1</b>	Amounts paid to supported organizations to accomplish exempt purposes	<b>1</b>
<b>2</b>	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	<b>2</b>
<b>3</b>	Administrative expenses paid to accomplish exempt purposes of supported organizations	<b>3</b>
<b>4</b>	Amounts paid to acquire exempt-use assets	<b>4</b>
<b>5</b>	Qualified set-aside amounts (prior IRS approval required - provide details in Part VI)	<b>5</b>
<b>6</b>	Other distributions (describe in Part VI). See instructions.	<b>6</b>
<b>7</b>	<b>Total annual distributions.</b> Add lines 1 through 6.	<b>7</b>
<b>8</b>	Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.	<b>8</b>
<b>9</b>	Distributable amount for 2020 from Section C, line 6	<b>9</b>
<b>10</b>	Line 8 amount divided by line 9 amount	<b>10</b>

<b>Section E - Distribution Allocations</b> (see instructions)	<b>(i) Excess Distributions</b>	<b>(ii) Underdistributions Pre-2020</b>	<b>(iii) Distributable Amount for 2020</b>
<b>1</b> Distributable amount for 2020 from Section C, line 6			
<b>2</b> Underdistributions, if any, for years prior to 2020 (reasonable cause required - explain in Part VI). See instructions.			
<b>3</b> Excess distributions carryover, if any, to 2020			
<b>a</b> From 2015			
<b>b</b> From 2016			
<b>c</b> From 2017			
<b>d</b> From 2018			
<b>e</b> From 2019			
<b>f</b> Total of lines 3a through 3e			
<b>g</b> Applied to underdistributions of prior years			
<b>h</b> Applied to 2020 distributable amount			
<b>i</b> Carryover from 2015 not applied (see instructions)			
<b>j</b> Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
<b>4</b> Distributions for 2020 from Section D, line 7: \$			
<b>a</b> Applied to underdistributions of prior years			
<b>b</b> Applied to 2020 distributable amount			
<b>c</b> Remainder. Subtract lines 4a and 4b from line 4.			
<b>5</b> Remaining underdistributions for years prior to 2020, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions.			
<b>6</b> Remaining underdistributions for 2020. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.			
<b>7</b> <b>Excess distributions carryover to 2021.</b> Add lines 3j and 4c.			
<b>8</b> Breakdown of line 7:			
<b>a</b> Excess from 2016			
<b>b</b> Excess from 2017			
<b>c</b> Excess from 2018			
<b>d</b> Excess from 2019			
<b>e</b> Excess from 2020			

Schedule A (Form 990 or 990-EZ) 2020

**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.)

FORM 990, SCHEDULE A - PUBLIC SUPPORT

IN ADDITION TO THE PUBLIC SUPPORT SESAME WORKSHOP GENERATES TO FUND ITS

OWN EDUCATIONAL INITIATIVES IN THE US AND AROUND THE WORLD, SESAME

WORKSHOP ALSO WORKS WITH THE PUBLIC BROADCASTING SERVICE (PBS) AND ITS

LOCAL MEMBER STATIONS TO SUPPORT THEIR OWN PUBLIC FUNDRAISING EFFORTS.

THIS SUPPORT INCLUDES PROVIDING TO THEM THE USE OF THE SESAME STREET

BRAND, CHARACTERS, AND PRODUCTS IN FUNDRAISING CAMPAIGNS, AUCTIONS, AND

LOCAL PBS STATION EVENTS. SESAME WORKSHOP DOES NOT HAVE ACCESS TO THE

AMOUNT OF MONEY RAISED FROM THIS SUPPORT.

SCHEDULE A, PART II - OTHER INCOME

DESCRIPTION SPECIAL EVENTS ACTIVITIES

2016 139,200

2017 148,500

2018 280,500

2019

2020

# Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury  
Internal Revenue Service

# Schedule of Contributors

▶ Attach to Form 990, Form 990-EZ, or Form 990-PF.  
▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

OMB No. 1545-0047

# 2020

Name of the organization

SESAME WORKSHOP

Employer identification number

13-2655731

Organization type (check one):

**Filers of:**

**Section:**

Form 990 or 990-EZ

501(c)( 3 ) (enter number) organization

4947(a)(1) nonexempt charitable trust **not** treated as a private foundation

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

4947(a)(1) nonexempt charitable trust treated as a private foundation

501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.

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

**General Rule**

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

**Special Rules**

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

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

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

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

Name of organization  SESAME WORKSHOP	Employer identification number  13-2655731
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**Part I Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	 <hr/> <hr/> <hr/>	\$ 22,883,246.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2	 <hr/> <hr/> <hr/>	\$ 15,766,352.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
3	 <hr/> <hr/> <hr/>	\$ 5,567,916.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
4	 <hr/> <hr/> <hr/>	\$ 2,643,481.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
5	 <hr/> <hr/> <hr/>	\$ 2,200,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
6	 <hr/> <hr/> <hr/>	\$ 2,000,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)



Name of organization  SESAME WORKSHOP	Employer identification number  13-2655731
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**Part I Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7	<hr/> <hr/> <hr/>	\$ 1,539,017.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	<hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	<hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	<hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	<hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	<hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	<hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization  SESAME WORKSHOP	Employer identification number  13-2655731
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**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
	_____	\$ _____	_____
	_____	\$ _____	_____
	_____	\$ _____	_____
	_____	\$ _____	_____
	_____	\$ _____	_____
	_____	\$ _____	_____
	_____	\$ _____	_____
	_____	\$ _____	_____

Name of organization  SESAME WORKSHOP	Employer identification number  13-2655731
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**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 Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
<b>(e) Transfer of gift</b>			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
<b>(e) Transfer of gift</b>			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
<b>(e) Transfer of gift</b>			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
<b>(e) Transfer of gift</b>			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	

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

**Political Campaign and Lobbying Activities**

OMB No. 1545-0047

**2020**

**Open to Public Inspection**

Department of the Treasury  
Internal Revenue Service

**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](http://www.irs.gov/Form990) for instructions and the latest information.**

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

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

**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.

Name of organization <p style="text-align: center;">SESAME WORKSHOP</p>	Employer identification number <p style="text-align: center;">13-2655731</p>
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**Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.**

- 1 Provide a description of the organization's direct and indirect political campaign activities in Part IV.
- 2 Political campaign activity expenditures ..... ▶ \$ \_\_\_\_\_
- 3 Volunteer hours for political campaign activities ..... \_\_\_\_\_

**Part I-B Complete if the organization is exempt under section 501(c)(3).**

- 1 Enter the amount of any excise tax incurred by the organization under section 4955 ..... ▶ \$ \_\_\_\_\_
- 2 Enter the amount of any excise tax incurred by organization managers under section 4955 ..... ▶ \$ \_\_\_\_\_
- 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? .....  Yes  No
- 4a Was a correction made? .....  Yes  No
- b If "Yes," describe in Part IV.

**Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).**

- 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities ..... ▶ \$ \_\_\_\_\_
- 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities ..... ▶ \$ \_\_\_\_\_
- 3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b ..... ▶ \$ \_\_\_\_\_
- 4 Did the filing organization file **Form 1120-POL** for this year? .....  Yes  No
- 5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0-.	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-.

**For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.** **Schedule C (Form 990 or 990-EZ) 2020**

**Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).**

- A** 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 share of excess lobbying expenditures).
- B** Check  if the filing organization checked box A and "limited control" provisions apply.

<b>Limits on Lobbying Expenditures</b> (The term "expenditures" means amounts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals												
<b>1a</b>	Total lobbying expenditures to influence public opinion (grassroots lobbying) .....														
<b>b</b>	Total lobbying expenditures to influence a legislative body (direct lobbying) .....	32,111.													
<b>c</b>	Total lobbying expenditures (add lines 1a and 1b) .....	32,111.													
<b>d</b>	Other exempt purpose expenditures .....	182,548,741.													
<b>e</b>	Total exempt purpose expenditures (add lines 1c and 1d) .....	182,580,852.													
<b>f</b>	Lobbying nontaxable amount. Enter the amount from the following table in both columns.	1,000,000.													
<table border="1" style="width: 100%;"> <thead> <tr> <th style="width: 50%;">If the amount on line 1e, column (a) or (b) is:</th> <th style="width: 50%;">The lobbying nontaxable amount is:</th> </tr> </thead> <tbody> <tr> <td>Not over \$500,000</td> <td>20% of the amount on line 1e.</td> </tr> <tr> <td>Over \$500,000 but not over \$1,000,000</td> <td>\$100,000 plus 15% of the excess over \$500,000.</td> </tr> <tr> <td>Over \$1,000,000 but not over \$1,500,000</td> <td>\$175,000 plus 10% of the excess over \$1,000,000.</td> </tr> <tr> <td>Over \$1,500,000 but not over \$17,000,000</td> <td>\$225,000 plus 5% of the excess over \$1,500,000.</td> </tr> <tr> <td>Over \$17,000,000</td> <td>\$1,000,000.</td> </tr> </tbody> </table>		If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	Not over \$500,000	20% of the amount on line 1e.	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.	Over \$17,000,000	\$1,000,000.		
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:														
Not over \$500,000	20% of the amount on line 1e.														
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.														
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.														
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.														
Over \$17,000,000	\$1,000,000.														
<b>g</b>	Grassroots nontaxable amount (enter 25% of line 1f) .....	250,000.													
<b>h</b>	Subtract line 1g from line 1a. If zero or less, enter -0- .....	0.													
<b>i</b>	Subtract line 1f from line 1c. If zero or less, enter -0- .....	0.													
<b>j</b>	If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? .....		<input type="checkbox"/> Yes <input type="checkbox"/> No												

**4-Year Averaging Period Under Section 501(h)**  
(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the separate instructions for lines 2a through 2f.)

<b>Lobbying Expenditures During 4-Year Averaging Period</b>					
Calendar year (or fiscal year beginning in)	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) Total
<b>2a</b> Lobbying nontaxable amount	1,000,000.	1,000,000.	1,000,000.	1,000,000.	4,000,000.
<b>b</b> Lobbying ceiling amount (150% of line 2a, column(e))					6,000,000.
<b>c</b> Total lobbying expenditures	65,714.			32,111.	97,825.
<b>d</b> Grassroots nontaxable amount	250,000.	250,000.	250,000.	250,000.	1,000,000.
<b>e</b> Grassroots ceiling amount (150% of line 2d, column (e))					1,500,000.
<b>f</b> Grassroots lobbying expenditures					

**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)).**

	(a)		(b)
	Yes	No	Amount
<b>1</b> 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:			
<b>a</b> Volunteers? .....			
<b>b</b> Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? ..			
<b>c</b> Media advertisements? .....			
<b>d</b> Mailings to members, legislators, or the public? .....			
<b>e</b> Publications, or published or broadcast statements? .....			
<b>f</b> Grants to other organizations for lobbying purposes? .....			
<b>g</b> Direct contact with legislators, their staffs, government officials, or a legislative body? .....			
<b>h</b> Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? .....			
<b>i</b> Other activities? .....			
<b>j</b> Total. Add lines 1c through 1i .....			
<b>2a</b> Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? .....			
<b>b</b> If "Yes," enter the amount of any tax incurred under section 4912 .....			
<b>c</b> If "Yes," enter the amount of any tax incurred by organization managers under section 4912 .....			
<b>d</b> If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? .....			

**Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).**

	Yes	No
<b>1</b> Were substantially all (90% or more) dues received nondeductible by members? .....	<b>1</b>	
<b>2</b> Did the organization make only in-house lobbying expenditures of \$2,000 or less? .....	<b>2</b>	
<b>3</b> Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year? .....	<b>3</b>	

**Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, line 3, is answered "Yes."**

<b>1</b> Dues, assessments and similar amounts from members .....	<b>1</b>	
<b>2</b> Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		
<b>a</b> Current year .....	<b>2a</b>	
<b>b</b> Carryover from last year .....	<b>2b</b>	
<b>c</b> Total .....	<b>2c</b>	
<b>3</b> Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues .....	<b>3</b>	
<b>4</b> If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year? .....	<b>4</b>	
<b>5</b> Taxable amount of lobbying and political expenditures (See instructions) .....	<b>5</b>	

**Part IV Supplemental Information**

Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A, lines 1 and 2 (See instructions); and Part II-B, line 1. Also, complete this part for any additional information.

SCHEDULE C

TRADITIONALLY, SESAME WORKSHOP DOES NOT ENGAGE IN LOBBYING ACTIVITIES. IN

FISCAL YEAR 2021, SESAME WORKSHOP INCURRED \$32,111 IN LOBBYING

EXPENDITURES TO ENCOURAGE GOVERNMENTAL FINANCIAL SUPPORT FOR ITS EARLY

CHILDHOOD LEARNING PROGRAMS (PRIMARILY FOR DISPLACED CHILDREN OR REFUGEES

IN AREAS OF HIGH CRISIS).

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

2020

Open to Public Inspection

Name of the organization: SESAME WORKSHOP; Employer identification number: 13-2655731

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

Table with 2 columns: (a) Donor advised funds, (b) Funds and other accounts. Rows include: 1 Total number at end of year, 2 Aggregate value of contributions to (during year), 3 Aggregate value of grants from (during year), 4 Aggregate value at end of year, 5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? (Yes/No), 6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? (Yes/No)

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

Table with 2 columns: Held at the End of the Tax Year. Rows include: 1 Purpose(s) of conservation easements held by the organization (check all that apply): Preservation of land for public use, Protection of natural habitat, Preservation of open space, Preservation of a historically important land area, Preservation of a certified historic structure; 2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year: a Total number of conservation easements, b Total acreage restricted by conservation easements, c Number of conservation easements on a certified historic structure included in (a), d Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register; 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year; 4 Number of states where property subject to conservation easement is located; 5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? (Yes/No); 6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year; 7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year; 8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? (Yes/No); 9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

Table with 2 columns: \$. Rows include: 1a If the organization elected, as permitted under FASB ASC 958, not 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 furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items.; 1b If the organization elected, as permitted under FASB ASC 958, 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 furtherance 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 treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items: a Revenue included on Form 990, Part VIII, line 1; b Assets included in Form 990, Part X

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule D (Form 990) 2020

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

- 3 Using the organization's acquisition, accession, and other records, check any of the following that make significant use of its collection items (check all that apply):
- a  Public exhibition
  - b  Scholarly research
  - c  Preservation for future generations
  - d  Loan or exchange program
  - e  Other \_\_\_\_\_
- 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.
- 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?  Yes  No

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

- 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?  Yes  No
- b If "Yes," explain the arrangement in Part XIII and complete the following table:
- |                                 | Amount |
|---------------------------------|--------|
| c Beginning balance             | 1c     |
| d Additions during the year     | 1d     |
| e Distributions during the year | 1e     |
| f Ending balance                | 1f     |
- 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?  Yes  No
- b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII

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

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

- 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
- a Board designated or quasi-endowment \_\_\_\_\_%
  - b Permanent endowment \_\_\_\_\_%
  - c Term endowment \_\_\_\_\_%
- The percentages on lines 2a, 2b, and 2c should equal 100%.
- 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:
- |   | Yes    | No |
|---|--------|----|
| (i) Unrelated organizations   | 3a(i)  |    |
| (ii) Related organizations  | 3a(ii) |    |
| b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? <input type="checkbox"/> | 3b     |    |
- 4 Describe in Part XIII the intended uses of the organization's endowment funds.

**Part VI Land, Buildings, and Equipment.**

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements		22,519,286.	10,991,126.	11,528,160.
d Equipment		13,198,928.	4,769,527.	8,429,401.
e Other		5,062,087.	4,590,651.	471,436.
<b>Total.</b> Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				20,428,997.



**Part VII Investments - Other Securities.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely held equity interests		
(3) Other		
(A) GLOBAL EQUITIES	120,945,000.	END-OF-YEAR MARKET VALUE
(B) ABSOLUTE RETURN	32,939,000.	END-OF-YEAR MARKET VALUE
(C) CREDIT	6,155,000.	END-OF-YEAR MARKET VALUE
(D) HEDGED EQUITIES	35,995,000.	END-OF-YEAR MARKET VALUE
(E) PRIVATE DEBT	20,373,000.	END-OF-YEAR MARKET VALUE
(F) PRIVATE EQUITY	3,575,000.	END-OF-YEAR MARKET VALUE
(G) PRIVATE EQUITY REALESTATE	1,179,000.	END-OF-YEAR MARKET VALUE
(H) VENTURE CAPTIAL	44,692,000.	END-OF-YEAR MARKET VALUE
<b>Total.</b> (Col. (b) must equal Form 990, Part X, col. (B) line 12.)	265,853,000.	

**Part VIII Investments - Program Related.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
<b>Total.</b> (Col. (b) must equal Form 990, Part X, col. (B) line 13.)		

**Part IX Other Assets.**

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

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

**Part X Other Liabilities.**

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

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) DEFERRED RENT PAYABLE	11,546,358.
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
<b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 25.)	11,546,358.

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

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

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

Table with 5 main rows and sub-rows (a-e) for adjustments. Columns include line numbers and descriptions.

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

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

Table with 5 main rows and sub-rows (a-e) for adjustments. Columns include line numbers and descriptions.

Part XIII Supplemental Information.

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

PART X, LINE 2:

FIN 48 STATEMENT

THE COMPANY FOLLOWS GUIDANCE THAT CLARIFIES THE ACCOUNTING FOR UNCERTAINTY

IN TAX POSITIONS TAKEN OR EXPECTED TO BE TAKEN IN A TAX RETURN, INCLUDING

ISSUES RELATING TO FINANCIAL STATEMENT RECOGNITION AND MEASUREMENT. THIS

GUIDANCE PROVIDES THAT THE TAX EFFECTS FROM AN UNCERTAIN TAX POSITION CAN

ONLY BE RECOGNIZED IN THE CONSOLIDATED FINANCIAL STATEMENTS IF THE

POSITION IS "MORE-LIKELY-THAN-NOT" TO BE SUSTAINED IF THE POSITION WERE TO

BE CHALLENGED BY A TAXING AUTHORITY. THE ASSESSMENT OF THE TAX POSITION IS

BASED SOLELY ON THE TECHNICAL MERITS OF THE POSITION, WITHOUT REGARD TO

THE LIKELIHOOD THAT THE TAX POSITION MAY BE CHALLENGED.

**Part XIII** Supplemental Information (continued)

THE COMPANY IS EXEMPT FROM INCOME TAX UNDER INTERNAL REVENUE CODE (THE  
"CODE") SECTION 501(C)(3), THOUGH IT IS SUBJECT TO TAX ON INCOME UNRELATED  
TO ITS EXEMPT PURPOSE, UNLESS THAT INCOME IS OTHERWISE EXCLUDED BY THE  
CODE. THE COMPANY HAS PROCESSES PRESENTLY IN PLACE TO ENSURE THE  
MAINTENANCE OF ITS TAX-EXEMPT STATUS; TO IDENTIFY AND REPORT UNRELATED  
INCOME; TO DETERMINE ITS FILING AND TAX OBLIGATIONS IN JURISDICTIONS FOR  
WHICH IT HAS NEXUS; AND TO IDENTIFY AND EVALUATE OTHER MATTERS THAT MAY BE  
CONSIDERED TAX POSITIONS. THE COMPANY HAS DETERMINED THAT THERE ARE NO  
MATERIAL UNCERTAIN TAX POSITIONS THAT REQUIRE RECOGNITION OR DISCLOSURE IN  
THE CONSOLIDATED FINANCIAL STATEMENTS. IN ADDITION, THE COMPANY HAS NOT  
RECORDED A PROVISION FOR INCOME TAXES AS IT HAS NO MATERIAL TAX LIABILITY  
FROM UNRELATED BUSINESS INCOME ACTIVITIES.

**SCHEDULE F  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

**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.

▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047

**2020**

Open to Public  
Inspection

Name of the organization

SESAME WORKSHOP

Employer identification number

13-2655731

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

**1 For grantmakers.** Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? .....  **Yes**  **No**

**2 For grantmakers.** Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States.

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

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in the region	(d) Activities conducted in the region (by type) (such as, fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in the region	(f) Total expenditures for and investments in the region
EAST ASIA AND THE PACIFIC	2	15	PROGRAM SERVICES	DIST. OF EDUC. MEDIA	2,958,128.
EUROPE	0	4	PROGRAM SERVICES	DIST. OF EDUC. MEDIA	747,370.
MIDDLE EAST AND NORTH AFRICA	0	0	PROGRAM SERVICES	DIST. OF EDUC. MEDIA	19,274,254.
NORTH AMERICA	0	8	PROGRAM SERVICES	DIST. OF EDUC. MEDIA	1,569,790.
SUB-SAHARAN AFRICA	0	0	PROGRAM SERVICES	DIST. OF EDUC. MEDIA	2,699,677.
SOUTH AMERICA	0	8	PROGRAM SERVICES	DIST. OF EDUC. MEDIA	1,148,049.
SOUTH AND CENTRAL ASIA	2	41	PROGRAM SERVICES	DIST. OF EDUC. MEDIA	12,565,096.
CENTRAL AMERICA/CARIBBEAN	0	0	PROGRAM SERVICES	DIST. OF EDUC. MEDIA	16,494.
<b>3 a</b> Subtotal .....	4	76			40,978,858.
<b>b</b> Total from continuation sheets to Part I .....	0	0			179,718,137.
<b>c</b> <b>Totals</b> (add lines 3a and 3b) .....	4	76			220,696,995.

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

Schedule F (Form 990) 2020

**Part I** Continuation of Activities per Region. (Schedule F (Form 990), Part I, line 3)

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
SOUTH ASIA	0	0	GRANTMAKING		6,733,551.
SOUTH AMERICA	0	0	GRANTMAKING		30,607.
CENTRAL AMERICA/CARIBBEAN	0	0	INVESTMENTS		161,062,435.
EUROPE	0	0	INVESTMENTS		11,891,544.
<b>Totals</b> .....					179,718,137.

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

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SOUTH ASIA	PROGRAM IMPLEMENTATION	6,190,030.		0.		
		SOUTH ASIA	GENERAL SUPPLEMENT	543,521.		0.		
		SOUTH AMERICA	GENERAL SUPPLEMENT	30,607.		0.		

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 ..... **0**

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

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

Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of noncash assistance	(g) Description of noncash assistance	(h) Method of valuation (book, FMV, appraisal, other)

**Part IV Foreign Forms**

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



**Part V Supplemental Information**

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

## SCHEDULE F

## PART I, LINE 1 - MONITORING OF FOREIGN GRANTEES.

SESAME WORKSHOP ADOPTS A COMPREHENSIVE PROCEDURE TO ENSURE THAT THE ORGANIZATIONS IT PROVIDES GRANTS TO ARE PERFORMING SERVICES AND HOLDING PROGRAMS THAT ALIGN WITH THE WORKSHOP'S TAX-EXEMPT MISSION. THE WORKSHOP'S DUE DILIGENCE PROCEDURES ARE DESCRIBED, LIKEWISE, IN SCHEDULE I.

FOR FOREIGN GRANTEES. THE WORKSHOP CONDUCTS A PRE-GRANT RISK ASSESSMENT TO ENSURE THAT THE ORGANIZATION'S PROGRAMMATIC CAPABILITIES, POLICIES AND FINANCIAL CONTROLS ALIGN WITH THE PROGRAMMATIC OBJECTIVES OF THE GRANT. THE WORKSHOP MONITORS THE USE OF THESE FUNDS THROUGHOUT THE YEAR, REQUIRING PERIODIC PROGRESS REPORTS (PER A PRE-DEFINED SCHEDULE AND PRE-ESTABLISHED PARAMETERS), WITH A CONCLUDING FINANCIAL REPORT AT YEAR END. AS NEEDED, SESAME WORKSHOP PERSONNEL WILL CONDUCT SITE VISITS TO MONITOR THE EFFECTIVENESS OF SUPPORTED PROGRAMS. THE WORKSHOP RESERVES THE RIGHT TO REQUEST ANY ADDITIONAL REPORTING AS NEEDED TO SATISFY THE ORGANIZATION THAT FUNDS ARE USED FOR EXEMPT CHARITABLE PURPOSE, AS WELL AS TO CONDUCT AUDITS OF THE GRANT SPENDING.

## PART IV

SESAME WORKSHOP INVESTS IN DOMESTIC AND FOREIGN LIMITED PARTNERSHIPS THAT MAY OWN AN INTEREST IN A FOREIGN CORPORATION, PASSIVE FOREIGN INVESTMENT COMPANY, OR FOREIGN PARTNERSHIP. NEVERTHELESS, THE WORKSHOP'S INVESTMENT ACTIVITIES MAY NOT REACH THE THRESHOLDS REQUIRED FOR FILING THE FORMS 926, 5471, 8621 OR 8865. IN ADDITION, SESAME WORKSHOP IS THE PARENT ORGANIZATION TO VARIOUS FOREIGN SUBSIDIARIES FOR

**Part V** Supplemental Information

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

WHICH A FORM 5471 MAY BE REQUIRED. TO THE EXTENT ANY OF THESE FORMS ARE

COMPLETED, THEY HAVE BEEN FILED WITH THE ORGANIZATION'S FORM 990-T.

Multiple horizontal lines for supplemental information.

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

**Supplemental Information Regarding Fundraising or Gaming Activities**

OMB No. 1545-0047

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.

**2020**

**Open to Public Inspection**

Department of the Treasury  
Internal Revenue Service

▶ **Attach to Form 990 or Form 990-EZ.**

▶ **Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.**

Name of the organization: **SESAME WORKSHOP**  
Employer identification number: **13-2655731**

**Part I Fundraising Activities.** Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.

**1** Indicate whether the organization raised funds through any of the following activities. Check all that apply.

- a  Mail solicitations
- b  Internet and email solicitations
- c  Phone solicitations
- d  In-person solicitations
- e  Solicitation of non-government grants
- f  Solicitation of government grants
- g  Special fundraising events

**2 a** Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services?  **Yes**  **No**

**b** If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
EVENT ASSOCIATES INC - 162 W. 56TH STREET #405, NEW YORK,	GALA		X	0.	70,000.	-70,000.
<b>Total</b>					70,000.	-70,000.

**3** List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

AL, AK, AZ, AR, CA, CO, CT, DE, FL, GA, HI, ID, IL, IN, IA, KS, KY, LA, ME, MD, MA, MI, MN, MS, MO  
MT, NE, NV, NH, NJ, NM, NY, NC, ND, OH, OK, OR, PA, RI, SC, SD, TN, TX, UT, VT, VA, WA, WV, WI, WY

**Part II Fundraising Events.** Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

		(a) Event #1	(b) Event #2	(c) Other events NONE	(d) Total events (add col. (a) through col. (c))
		SW ANNUAL GALA (event type)	(event type)	(total number)	
Revenue	<b>1</b> Gross receipts .....	2,447,602.			2,447,602.
	<b>2</b> Less: Contributions .....	2,447,602.			2,447,602.
	<b>3</b> Gross income (line 1 minus line 2) .....				
Direct Expenses	<b>4</b> Cash prizes .....				
	<b>5</b> Noncash prizes .....				
	<b>6</b> Rent/facility costs .....				
	<b>7</b> Food and beverages .....				
	<b>8</b> Entertainment .....	281,176.			281,176.
	<b>9</b> Other direct expenses .....	335,213.			335,213.
	<b>10</b> Direct expense summary. Add lines 4 through 9 in column (d) .....				616,389.
	<b>11</b> Net income summary. Subtract line 10 from line 3, column (d) .....				-616,389.

**Part III Gaming.** Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
Revenue	<b>1</b> Gross revenue .....				
	<b>2</b> Cash prizes .....				
Direct Expenses	<b>3</b> Noncash prizes .....				
	<b>4</b> Rent/facility costs .....				
	<b>5</b> Other direct expenses .....				
	<b>6</b> Volunteer labor .....	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	
	<b>7</b> Direct expense summary. Add lines 2 through 5 in column (d) .....				
	<b>8</b> Net gaming income summary. Subtract line 7 from line 1, column (d) .....				

**9** Enter the state(s) in which the organization conducts gaming activities: \_\_\_\_\_

**a** Is the organization licensed to conduct gaming activities in each of these states?  Yes  No

**b** If "No," explain: \_\_\_\_\_

**10a** Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year?  Yes  No

**b** If "Yes," explain: \_\_\_\_\_

- 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:
 

a The organization's facility	13a	%
b An outside facility	13b	%
- 14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name ▶ \_\_\_\_\_

Address ▶ \_\_\_\_\_

- 15a Does the organization have a contract with a third party from whom the organization receives gaming revenue?  Yes  No

b If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ \_\_\_\_\_ and the amount of gaming revenue retained by the third party ▶ \$ \_\_\_\_\_

c If "Yes," enter name and address of the third party:

Name ▶ \_\_\_\_\_

Address ▶ \_\_\_\_\_

16 Gaming manager information:

Name ▶ \_\_\_\_\_

Gaming manager compensation ▶ \$ \_\_\_\_\_

Description of services provided ▶ \_\_\_\_\_

- Director/officer
- Employee
- Independent contractor

17 Mandatory distributions:

a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?  Yes  No

b 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 ▶ \$ \_\_\_\_\_

**Part IV Supplemental Information.** Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.

SCHEDULE G, PART I

AS A RESULT OF THE COVID-19 PANDEMIC, THE SESAME WORKSHOP BENEFIT GALA

WAS HELD VIRTUALLY AS A PRERECORDED EVENT AND STREAMED ONLINE FOR

DONORS ON JUNE 2, 2021. THE PROGRAM WAS THEN MADE AVAILABLE TO STREAM

FOR FREE TO THE GENERAL PUBLIC BETWEEN JUNE 6TH AND JUNE 30TH. ALL

REVENUES RAISED FROM THE GALA REPRESENT CONTRIBUTION DOLLARS AS THE

VIRTUAL ATTENDEES RECEIVED NO TANGIBLE BENEFITS FROM THE EVENT.

EXPENSES INCURRED FROM THE EVENT REPRESENT ENTERTAINMENT AND PRODUCTION

COSTS FOR THE PERFORMERS WHO PARTICIPATED IN THE PRERECORDED CONTENT.

**Part IV** Supplemental Information (continued)

SESAME WORKSHOP HIRES PROFESSIONAL FUNDRAISING COUNSEL TO PARTICIPATE  
 IN THE EVENT PLANNING AND TO PROVIDE ADMINISTRATIVE SERVICE ASSOCIATED  
 WITH THE EVENT. IN THE INTEREST OF FULL DISCLOSURE, EVENT ASSOCIATES  
 INC. HAS BEEN REPORTED IN SCHEDULE G EVEN THOUGH THEY DID NOT ACTUALLY  
 PERFORM ANY FUNDRAISING ACTIVITIES.

**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](http://www.irs.gov/Form990) for the latest information.**

OMB No. 1545-0047

**2020**

**Open to Public  
Inspection**

Name of the organization **SESAME WORKSHOP** Employer identification number **13-2655731**

**Part I General Information on Grants and Assistance**

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

**Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

<b>1 (a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section (if applicable)	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of noncash assistance	<b>(h)</b> Purpose of grant or assistance
INTERNATIONAL RESCUE COMMITTEE 122 EAST 42ND STREET, 12TH FLOOR NEW YORK, NY 10168	13-5660870	501(C)(3)	16,864,866.	0.			PROGRAM IMPLEMENTATION
SESAME WORKSHOP INTERNATIONAL, INC. - 1900 BROADWAY - NEW YORK, NY 10023	83-1810098	501(C)(3)	1,655,165.	0.			GENERAL SUPPORT
NEW YORK UNIVERSITY 105 EAST 17TH STREET NEW YORK, NY 10012	13-5562308	501(C)(3)	3,886,076.	0.			PROGRAM IMPLEMENTATION
WNET - THIRTEEN 825 EIGHTH AVENUE NEW YORK, NY 10019	26-2810489	501(C)(3)	150,000.	0.			PROGRAM IMPLEMENTATION
CENTER FOR US GLOBAL LEADERSHIP 1129 20TH STREET WASHINGTON, DC 20036	74-3093659	501(C)(3)	37,000.	0.			GENERAL SUPPORT
CONCORDIA SUMMIT INC. 404 5TH AVE, SUITE 501 NEW YORK, NY 10018	27-5121564	501(C)(3)	10,000.	0.			GENERAL SUPPORT

- 2** Enter total number of section 501(c)(3) and government organizations listed in the line 1 table **6.**
- 3** Enter total number of other organizations listed in the line 1 table **0.**

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

Schedule I (Form 990) 2020

**Part III Grants and Other Assistance to Domestic Individuals.** Complete if the organization answered "Yes" on Form 990, Part IV, line 22.  
Part III can be duplicated if additional space is needed.

(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, line 2; Part III, column (b); and any other additional information.

SCHEDULE I, PART II

SESAME WORKSHOP AWARDS SUB-GRANTS TO SUPPORT ITS PROGRAMMATIC WORK. FOR

THESE SUB-GRANTS, THE WORKSHOP CONDUCTED PRE-GRANT RISK ASSESSMENTS TO

ENSURE THAT THE ORGANIZATION'S PROGRAMMATIC CAPABILITIES, POLICIES AND

FINANCIAL CONTROLS ALIGN WITH THE PROGRAMMATIC OBJECTIVES OF THE GRANT.

THE WORKSHOP MONITORS THE USE OF THESE FUNDS THROUGHOUT THE YEAR,

REQUIRING PERIODIC PROGRESS REPORTS (PER A PRE-DEFINED SCHEDULE AND

PRE-ESTABLISHED PARAMETERS), WITH A CONCLUDING FINANCIAL REPORT AT YEAR

END. AS NEEDED, SESAME WORKSHOP PERSONNEL WILL CONDUCT SITE VISITS TO



**Part IV** Supplemental Information

MONITOR THE EFFECTIVENESS OF SUPPORTED PROGRAMS. THE WORKSHOP RESERVES THE RIGHT TO REQUEST ANY ADDITIONAL REPORTING AS NEEDED TO SATISFY THE ORGANIZATION THAT FUNDS ARE USED FOR EXEMPT CHARITABLE PURPOSES, AS WELL AS TO CONDUCT AUDITS OF THE GRANT SPENDING.

IN ADDITION, SESAME WORKSHOP SUPPORTS ORGANIZATIONS THROUGH THEIR GALAS AND OTHER SPECIAL EVENT ACTIVITIES. TO THE EXTENT THAT THE PAYMENT TO THESE ORGANIZATIONS REPRESENTS A CONTRIBUTION (BEYOND THE GOODS AND SERVICES RECEIVED), SESAME REPORTS THESE AMOUNTS AS CONTRIBUTIONS ON SCHEDULE I. SESAME WORKSHOP'S PRESIDENT OF SOCIAL IMPACT & PHILANTHROPY SELECTS THOSE ORGANIZATIONS WHOSE MISSION IS EITHER SUPPORTED OR ALIGNED WITH THE WORKSHOP'S MISSION. THE CONTRIBUTION IS APPROVED BY THE PRESIDENT/CEO OF SESAME WORKSHOP. THESE AMOUNTS ARE GENERALLY IMMATERIAL AND DO NOT REQUIRE ADDITIONAL MONITORING.

**SCHEDULE J  
(Form 990)**

**Compensation Information**

OMB No. 1545-0047

**2020**

Open to Public Inspection

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees  
 ▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23.  
 ▶ Attach to Form 990.  
 ▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

Department of the Treasury  
Internal Revenue Service

Name of the organization  
**SESAME WORKSHOP**

Employer identification number  
**13-2655731**

**Part I Questions Regarding Compensation**

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

Schedule J (Form 990) 2020

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

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

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

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1) JEFFREY DUNN PRESIDENT/CEO (THRU 12/31/2020)	(i)	796,494.	285,780.	7,953.	28,500.	33,082.	1,151,809.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) STEPHEN YOUNGWOOD CEO (AS OF 01/01/21)	(i)	496,025.	165,000.	1,646.	20,650.	7,764.	691,085.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(3) SHERRIE WESTIN PRESIDENT (AS OF 01/01/21)	(i)	485,387.	160,050.	4,062.	28,492.	3,402.	681,393.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(4) JOSEPH SALVO EVP GENERAL COUNSEL	(i)	366,823.	123,750.	5,803.	28,500.	38,039.	562,915.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(5) DARYL MINTZ EVP, CFO	(i)	348,401.	117,150.	1,219.	28,500.	43,200.	538,470.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(6) TANYA Z. HAIDER EVP STRATEGY RESEARCH&VENTURES	(i)	333,126.	107,100.	870.	17,000.	43,475.	501,571.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(7) GORDON SCOTT CHAMBERS SVP/GM, EDU. MEDIA & LICENSING	(i)	315,927.	101,239.	1,118.	26,526.	34,989.	479,799.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(8) DIANA LEE CHIEF HUMAN RESOURCES OFFICER	(i)	308,719.	103,950.	4,991.	28,500.	32,607.	478,767.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(9) SHARI ROSENFELD SVP INTERNATIONAL SOCIAL IMPACT	(i)	321,626.	102,375.	2,672.	28,500.	11,364.	466,537.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(10) GEORGE E. WELLS EVP & HEAD OF GLOBAL MEDIA AND EDUCATION	(i)	323,018.	102,421.	841.	28,117.	11,616.	466,013.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(11) KAY N. WILSON STALLINGS EVP, CREATIVE & PRODUCTION	(i)	336,971.	100,033.	1,925.	18,285.	2,945.	460,159.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(12) SAMANTHA A. SALTIEL EVP & CHIEF MARKETING OFFICER	(i)	294,418.	94,500.	791.	13,500.	29,764.	432,973.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(13) BENJAMIN LEHMANN SVP & HEAD OF SESAME STREET AND LIVE	(i)	291,124.	81,576.	1,308.	13,317.	44,725.	432,050.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

**Part III Supplemental Information**

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

PART I, LINE 7:

SESAME WORKSHOP MAINTAINS A TARGETED INCENTIVE COMPENSATION PROGRAM WHICH  
 FULL TIME STAFF EMPLOYEES ABOVE A CERTAIN JOB LEVEL ARE ELIGIBLE. THE  
 TARGET AMOUNT OF EACH EMPLOYEE'S INCENTIVE COMPENSATION IS BASED ON A  
 COMBINATION OF JOB LEVEL, INDIVIDUAL PERFORMANCE AND ORGANIZATION  
 PERFORMANCE. THE BOARD OF TRUSTEES DETERMINES WHETHER INCENTIVE  
 COMPENSATION PAYMENTS WILL BE MADE FOR EACH GIVEN YEAR AND THE TOTAL AMOUNT  
 AVAILABLE FOR INCENTIVE COMPENSATION. INCENTIVE COMPENSATION AWARDS TO  
 OFFICERS AND KEY EMPLOYEES ARE APPROVED BY THE PERSONNEL AND COMPENSATION  
 COMMITTEE BASED ON COMPARABLE MARKET DATA, AS DESCRIBED IN SCHEDULE O.

GENERAL STATEMENT ABOUT FORM 990 COMPENSATION

THE FORM 990 COMPENSATION REPORTED FOR THE OFFICERS, KEY EMPLOYEES AND  
 THE TOP FIVE MOST HIGHLY COMPENSATED EMPLOYEES, AS REPORTED IN FORM  
 990, PART VII AND SCHEDULE J IS BASED ON AMOUNTS REPORTED ON THE FORMS  
 W-2 FOR THE YEAR ENDED DECEMBER 31, 2020. THE AMOUNTS IN EACH COLUMN ON  
 SCHEDULE J REPRESENT THE FOLLOWING:

**Part III Supplemental Information**

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

COLUMN B(I): BASE COMPENSATION REDUCED BY PRE-TAX DEDUCTIONS TO

MEDICAL OR OTHER CAFETERIA BENEFITS

COLUMNS B(II): INCENTIVE COMPENSATION RECEIVED IN CALENDAR YEAR 2020

COLUMNS B(III): NON-TRADITIONAL PAYMENTS SUCH AS A VACATION PAYOUT,

EMPLOYER CONTRIBUTIONS TO GROUP TERM LIFE INSURANCE IN EXCESS OF \$50K,

AS WELL AS SEVERANCE PAYMENTS (WHEN APPLICABLE)

COLUMN C: EMPLOYER CONTRIBUTIONS TO 401K PLAN

COLUMN D: EMPLOYER AND EMPLOYEE CONTRIBUTIONS TOWARDS NON-TAXABLE

BENEFITS, INCLUDING MEDICAL INSURANCE, DENTAL INSURANCE, FLEXIBLE

SPENDING ACCOUNTS, ETC.

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

**Transactions With Interested Persons**

OMB No. 1545-0047

**2020**

Department of the Treasury  
Internal Revenue Service

▶ **Complete if the organization answered "Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.**  
▶ **Attach to Form 990 or Form 990-EZ.**  
▶ **Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.**

**Open To Public Inspection**

Name of the organization: **SESAME WORKSHOP**      Employer identification number: **13-2655731**

**Part I Excess Benefit Transactions** (section 501(c)(3), section 501(c)(4), and section 501(c)(29) organizations only).  
Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b.

1 (a) Name of disqualified person	(b) Relationship between disqualified person and organization	(c) Description of transaction	(d) Corrected?	
			Yes	No

2 Enter the amount of tax incurred by the organization managers or disqualified persons during the year under section 4958 ..... ▶ \$ \_\_\_\_\_  
3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization ..... ▶ \$ \_\_\_\_\_

**Part II Loans to and/or From Interested Persons.**

Complete if the organization answered "Yes" on Form 990-EZ, Part V, line 38a or Form 990, Part IV, line 26; or if the organization reported an amount on Form 990, Part X, line 5, 6, or 22.

(a) Name of interested person	(b) Relationship with organization	(c) Purpose of loan	(d) Loan to or from the organization?		(e) Original principal amount	(f) Balance due	(g) In default?		(h) Approved by board or committee?		(i) Written agreement?	
			To	From			Yes	No	Yes	No	Yes	No

Total ..... ▶ \$ \_\_\_\_\_

**Part III Grants or Assistance Benefiting Interested Persons.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 27.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of assistance	(d) Type of assistance	(e) Purpose of assistance

**Part IV Business Transactions Involving Interested Persons.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No
JEFFREY WEISS	BOARD MEMBER	599,000.	SEE PART V		X
SHERRIE WESTIN	OFFICER	540,050.	SEE PART V		X

**Part V Supplemental Information.**

Provide additional information for responses to questions on Schedule L (see instructions).

SCHEDULE L, PART IV, COLUMN D

BOARD OF TRUSTEES MEMBER, JEFFREY WEISS, HAS AN OWNERSHIP INTEREST IN A  
 SESAME WORKSHOP LICENSEE. DURING FISCAL YEAR 2021, SESAME WORKSHOP  
 RECEIVED \$599,000 IN LICENSING FEES FROM THIS ORGANIZATION. THE WEISS  
 FAMILY DIVESTED ITSELF OF THEIR MAJORITY CONTROLLING INTEREST IN  
 FEBRUARY OF 2018, BUT STILL MAINTAINS A MINORITY SHARE IN EXCESS OF  
 35%.

A FAMILY MEMBER OF OFFICER, SHERRIE WESTIN, OWNS AN ORGANIZATION THAT  
 PROVIDED MARKET RESEARCH SERVICES TO SESAME WORKSHOP. DURING FISCAL  
 YEAR 2021, SESAME WORKSHOP PAID THAT ORGANIZATION \$540,050. SESAME  
 WORKSHOP ENGAGED THE SERVICES OF THIS VENDOR WITHOUT ANY INPUT FROM MS.  
 WESTIN. THE TRANSACTION WAS DISCLOSED TO THE BOARD OF DIRECTORS  
 PURSUANT TO THE WORKSHOP'S CONFLICT OF INTEREST PROCESS.

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

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 990-EZ.

▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

OMB No. 1545-0047

**2020**

Open to Public  
Inspection

Name of the organization

SESAME WORKSHOP

Employer identification number

13-2655731

GROSS RECEIPTS EXPLANATION

GROSS RECEIPTS REPORTED ON FORM 990, PAGE 1, BOX G INCLUDES, IN

ADDITION TO REVENUES, THE GROSS SALE PROCEEDS OF SESAME WORKSHOP'S

INVESTMENT PORTFOLIO AS REPORTED IN PART VIII, LINE 7A OF THE FORM 990.

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

DIGITAL PLATFORMS, "SESAME STREET" VIDEOS, INTERACTIVE GAMES AND OTHER

EDUCATIONAL CONTENT ARE AVAILABLE FREE OF CHARGE FOR USERS ON

WWW.SESAMESTREET.ORG, WWW.PBSKIDS.ORG AND WWW.YOUTUBE.COM. INCLUDING

ITS DISTRIBUTION ON BROADCAST, STREAMING VOD AND CABLE TV AND ITS

PRESENCE ON VARIOUS DIGITAL PLATFORMS, "SESAME STREET" REACHES 10.6

MILLION KIDS' AGES 0-8 IN THE U.S. ON A MONTHLY BASIS. ITS CONTINUED

POPULARITY PLACES IT AS THE #2 PRE-SCHOOL SHOW ON PBS. SESAME STREET'S

FREE YOUTUBE CHANNEL RECEIVED OVER 1.7 BILLION VIEWS DOMESTICALLY IN

FISCAL YEAR 2021 (AND 5.1 BILLION VIEWS WORLDWIDE). RESEARCH HAS SHOWN

THAT CHILDREN WHO WATCH "SESAME STREET" CONSISTENTLY PERFORM BETTER

ACADEMICALLY AT EVERY GRADE LEVEL THROUGH HIGH SCHOOL AND HAVE MORE

DEVELOPED SOCIAL SKILLS.

"SESAME STREET" IS ALSO SEEN IN OVER 150 COUNTRIES THROUGH DISTRIBUTION

AGREEMENTS WITH LOCAL PUBLIC AND COMMERCIAL BROADCASTERS. IN ADDITION,

LOCAL ADAPTATIONS OF "SESAME STREET" ARE PRODUCED AND DISTRIBUTED IN

GERMANY, THE NETHERLANDS, LATIN AMERICA, SOUTH AFRICA, INDIA,

BANGLADESH, SOMALIA, ETHIOPIA AND AFGHANISTAN. THE PROGRAM REACHES 150

MILLION KIDS ON A WORLDWIDE BASIS.

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

Schedule O (Form 990 or 990-EZ) 2020

032211 11-20-20



Name of the organization SESAME WORKSHOP	Employer identification number 13-2655731
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IN ADDITION TO THE DISTRIBUTION OF SESAME STREET ON MASS MEDIA PLATFORMS, SESAME WORKSHOP ALSO LEVERAGES IT MEDIA CONTENT AND WHOLE-CHILD CURRICULUM TO REACH KIDS IN FORMAL SCHOOL SETTINGS. IN FY 2021, SESAME WORKSHOP WORKED WITH ITS PARTNER, EDUCATIONAL PUBLISHER MCGRAW HILL (MH), TO EXPAND THE WORKSHOP'S FIRST INTEGRATED PROGRAM INCORPORATING CRITICAL SOCIAL EMOTIONAL LEARNING (SEL) SKILLS INTO MH'S WONDERS ENGLISH LANGUAGE ARTS CURRICULUM FOR ELEMENTARY (GRADES K-5) STUDENTS TO ADDITIONAL STATE TEXTBOOK ADOPTIONS AND TO ALL 50 STATES NATIONALLY.

DURING THE PAST SCHOOL YEAR, MH CONTINUED TO PROMOTE OUR CARING FOR EACH OTHER RESOURCES TO FAMILIES THROUGH SESAME STREET IN COMMUNITIES TO ALL OF ITS SCHOOL-BASED CUSTOMERS NATIONALLY. OUR OTHER SCHOOL PARTNER, TEACHSTONE LLC, WHICH IS THE LEADING PROVIDER OF THE TEACHER EVALUATION SYSTEM, CLASSROOM ASSESSMENT SCORING SYSTEM (CLASS), CONTINUED TO OFFER CONTINUING EDUCATION CREDITS FOR OUR PROFESSIONAL DEVELOPMENT VIDEOS THAT LEVERAGE SESAME STREET CONTENT.

ADDITIONALLY, WE BEGAN DEVELOPMENT OF A DIGITAL TEACHER PLATFORM, LEVERAGING THE FUNDS OF THE SECOND GRANT FROM THE CHAN ZUCKERBERG INITIATIVE, AND SECURED A RESEARCH PAPER, STANFORD UNIVERSITY TO CONDUCT FOCUSED "RESEARCH-TO-PRACTICE" ON THIS PROGRAM THAT IS DESIGNED TO EMBED SEL IN THE CONTEXT EMERGENT LANGUAGE AND LITERACY DEVELOPMENT. WE NOW HAVE FOUR PILOT PROGRAMS IN CALIFORNIA AND NEW YORK AND OVER 28 CLASSROOMS. FINALLY, WE BEGAN THE RESEARCH, ARTICULATION, AND DEVELOPMENT OF A SCHOOL-BASED CURRICULUM FOR OUR COMING TOGETHER INITIATIVE.

Name of the organization SESAME WORKSHOP	Employer identification number 13-2655731
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FORM 990, PART III, LINE 4B, PROGRAM SERVICE ACCOMPLISHMENTS:

INCLUDING FOUNDATIONAL SKILLS, EARLY LEARNING, WASH, AND CHILD PROTECTION.

IN A YEAR MARKED BY THE LASTING IMPACT OF COVID-19, SESAME WORKSHOP PROACTIVELY PIVOTED PROGRAM IMPLEMENTATION PLANS TO MEET THE EVOLVING NEEDS OF CHILDREN AND FAMILIES. WE DEVELOPED AND DISTRIBUTED MATERIALS WITH NEW AND EXISTING PARTNERS, ADAPTED PROGRAM DESIGN TO REACH CHILDREN AT HOME, ADVOCATED FOR THE INCLUSION OF YOUNG CHILDREN IN COVID AND CRISIS RESPONSE, WORKED WITH COLLEAGUES TO SECURE NEW FUNDING OPPORTUNITIES AND EXPANDED OUR WORK TO NEW GEOGRAPHIES REACHING MILLIONS OF CHILDREN AND FAMILIES THROUGH MASS MEDIA, DIGITAL, AND DIRECT SERVICES.

AT THE END OF FISCAL YEAR 2020, SESAME WORKSHOP PRODUCED A GLOBAL FAMILY SPECIAL FOR BROADCAST AND DISTRIBUTION THROUGHOUT FISCAL YEAR 2021. THE SPECIAL, "ELMO'S WORLD NEWS" WAS DUBBED IN OVER 15 LANGUAGES AND BROADCAST IN OVER 40 COUNTRIES AROUND THE WORLD. IN ADDITION TO ITS BROADCAST REACH, IT HAS OVER 2.8 MILLION VIEWS ON THE "SESAME STREET" YOUTUBE CHANNEL.

THROUGH SESAME WORKSHOP'S GLOBAL COVID-RESPONSE PROGRAM "CARING FOR EACH OTHER", WE PRODUCED A SUITE OF NEW CONTENT INCLUDING STORYBOOKS, INTERACTIVE SOCIAL MEDIA POSTS, DIGITAL GAMES, AND NEW VIDEO CONTENT ADDRESSING TOPICS INCLUDING HEALTH, PLAY, AND SOCIAL-EMOTIONAL NEEDS FOR CHILDREN AND FAMILIES. SUPPORTED BY LEGO FOUNDATION, VIATRIS, RTI, S.C. JOHNSON, UNILEVER AND THE INTER-AMERICAN DEVELOPMENT BANK,

Name of the organization SESAME WORKSHOP	Employer identification number 13-2655731
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MATERIALS WERE DISTRIBUTED THROUGH PARTNERS INCLUDING GOVERNMENT

AGENCIES AND PUBLIC AND PRIVATE BROADCASTERS IN 10 LANGUAGES IN

BANGLADESH, SOUTH AFRICA, INDIA, UZBEKISTAN, NEPAL, BURMA AND

THROUGHOUT MENA AND LATIN AMERICA FOR A COMBINED REACH OF OVER 90

MILLION PEOPLE. THE CONTENT CONTINUES TO BE ADAPTED AND DISTRIBUTED IN

NEW LANGUAGES AND GEOGRAPHIES TO SUPPORT CONTINUED LEARNING AT HOME.

SESAME WORKSHOP LAUNCHED A GLOBAL PARTNERSHIP WITH UNICEF ON WORLD

CHILDREN'S DAY (NOVEMBER 20). THE PARTNERSHIP INCLUDED NEW CONTENT

DEVELOPMENT FOCUSING ON THE SPECIFIC NEEDS OF PARENTS AND CAREGIVERS

DURING COVID-19. WE CELEBRATED GLOBAL PARENTING MONTH IN JUNE WITH THE

DISTRIBUTION OF ADAPTED COVID-19 MATERIALS IN 11 NEW LANGUAGES AND

MARKED THE LAUNCH WITH A PARENTING PSA FEATURING GROVER AND UNICEF

AMBASSADOR, LUCY LUI.

IN BANGLADESH, SEASON 13 OF "SISIMPUR" LAUNCHED ON THREE CHANNELS IN

JANUARY 2021. THROUGHOUT THE YEAR, SESAME WORKSHOP BANGLADESH PRODUCED

AND DISTRIBUTED A SERIES OF PSAS AND EID AND NATIONAL HOLIDAY SPECIALS

TO PROMOTE EARLY LEARNING AND SUPPORT CHILDREN AND FAMILIES DURING

COVID-19. OUR LOCAL TEAM EXPANDED ITS DIGITAL PRESENCE THROUGH THE

LAUNCH OF THE SISIMPUR ELEARNING APP WHICH FEATURES VIDEOS, STORYBOOKS

AND GAMES AND IS ACCESSIBLE ON MOBILE PHONES AND COMPUTERS. THE TEAM

DISTRIBUTED OVER 57,000 STORYBOOKS THROUGH OUR USAID FUNDED PROJECT.

IN INDIA, WE CELEBRATED THE LAUNCH OF THE SESAME WORKSHOP INDIA YOUTUBE

CHANNEL IN NOVEMBER 2020. BY THE END OF THE FISCAL YEAR, THE HINDI AND

TELEGU CHANNELS HAD A COMBINED 36 MILLION VIEWS. THE CHANNELS FEATURES

FAMILIAR SESAME CHARACTERS INCLUDING ELMO, COOKIE MONSTER, AND CHAMKI

IN BOTH DUBBED VIDEOS FROM THE SESAME LIBRARY ALONG WITH EXCITING NEW

Name of the organization SESAME WORKSHOP	Employer identification number 13-2655731
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CONTENT DEVELOPED FOR THE INDIAN AUDIENCE.

SESAME WORKSHOP TEAMS IN INDIA ADAPTED PROGRAM IMPLEMENTATION PLANS TO

MEET THE EVOLVING NEEDS ON THE GROUND AS A RESULT OF COVID SURGES

THROUGHOUT THE YEAR. WE REDESIGNED PROGRAMS TO ENSURE REMOTE DELIVERY

USING PLATFORMS INCLUDING WHATSAPP AND INTERACTIVE VOICE RESPONSE. WITH

SUPPORT FROM THE INDIA CLIMATE COLLABORATIVE, WE SURVEYED OVER 9,000

CHILDREN AGES 6-10 ABOUT THEIR ENVIRONMENTAL CONCERNS AND FACILITATED

DISCUSSIONS BETWEEN STUDENTS AND LOCAL GOVERNMENT OFFICIALS TO

HIGHLIGHT THE ROLE OF CHILDREN AS CLIMATE CHANGEMAKERS AND VOICES FOR

ACTION IN THEIR COMMUNITIES. SESAME WORKSHOP INDIA EXPANDED PROGRAMMING

IN ANGANWADI CENTERS (GOVERNMENT RUN PRE-SCHOOLS) ACROSS MORE THAN 12

STATES FOCUSING ON PRE-LITERACY OUTCOMES AND LAUNCHED A DIGITAL

CAMPAIGN AIMED AT IMPROVING POSITIVE ENGAGEMENT OF FATHERS IN

CHILDREN'S LEARNING AND DEVELOPMENT.

IN FISCAL YEAR 2021, SESAME WORKSHOP UNDERTOOK A FEASIBILITY STUDY TO

UNDERSTAND THE VALUE AND VIABILITY OF SESAME WORKSHOP PROGRAMMING IN

BURMA. THE RESULTING FEASIBILITY REPORT SYNTHESIZED FINDINGS FROM A

SERIES OF STUDIES INCLUDING A NEEDS ASSESSMENT, MEDIA LANDSCAPE

RESEARCH, EDUCATIONAL AND FORMATIVE RESEARCH, AND STAKEHOLDER

CONSULTATIONS. THE RESEARCH HIGHLIGHTED THE JOYS AND CHALLENGES OF

CAREGIVERS, AS WELL AS THE DIVERSE LIVED EXPERIENCES AND VIEWS ON

"BELONGING" AMONG DIFFERENT GROUPS WITHIN BURMA. AS OUR RESEARCH PHASE

DREW TO A CLOSE IN FEBRUARY 2021, THE BURMESE MILITARY DEPOSED THE

ELECTED CIVILIAN GOVERNMENT AND DECLARED A STATE-OF-EMERGENCY UNDER

MILITARY RULE. THE SESAME WORKSHOP TEAM REMAINS IN CONVERSATION WITH

PARTNERS TO DETERMINE POTENTIAL PROGRAMMING OPPORTUNITIES CONSIDERING

Name of the organization SESAME WORKSHOP	Employer identification number 13-2655731
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THE CHANGED CONTEXTS IN BURMA.

OUR WORK IN AFGHANISTAN CONTINUED WITH AN AGREEMENT BETWEEN SESAME WORKSHOP AND VIAMO TO PILOT DISTRIBUTION OF "BAGHCH-E-SIMSIM" AUDIO CONTENT ON THEIR EXISTING INTERACTIVE VOICE RESPONSE PLATFORM. FURTHER, WE LAUNCHED A NEW PARTNERSHIP WITH SAVE THE CHILDREN AFGHANISTAN TO PILOT THE INTEGRATION OF "BAGHCH-E-SIMSIM" PRINT MATERIALS IN THEIR CHILD FRIENDLY SPACES THROUGHOUT THE COUNTRY. SESAME WORKSHOP BEGAN TO CLOSELY MONITOR THE US MILITARY WITHDRAWAL THROUGHOUT THE LATE SPRING AND EARLY SUMMER AND WORKED WITH PARTNERS TO ADAPT PROGRAM PLANS IN FISCAL YEAR 2022.

IN SOUTH AFRICA, SESAME WORKSHOP CONTINUED MASS MEDIA ENGAGEMENT WITH "TAKALANI SESAME" AND DEEPENED IMPACT THROUGH IMPLEMENTATION OF EDUCATIONAL OUTREACH PROGRAMS. SEASON 11 OF "TAKALANI SESAME" WAS VOTED THE BEST CHILDREN'S PROGRAM AT THE SOUTH AFRICA FILM AND TELEVISION AWARDS, ONE OF THE MOST PRESTIGIOUS AWARDS IN THE SOUTH AFRICAN MEDIA INDUSTRY. SHORTLY AFTER, SEASON 12 OF "TAKALANI SESAME" PREMIERED ON SABC WITH A FOCUS ON TEAMWORK AND DIVERSITY AND INCLUSION. SESAME WORKSHOP SOUTH AFRICA DEVELOPED NEW MATERIALS AND IMPLEMENTED OUR LEGO FOUNDATION SUPPORTED PLAY WORKSHOPS PROGRAM IN GAUTENG, FREE STATE, AND EASTERN CAPE. WITH FUNDING FROM THE OAK FOUNDATION, THE TEAM COMPLETED IMPLEMENTATION OF OUR PROGRAM PROMOTING THE ROLE OF MALE CAREGIVERS IN CHILD DEVELOPMENT. OVER 420 CAREGIVER-CHILD DADS PARTICIPATED IN THE MULTI-WEEK INTERVENTION.

WE EXPANDED REACH IN EAST AFRICA WITH THE PRODUCTION AND LAUNCH OF "SESAME HADITHI NJOO" ("SESAME STORY TIME"), OUR KISWAHILI TELEVISION

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PROGRAM, ON KTN, A NATIONAL FREE-TO-AIR BROADCASTER IN KENYA. THE SERIES PROMOTES THEMES OF MUTUAL RESPECT AND UNDERSTANDING FEATURING FAMILIAR FACES INCLUDING ELMO, BERT, AND ERNIE. ADDITIONALLY, WE PRODUCED 13 NEW EPISODES OF SOMALI-LANGUAGE, "SESAME SHEEKO SHEEKO" ("SESAME STORY TIME") RADIO EPISODES FOR BROADCAST THROUGHOUT THE REGION. IN PARTNERSHIP WITH EQUAL ACCESS INTERNATIONAL, SESAME WORKSHOP DEVELOPED AND PILOTED THE "SESAME SHEEKO SHEEKO" TEACHER'S FACILITATION GUIDE IN CLASSROOMS IN KENYA, ETHIOPIA, AND SOMALIA.

IN NIGERIA, THE HAUSA-LANGUAGE SESAME SERIES "DANDALIN SESAME" RETURNED TO AIR ON AREWA24 REACHING AN ESTIMATED AUDIENCE OVER 1 MILLION ON WEEKENDS AND 740,000 ON WEEKDAYS.

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

AS PART OF A DEVELOPING REGIONAL MASS MEDIA STRATEGY, SESAME WORKSHOP DEVELOPED A NEW SERIES, "SESAME STREET FRIENDS" FOR BROADCAST IN OVER 10 COUNTRIES IN EAST, WEST, AND SOUTHERN AFRICA. THE SERIES SUPPORTS EARLY LEARNING AND FOUNDATIONAL SKILLS DEVELOPMENT AND WAS DUBBED IN ENGLISH, AMHARIC, HAUSA, SOMALI, SWAHILI, AND YORUBA. THE SHOW IS EXPECTED TO LAUNCH ON MULTIPLE BROADCASTERS THROUGHOUT SUB-SAHARAN AFRICA IN FISCAL YEAR 2022.

SESAME WORKSHOP'S SCHOOL-BASED "WASH UP!" PROGRAM CONTINUED TO EXPAND IN FY 2021. DESPITE GLOBAL SCHOOL CLOSURES, THE TEAM ADAPTED PROGRAMMING PLANNING TO ENSURE CHILDREN CONTINUED TO RECEIVE KEY HEALTH MESSAGES TO STAY SAFE AND HEALTHY AMIDST THE PANDEMIC. WITH SUPPORT FROM THE WORLD FOOD PROGRAMME (WFP) IN BANGLADESH, WE PRODUCED 5 PSAS AND ADAPTED 8 STORYBOOKS ALONG WITH DEVELOPING NEW PRINT MATERIALS FOR

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DISTRIBUTION IN 148 BANGLADESHI SCHOOLS IN THE COX'S BAZAR REGION. WE

CONDUCTED SCALE-UP TEACHER TRAININGS FOR TEACHERS IN 100 SCHOOLS IN

RWANDA AND DEVELOPED A NEW STORYBOOK HIGHLIGHTING THE NEXUS BETWEEN

WASH AND GENDER FOR DISTRIBUTION IN NIGERIA. IN PARTNERSHIP WITH WORLD

VISION, WE COMPLETED PILOT IMPLEMENTATION IN 25 SCHOOLS IN MOZAMBIQUE

AND BEGAN EVALUATING RESEARCH FINDINGS FOR SCALE-UP IN EARLY FY 2022.

IN LATIN AMERICA, SESAME WORKSHOP EMBARKED ON AN EFFORT TO SCALE

HEALTHY HABITS PROGRAM, "LISTOS A JUGAR" THROUGH EDUCATION AND

EARLY-CHILDHOOD DEVELOPMENT PUBLIC AND PRIVATE SERVICE PROVIDERS IN

LATIN AMERICA. THROUGH THE SELF-ADOPTION MODEL SESAME IDENTIFIED AND

SECURED PARTNERSHIPS WITH 33 INSTITUTIONS IN BRAZIL, COLOMBIA, MEXICO

AND PERU, PROVIDED ACCESS TO THE "LISTOS A JUGAR" DIGITAL CONTENT FOR

FREE, LED TRAIN THE TRAINER SESSIONS AND PROVIDED ONGOING SUPPORT TO

PARTNERS DURING IMPLEMENTATION.

WITH THE SUPPORT FROM THE INTER-AMERICAN DEVELOPMENT BANK, SESAME

WORKSHOP EXPANDED ITS PLAY EVERY DAY PROGRAM (ORIGINALLY FUNDED BY THE

LEGO FOUNDATION TO REACH PRESCHOOL CHILDREN) TO REACH CHILDREN 0-2 AND

THEIR CAREGIVERS IN VULNERABLE SETTINGS IN MEXICO. THE PROGRAM WAS

IMPLEMENTED IN 207 EARLY EDUCATION SERVICES MANAGED BY GOVERNMENT

AGENCY, CONAFE, REACHING 1,500 FAMILIES.

IN FY21, WITH SUPPORT FROM BRAZILIAN COMPANIES AS PART OF THE COUNTRY'S

CULTURAL INVESTMENT INCENTIVE PROGRAM, SESAME WORKSHOP EXPANDED ITS

"MONSTRUOS EN REDE" DIGITAL WELLNESS PROGRAM TO REACH CHILDREN AGES 5-6

AND THEIR CAREGIVERS, ACROSS 5 CITIES IN BRAZIL. THE PROGRAM ENGAGED

240 EDUCATORS AND 4,000 CHILDREN AND THEIR FAMILIES THROUGH

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PARTNERSHIPS WITH THE LOCAL DEPARTMENTS OF EDUCATION. IN ADDITION, MORE

THAN 1.5 MILLION FAMILIES WERE REACHED THROUGH THE SOCIAL MEDIA AND

BROADCAST TELEVISION CAMPAIGNS.

PHASE TWO OF OUR METLIFE FOUNDATION SUPPORTED FINANCIAL EMPOWERMENT

INITIATIVE, "DREAM, SAVE, DO" WAS COMPLETED IN MEXICO, BRAZIL, AND

JAPAN. IN RESPONSE TO SCHOOL CLOSURES, WE ADJUSTED PROGRAM PLANS TO

SUPPORT LEARNING FROM HOME SHARING RESOURCES WEEKLY WITH TEACHERS

THROUGH WHATSAPP. THE TEAM BEGAN DEVELOPING SELF-ADOPTION PLANS TO

ALLOW FOR CONTINUED IMPLEMENTATION BEYOND THE GRANT PERIOD. DURING

IMPLEMENTATION IN MEXICO, "DREAM, SAVE, DO" MESSAGING WAS INCORPORATED

INTO THE SESAMO WHATSAPP INITIATIVE REACHING OVER 700 FAMILIES OVER THE

COURSE OF 9 WEEKS. EVALUATIONS OF THE PROGRAM IN MEXICO AND BRAZIL SHOW

POSITIVE RESULTS WITH FAMILIES AND EDUCATORS FINDING THE MATERIALS

RELEVANT AND SUPPORTING UNDERSTANDING OF THE VALUE OF WORK, IMPORTANCE

OF DREAMING, SAVING AND CONSCIOUS CONSUMPTION. THE US EMBASSY IN TOKYO

COMMITTED TO HELP EXPAND THE SESAME STREET SCHOOL CURRICULUM PROGRAM OF

WHICH "DREAM, SAVE, DO" IS A FOUNDATIONAL COMPONENT.

THROUGHOUT THE 2021 FISCAL YEAR, THE SESAME WORKSHOP INTERNATIONAL

SOCIAL IMPACT TEAM PROACTIVELY MET THE NEEDS OF YOUNG CHILDREN AND

THEIR FAMILIES AS THEY FACED THE CONTINUED IMPACTS OF THE COVID-19

PANDEMIC. REMAINING NIMBLE AND RESPONSIVE TO THE CHANGING CIRCUMSTANCES

OF CHILDREN AND FAMILIES, COMBINED WITH OUR ABILITY TO PIVOT IN OUR

PRODUCTION PROCESSES TO PRODUCE CONTENT SAFELY DURING THE PANDEMIC, WE

SUCCESSFULLY DEVELOPED AND DISTRIBUTED NEW MATERIAL TO SUPPORT EARLY

LEARNING AND CHILD DEVELOPMENT AROUND THE WORLD.



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## FORM 990, PART III, LINE 4C, PROGRAM SERVICE ACCOMPLISHMENTS:

MUPPET VIDEOS FEATURING WES & ELIJAH, OUR NEW BLACK MUPPETS (FATHER AND SON) ON SESAME STREET, DOCUMENTARY VIDEOS WITH BIPOC FAMILIES, ARTICLES, PRINTABLES, A DIGITAL INTERACTIVE, AND A PARENT WORKSHOP ON HELPING PARENT TALK ABOUT AND STAND UP AGAINST RACISM. ADDITIONAL CONTENT LAUNCHED IN JUNE 2021 TO ADDRESS COPING WITH RACISM: MUPPET VIDEOS, DOCUMENTARY VIDEO WITH AN INDIGEOUS FAMILY, AND A PROFESSIONAL DEVELOPMENT WEBINAR. THE PROJECT GARNERED 500+ PRESS STORIES TALLING 5 MILLION IMPRESSIONS WITH A REACH METRIC OF 6.5M ON SOCIAL MEDIA.

IN MAY 2021 SESAME WORKSHOP ANNOUCED A NEW GRANT FROM THE PNC FOUNDATION TO EXPAND ON OUR RACIAL JUSTICE WORK THROUGH A SCHOOL READINESS LENS. THE 4-YEAR \$6.2 MILLION BILINGUAL INITATIVE IS BASED ON 5 GOALS: BUILDING IDENTITY, APPROACHES TO LEARNING, BUILDING COMMUNITY, CONFLICT RESOLUTION, AND ASPIRATIONS. RESOURCES WILL INCLUDE: MUPPET AND DOCUMENTARY VIDEOS, INTERACTIVE GAMES, PRINTED ACTIVITY BOOKS, PRINTABLES, ARTICLES AND A NEW PROFESSIONAL DEVELOPMENT COURSE.

SSIC ALSO CONTINUED EFFORTS TO RESPOND TO THE COVID-19 PANDEMIC BY ADDING TO THE GLOBAL CARING FOR EACH OTHER INITIATIVE THROUGH VARIOUS PROMOTIONAL ENGAGEMENTS AND FOUR ADDITIONAL LAUNCHES IN FY21. ON SEPTEMBER 12, 2020, SESAME WORKSHOP AND CNN RELEASED A 60-MINUTE "TOWN HALL" SPECIAL WITH INFORMATION AND TOOLS FOR FAMILIES TO TACKLE ALL THINGS BACK-TO-SCHOOL DURING THE COVID-19 PANDEMIC. THE TOWN HALL WAS SUPPORTED BY WALTON FAMILY FOUNDATION, HOSTED BY CNN'S CHIEF MEDICAL CORRESPONDENT DR. SANJAY GUPTA, CNN ANCHOR ERICA HILL, AND BIG BIRD.

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CONTENT RANGED FROM STAYING HEALTHY IN THE CLASSROOM TO MAKING THE MOST OF REMOTE LEARNING. MUPPET SEGMENTS SHOWED A VARIETY OF LEARNING ENVIRONMENTS INCLUDING ELMO'S IN-PERSON PRESCHOOL, BIG BIRD IN HYBRID LEARNING, AND ROSITA LEARNING FULLY REMOTE. THE TOWN HALL AIRED IN ENGLISH AND SPANISH ON CNN PLATFORMS. WE ARE PLEASED TO REPORT THAT THE BROADCAST REACHED ALMOST 1 MILLION TOTAL VIEWERS.

IN DEC 2020, WITH SUPPORT FROM VIATRIS, SSIC LAUNCHED 8 NEW DIGITAL ACTIVITY BUNDLES ON THE THEME OF SOCIAL EMOTIONAL LEARNING, FOR FAMILIES TO TALK THROUGH AND NAME BIG FEELINGS LIKE STRESS OR FEAR, ENCOURAGE POSITIVE CAREGIVING STRATEGIES AND ROUTINES, AND MORE. THESE BUNDLES LAUNCHED ON SSIC AND WERE LOCALIZED FOR INDIA, SOUTH AFRICA, EUROPE, AUSTRALIA, AND THROUGHOUT LATIN AMERICA. IN MAY 2021, SESAME WORKSHOP PARTNERED WITH THE AD COUNCIL, COVID COLLABORATIVE, THE AMERICAN ACADEMY OF PEDIATRICS, AND THE CDC ON 3 PSAS TO HELP BUILD VACCINE CONFIDENCE, COUNTERACT ADULT VACCINE HESITANCY, AND PROVIDE RESOURCES TO HELP THE PUBLIC MAKE INFORMED DECISIONS ABOUT GETTING VACCINATED.

ADDITIONALLY IN MAY 2021, WITH SUPPORT FROM USAA, SSIC LAUNCHED A DIGITAL BUNDLE TO SUPPORT MILITARY FAMILIES WHO CONTINUE TO SERVE, EVEN DURING THE UNCERTAINTIES OF COVID-19. THE RESOURCES IN THIS BUNDLE THANKED MILITARY FAMILIES FOR THEIR CONTINUED SERVICE, OFFERED STRATEGIES TO HELP FAMILIES WHEN A PARENT QUARANTINES ON THE JOB, PROVIDED ACTIVITIES THAT HELP CHILDREN EXPRESS BIG FEELINGS, AND EXPLORED THE SPECIFIC CHALLENGES MILITARY FAMILIES ARE EXPERIENCING DURING THE PANDEMIC.

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WITH THE SUPPORT OF WALTON FAMILY FOUNDATION, WE ALSO BROADLY  
 DISTRIBUTED BILINGUAL DIGITAL RESOURCES TO PARENTS, CHILDREN, AND  
 PROVIDERS TO SUPPORT THEM IN THE RETURN TO SCHOOL DURING THE COVID-19  
 PANDEMIC. KNOWN AS LEARNING TOGETHER: THE ADVENTURE CONTINUES, THIS  
 PROJECT SOUGHT TO HELP CHILDREN IDENTIFY EMOTIONS, PRACTICE  
 SELF-REGULATION, AND DEVELOP RESILIENCE. WE DELIVERED 10 DIGITAL  
 BUNDLES AND TWO PROFESSIONAL DEVELOPMENT WEBINARS. DIGITAL BUNDLES ARE  
 COMPRISED OF COLLECTIONS OF MULTIMEDIA CONTENT AND ACTIVITIES FOCUSED  
 ON SPECIFIC MESSAGING, ROLLED OUT AT INTERVALS. EACH BUNDLE INCLUDED  
 VIDEO (WITH ANIMATIONS), PRINTABLES, ARTICLES WITH ACTIVITIES FOR  
 PARENTS AND CHILDREN, AND SOCIAL MEDIA GRAPHICS. THE THEMES INCLUDED  
 BACK TO SCHOOL, FLEXIBLE THINKING, COMMUNICATING FEELINGS,  
 SELF-REGULATION, FEELING GRATITUDE, PEOPLE WHO CARE ABOUT ME BUILDING  
 CONFIDENCE, STAYING POSITIVE, NEW FRIENDSHIPS AND MORE PEOPLE AROUND.  
 IN ADDITION, WE CREATED TWO PROFESSIONAL DEVELOPMENT WEBINARS FOR  
 PROVIDERS: LEARNING TOGETHER DURING COVID-19 AND STAYING POSITIVE  
 TOGETHER DURING THE CORONAVIRUS PANDEMIC. THESE BUNDLES HAD 34,488  
 VIEWS AND NEW VIDEOS HAD 440,819 VIEWS. OVER 3,500 VIEWS OF THE TWO  
 WEBINARS.

AT THE END OF MAY 2021, SSIC LAUNCHED NEW CONTENT ON SCIENCE AND  
 CURIOSITY, FUNDED BY SC JOHNSON, TO FOSTER CHILDREN'S CURIOSITY AND  
 INSPIRE THEM TO EXPLORE THE WONDERS OF SCIENCE. RESOURCES INCLUDED A  
 MUSIC VIDEO AND THREE MUPPET VIDEOS THAT BUILD SCIENCE KNOWLEDGE WITH  
 SUPPORTING PRINTABLES AND ARTICLES.

SINCE LAUNCH, THE SSIC HEALTH EMERGENCIES PAGE, WHICH HOSTS ALL OF THE  
 RESOURCES RESPONDING TO THE PANDEMIC, HAS BEEN THE #1 VIEWED PAGE WITH

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OVER 100,000 PAGEVIEWS (FROM JULY 1, 2020 JUNE 30, 2021) AND

ACCOUNTING FOR 8.27% OF ALL PAGEVIEWS TO THE SITE.

WE CONTINUED OUR COMMITMENT TO PROVIDING RESOURCES TO FAMILIES,

CAREGIVERS, TEACHERS, AND PROVIDERS AROUND THE COUNTRY TO PROVIDE A

GREATER UNDERSTANDING ABOUT AUTISM AND TOOLS TO HELP FAMILIES TOUCHED

BY AUTISM. ON SEPTEMBER 28TH 2020, WE LAUNCHED NEW MATERIALS TO HELP

FAMILIES OF KIDS WITH AUTISM COPE WITH THE UNIQUE CHALLENGES OF

COVID-19. THE RESOURCES, AVAILABLE FOR FREE IN ENGLISH AND SPANISH ON

SESAMESTREET.ORG/AUTISM AND SSIC, ARE DESIGNED TO HELP FAMILIES ADAPT

AND CREATE ROUTINES, BUILD FLEXIBILITY, AND COPE WITH THE CHALLENGES OF

LIVING IN THE TIME OF COVID-19, LIKE HAVING TO WEAR MASKS AND LEARNING

TO UNDERSTAND PHYSICAL DISTANCING. RESOURCES INCLUDE NEW MUPPET VIDEOS,

AN ANIMATION, A DIGITAL STORYBOOK, PRINTABLES, AND ARTICLES. PRESS

COVERAGE INCLUDED TODAY, PURE WOW, ROMPER, POP SUGAR AND MORE.

IN HONOR OF AUTISM ACCEPTANCE DAY, SESAME WORKSHOP EXPANDED ITS SESAME

STREET AND AUTISM: SEE AMAZING IN ALL CHILDREN INITIATIVE ON APRIL 2,

2021. THE RESOURCES, AVAILABLE FOR FREE IN ENGLISH AND SPANISH ON

SESAMESTREET.ORG/AUTISM, ARE DESIGNED TO HELP CHILDREN AND FAMILIES

COPE WITH CHANGES IN ROUTINES AND UNCERTAINTY AND BUILD FLEXIBLE

THINKING SKILLS. NEW RESOURCES INCLUDE THREE NEW VIDEOS FEATURING JULIA

AND HER FAMILY, A NEW PRINTED AND DIGITAL STORYBOOK, A NEW INTERACTIVE

FOR KIDS, AND NEW ARTICLES AND PRINTABLES FOR FAMILIES. A SESAME STREET

EPISODE FEATURING JULIA BROADCAST ON PBS AND HBO IN APRIL 2021, IN

WHICH JULIA AND HER FRIENDS ON SESAME STREET PLAY A MATCHING GAME.

PRESS COVERAGE INCLUDED ROMPER, DISABILITY SCOOP AND MORE. THE AUTISM

CONTENT GARNERED OVER 1.1 MILLION PAGEVIEWS ON SESAMESTREET.ORG/AUTISM

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AND OVER 23,000 PAGEVIEWS ON SSIC BETWEEN JULY 2020-JUNE 2021 AND THE

NEW VIDEOS GARNERED OVER 5.3 MILLION VIDEO VIEWS.

WE HOSTED AN ADVISORY MEETING ON MAY 18TH, 2021 WITH A NEW BOARD OF

EXPERT ADVISORS TO INFORM ON THE FUTURE OF OUR AUTISM WORK. THERE WERE

4 KEY TAKEAWAYS FROM THE ADVISORY THAT WILL CARRY INTO OUR NEW CONTENT

DEVELOPMENT AS WE MOVE FORWARD ON WORK FOR APRIL 2022 AND BEYOND. THOSE

THEMES ARE: 1) PRIORITIZE BELONGING; 2) EXPLORE AND HONOR RACIAL AND

ETHNIC DIVERSITY; 3) CONTINUE TO ACKNOWLEDGE THE IMPACT OF THE COVID-19

PANDEMIC; 4) EMPHASIZE SELF-MANAGEMENT/SELF-DETERMINATION SKILLS.

FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:

PROGRAMS REACHING CHILDREN & FAMILIES AFFECTED BY CRISIS

IN THE FACE OF THE GLOBAL REFUGEE CRISES, MILLIONS OF YOUNG CHILDREN DO

NOT HAVE ACCESS TO EARLY CHILDHOOD DEVELOPMENT (ECD) OPPORTUNITIES THAT

THEY NEED TO LEARN, RECOVER FROM ADVERSE EXPERIENCES, AND PREPARE THEM

TO THRIVE. THE GLOBAL COVID-19 PANDEMIC CONTINUED TO LIMIT CHILDREN'S

ACCESS TO LEARNING, ESPECIALLY FOR MORE VULNERABLE FAMILIES. THROUGHOUT

FISCAL YEAR 2021, SESAME WORKSHOP CONTINUED PROGRAMS REACHING YOUNG

CHILDREN AND FAMILIES AFFECTED BY CRISIS, CONFLICT, AND DISPLACEMENT IN

THE MIDDLE EAST, EAST AFRICA, LATIN AMERICA, AND BANGLADESH.

DURING FY21, IN PARTNERSHIP WITH THE INTERNATIONAL RESCUE COMMITTEE

(IRC) AND WITH SUPPORT FROM THE MACARTHUR FOUNDATION AND LEGO

FOUNDATION, SESAME WORKSHOP CONTINUED IMPLEMENTATION OF AHLAN SIMSIM

("WELCOME SESAME" IN ARABIC), A PROGRAM THAT DELIVERS EARLY LEARNING

AND NURTURING CARE THROUGH ECD SERVICES TO CHILDREN AND CAREGIVERS

AFFECTED BY CONFLICT AND DISPLACEMENT IN IRAQ, JORDAN, LEBANON, AND

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SYRIA, AND REACHES CHILDREN WITH EDUCATIONAL MEDIA THROUGH BROADCAST

AND ON YOUTUBE ACROSS THE MIDDLE EAST AND NORTH AFRICA (MENA).

THE SECOND AND THIRD SEASONS OF OUR EDUCATIONAL CHILDREN'S TELEVISION

SERIES, "AHLAN SIMSIM", AIRED IN THE FALL OF 2020 AND THE SPRING OF

2021, RESPECTIVELY, ON THE REGIONAL BROADCAST CHANNEL, MBC3, AND

REACHED OVER 5.2 MILLION CHILDREN IN IRAQ, JORDAN, LEBANON, AND IRAQ;

12 MILLION MORE ACROSS THE MENA. ALL VIDEO CONTENT IS ALSO AVAILABLE ON

THE AHLAN SIMSIM YOUTUBE CHANNEL AND OUR BOOKS AND OTHER MATERIALS ARE

AVAILABLE ON THE AHLAN SIMSIM WEBSITE. DURING FY21, CONTENT ON OUR

YOUTUBE CHANNEL WAS VIEWED 109.8M TIMES. THE SEASON 2 CAMPAIGN LAUNCH

REACHED 32.5M ON FACEBOOK AND INSTAGRAM AND THE SEASON 3 CAMPAIGN

REACHED 28M ON FACEBOOK AND INSTAGRAM. "AHLAN SIMSIM" CONTENT WAS

RECOGNIZED WITH THE TEACHERS' CHOICE AWARD AT THE CHICAGO INTERNATIONAL

CHILDREN'S' FILM FESTIVAL IN NOVEMBER 2020 AND WAS NOMINATED FOR THE

GSMA'S GLOBAL MOBILE AWARD IN MARCH 2021.

DURING FY21, THE PROGRAM PROVIDED ECD SERVICES TO OVER 200,000 CHILDREN

AND CAREGIVERS. WHILE MOST IN-PERSON SERVICES WERE SUSPENDED THROUGH

MOST OF 2020, SOME IN-PERSON ACTIVITIES WERE POSSIBLE BEGINNING IN

MID/LATE-2020 AND INTO 2021. THE PROGRAM CONTINUED TO REACH FAMILIES

REMOTELY BY DISTRIBUTING EARLY LEARNING LESSONS AND ACTIVITIES FOR

CHILDREN BY PHONE AND MOBILE MESSAGING. WITH THE MINISTRY OF EDUCATION

IN JORDAN, THE AHLAN SIMSIM TEAM CREATED A TWO-WEEK SCHOOL READINESS

PROGRAM (ADAPTED FROM AN ORIGINAL 2-MONTH PROGRAM) THAT COULD BE

IMPLEMENTED REMOTELY VIA PHONE CALLS WITH CAREGIVERS. THE SCHOOL

READINESS MODEL IS NOW BEING TESTED IN LEBANON AND IRAQ.

THROUGH THE PLAY TO LEARN PROJECT, A PARTNERSHIP BETWEEN LEGO

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FOUNDATION, BRAC, IRC, AND NYU GLOBAL TIES, SESAME WORKSHOP CONTINUED ITS EFFORTS REACHING CHILDREN AND FAMILIES IN BANGLADESH, JORDAN, AND LEBANON. UNDER THE PLAY TO LEARN PROJECT, SESAME WORKSHOP IS ELEVATING AWARENESS, ENGAGING POLICYMAKERS, AND INCREASING INVESTMENT FOR EARLY CHILDHOOD DEVELOPMENT (ECD) IN CRISIS SETTINGS, ENSURING ACCESS TO PLAY-BASED EARLY CHILDHOOD LEARNING OPPORTUNITIES THAT ARE VITAL TO EVERY CHILD'S DEVELOPMENT.

IN FY21, PLAY TO LEARN REACHED OVER 59,500 CHILDREN, 71,500 CAREGIVERS, AND 1,400 FACILITATORS THROUGH REMOTE INTERVENTIONS SUCH AS PHONE CALLS, HOME VISITS, MESSAGING GROUPS, AND ECD HOME KITS. SESAME WORKSHOP AND PARTNERS CONTINUED TO ENGAGE CHILDREN AND CAREGIVERS AMIDST THE COVID-19 PANDEMIC THROUGH SCALING UP DIRECT SERVICES AND ENGAGING WITH COMMUNITIES AND FAMILIES. THE TEAMS CONTINUED THEIR CO-CREATION OF CHILD AND CAREGIVER PRINT CONTENT, DEVELOPED STORYBOOKS, FLASH CARDS, COMMUNITY-FACING POSTERS, FLIPCHART, AND AUDIO PSAS FOR THE ROHINGYA CONTEXT. COVID AWARENESS POSTERS WERE DISTRIBUTED TO HEALTH, LEARNING, AND FOOD DISTRIBUTION CENTERS AND STORYBOOKS WERE USED BY ORGANIZATIONS IN HOME-VISITS.

AS OF JUNE 2021, THE PLAY TO LEARN TEAM COMPLETED AND REVIEWED 102 OF 140 SCRIPTS FOR THE "WATCH, PLAY, LEARN" ANIMATED VIDEOS. THESE VIDEOS ARE A PART OF ONGOING CONTENT DEVELOPMENT EFFORTS TO CREATE GLOBALLY RELEVANT AND MODULAR ANIMATED VIDEOS TO BE USED IN CRISIS-AFFECTED CONTEXTS; VIDEOS WILL BE PAIRED WITH ACCOMPANYING CONTEXTUALIZED MATERIALS. TO ENSURE CONTENT IS CULTURALLY APPROPRIATE AND EFFECTIVE, WE COMPLETED FORMATIVE TESTING ON THE FOUR SERIES FORMATS - MATH, SOCIAL AND EMOTIONAL LEARNING, SCIENCE, AND CHILD PROTECTION, HEALTH,

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AND SAFETY IN JORDAN, LEBANON, MEXICO, BRAZIL, SOUTH AFRICA, NIGERIA, INDIA, AND BANGLADESH. THE TEAM ALSO BEGAN EXPLORING POTENTIAL PILOT PARTNERSHIPS IN COLOMBIA, BANGLADESH, AND KENYA.

PLAY TO LEARN DEBUTED TWO NEW MUPPETS, NOOR AND AZIZ, IN DECEMBER 2020! NOOR AND AZIZ ARE ROHINGYA REFUGEE SIBLINGS LIVING IN COX'S BAZAR AND WERE CREATED SPECIFICALLY FOR THE ROHINGYA REFUGEE RESPONSE AFTER EXTENSIVE FORMATIVE RESEARCH WITH ROHINGYA CHILDREN AND CAREGIVERS. NOOR AND AZIZ WILL BE FEATURED IN CONTENT IN BANGLADESH.

THE PLAY TO LEARN TEAM ALSO COLLABORATED WITH A DISABILITY ADVISOR, GLOBAL ADVISORS, AND EDUCATION TEAMS TO FINALIZE THE DESIGN FOR A NEW MUPPET CHARACTER. AMEERA IS A NEW ORIGINAL MUPPET WHO SUPPORTS HERSELF WITH A WHEELCHAIR AND CRUTCHES, AND WILL BE FEATURED IN "AHLAN SIMSIM" AND THE "WATCH, PLAY, LEARN" ANIMATIONS IN FISCAL YEAR 2022.

THE PLAY TO LEARN TEAM SECURED OPPORTUNITIES TO ELEVATE THE IMPORTANCE OF ECD AND DISSEMINATE PROGRAM LEARNINGS AND EVIDENCE THROUGH STRATEGIC ADVOCACY EVENTS AND PUBLICATIONS. THESE INCLUDED TESTIMONIES BEFORE US AND CANADIAN GOVERNMENT OFFICIALS, A PUBLICATION OF A JOINT PIECE FOR WORLD REFUGEE DAY ON THE GLOBAL PARTNERSHIP FOR EDUCATION BLOG, PRESENTATIONS AT CIES, AND A PUBLICATION IN THE JOURNAL ON EDUCATION IN EMERGENCIES. THE TEAM ALSO LEVERAGED THE PASSAGE OF THE GLOBAL CHILD THRIVE ACT (GCTA), WHICH PROMISES TO DEVELOP AND IMPLEMENT POLICIES TO ADVANCE EARLY CHILDHOOD DEVELOPMENT AND TO PROVIDE ASSISTANCE FOR ORPHANS AND OTHER VULNERABLE CHILDREN IN DEVELOPING COUNTRIES.

IN PERU, WITH THE SUPPORT OF U.S. AGENCY FOR INTERNATIONAL DEVELOPMENT



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(USAID) IN PARTNERSHIP WITH THE INTER-AMERICAN DEVELOPMENT BANK (IDB),

SESAME WORKSHOP PILOTED TWO TECHNICAL INNOVATIONS TO DELIVER QUALITY

EDUCATIONAL CONTENT FOR VENEZUELAN MIGRANT AND OTHER VULNERABLE

FAMILIES. PRIOR TO PANDEMIC, NEARLY 75% OF MIGRANT CHILDREN AGES 3-5

WERE NOT ATTENDING ECD SERVICES, A NUMBER THAT HAS LIKELY ONLY

INCREASED WITH THE ONSET OF COVID-19 (INEI, 2018). THE JARDIN SESAMO

PLUG-IN DEVICES BROADCAST SESAME WORKSHOP CONTENT OVER FREE LOCAL WI-FI

ACCESS IN SELECTED SPACES. THE SESAMO CHATBOT DISTRIBUTES MATERIALS TO

CAREGIVERS VIA WHATSAPP.

IN FISCAL YEAR 2021, SESAME WORKSHOP CURATED AND SELECTED 301 CONTENT

ASSETS RELEVANT TO THE NEEDS OF MIGRANT FAMILIES FROM OUR

SPANISH-LANGUAGE LIBRARY FOR DISTRIBUTION USING THE JARDIN SESAMO

DEVICES AND CHATBOT. SESAME WORKSHOP AND IMPLEMENTING PARTNER, WORLD

VISION PERU, IDENTIFIED IMPLEMENTATION SITES, RAN A QUICK ASSESSMENT

WITH VENEZUELAN FAMILIES TO IDENTIFY NEEDS AND CONTENT PREFERENCES, AND

DEFINED THE MONITORING AND EVALUATION PLAN FOR THE INTERVENTION.

IN FISCAL YEAR 2021, SESAME WORKSHOP FURTHER EXPANDED OUR WORK REACHING

CHILDREN AND FAMILIES AFFECTED BY CRISIS AND DISPLACEMENT TO EAST

AFRICA. IN RWANDA, WE INTEGRATED SESAME WORKSHOP MATERIALS INTO WORLD

VISION'S CHILD PROTECTION PROGRAMS SERVING CONGOLESE REFUGEES AND

RWANDESE HOST COMMUNITY MEMBERS. FORMATIVE TESTING, CONDUCTED SAFELY

WITH COVID PROTOCOLS, REVEALED HIGH LEVELS OF APPEAL AND COMPREHENSION

OF ALL MATERIALS THAT WERE THEN USED IN IN-CLASS AND TAKE-HOME

ACTIVITIES.

SESAME WORKSHOP ALSO COMPLETED DATA COLLECTION FOR OUR EARLY CHILDHOOD

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DEVELOPMENT NEEDS ASSESSMENT IN KAKUMA REFUGEE CAMP IN KENYA. WITH SUPPORT FROM PORTICUS, THIS STUDY PROVIDED INSIGHTS TO UNDERSTAND PRIORITIES SURROUNDING CHILDREN'S DEVELOPMENT AND THE ROLE OF PLAY IN HEALTHY DEVELOPMENT ALONG WITH CULTURAL NUANCES RELATED TO MEDIA AND STORYTELLING. SESAME WORKSHOP PLANS TO SPEND EARLY FISCAL YEAR 2022 REVIEWING THE FINDINGS AND DESIGNING POTENTIAL FOLLOW-ON PROGRAMMING TO SERVE REFUGEE AND HOST COMMUNITY POPULATIONS IN KAKUMA CAMP AND SURROUNDING AREAS.

SESAME WORKSHOP CONTINUES TO EXPLORE OPPORTUNITIES TO EXPAND PROGRAMMING TO ENSURE THAT CHILDREN AND FAMILIES AFFECTED BY CRISIS AND CONFLICT HAVE ACCESS TO EARLY LEARNING EXPERIENCES NEEDED TO HELP YOUNG CHILDREN GROW AND THRIVE. EXPENSES \$ 51,945,822. INCLUDING GRANTS OF \$ 26,940,972. REVENUE \$ 0.

FORM 990, PART V, LINE 1A  
THE NUMBER OF 1099'S ISSUED IN ANY GIVEN YEAR IS DEPENDENT ON THE NUMBER AND SIZE OF PROJECTS UNDERTAKEN.

FORM 990, PART V, LINE 2A  
THE NUMBER OF EMPLOYEES REPORTED IN CALENDAR YEAR 2020 TOTALING 1,237 REFLECTS ALL INDIVIDUALS EMPLOYED FOR ANY PART OF THE YEAR. IT ALSO INCLUDES PAYMENTS TO PRODUCTION TALENT FOR REUSE AND RE-AIRING OF PREVIOUSLY PRODUCED CONTENT. GIVEN THE VARIABLE NATURE OF PROJECT AND PRODUCTION ACTIVITIES, THE TOTAL EMPLOYEES REPORTED MAY VARY SIGNIFICANTLY YEAR TO YEAR.

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## FORM 990, PART V, LINE 4B, LIST OF FOREIGN COUNTRIES:

UNITED KINGDOM, BANGLADESH, SOUTH AFRICA, CANADA,

CHINA, INDIA, ISRAEL, JAPAN,

JORDAN

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

BOARD OF TRUSTEES MEMBER, JOAN GANZ COONEY, AND BOARD OF TRUSTEES MEMBER,

MICHAEL MANASSE, HAVE A BUSINESS RELATIONSHIP.

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

SESAME WORKSHOP'S FORM 990 IS PREPARED BY THE ORGANIZATION'S INTERNAL

ACCOUNTING DEPARTMENT IN CONJUNCTION WITH A NATIONALLY RECOGNIZED

ACCOUNTING FIRM. UPON COMPLETION, THE FORM 990 IS DISTRIBUTED TO SENIOR

MANAGEMENT AND TO THE AUDIT COMMITTEE OF THE BOARD OF DIRECTORS. THE 990 IS

PRESENTED TO THE AUDIT COMMITTEE AND SUBJECTED TO A DETAILED REVIEW BEFORE

IT IS APPROVED FOR FILING. A COPY OF THE FINAL FORM 990 IS DISTRIBUTED TO

THE ENTIRE BOARD OF TRUSTEES FOR REVIEW AND COMMENT PRIOR TO SUBMISSION

WITH THE INTERNAL REVENUE SERVICE.

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

ALL BOARD MEMBERS, OFFICERS, AND EMPLOYEES WHO ARE VICE PRESIDENTS AND

ABOVE ARE REQUIRED TO REVIEW THE CONFLICT OF INTEREST POLICY ANNUALLY, AND

DISCLOSE ANY REAL OR POTENTIAL CONFLICT OF INTEREST IN RESPONSE TO A

CONFLICT OF INTEREST QUESTIONNAIRE. THE COMPLETED QUESTIONNAIRES ARE

REVIEWED BY THE GENERAL COUNSEL AND SECRETARY TO THE BOARD AND ARE

PRESENTED TO THE AUDIT COMMITTEE. IN THE EVENT OF A REAL OR POTENTIAL

CONFLICT, THE AUDIT COMMITTEE OF THE BOARD AND THE GENERAL

COUNSEL/SECRETARY SHALL ENFORCE THE CONFLICT OF INTEREST POLICY'S

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REQUIREMENT OF RECUSAL FROM PARTICIPATING IN ANY DELIBERATIONS AND  
DECISIONS RELEVANT TO THE DISCLOSURES.

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

EACH YEAR, THE PERSONNEL & COMPENSATION COMMITTEE OF THE BOARD - COMPRISED  
OF A MAJORITY OF INDEPENDENT TRUSTEES - REVIEWS THE ORGANIZATION'S  
COMPENSATION PHILOSOPHY AND WORKS WITH AN INDEPENDENT, THIRD PARTY  
COMPENSATION CONSULTING FIRM TO COLLECT COMPARABLE MARKET DATA TO SET  
APPROPRIATE SALARY RANGES FOR EACH OF THE POSITIONS HELD BY THE OFFICERS  
AND KEY EMPLOYEES.

IN SO DOING, THE COMMITTEE TAKES INTO CONSIDERATION THE COMPETITIVE LABOR  
MARKETPLACE FOR SUCH POSITIONS AND THE COMPARABILITY DATA IN THE  
NOT-FOR-PROFIT AND, IN SOME INSTANCES THE FOR-PROFIT SECTORS, AS  
APPLICABLE. WITH RESPECT TO THE CEO POSITION, THE COMMITTEE TAKES INTO  
CONSIDERATION THE COMPARABILITY DATA IN BOTH THE NOT-FOR-PROFIT AND  
FOR-PROFIT SECTOR.

THE ANNUAL JOB PERFORMANCE FOR EACH OFFICER AND KEY EMPLOYEE ARE REVIEWED  
AND ANY CHANGES IN THE BASE COMPENSATION AND/OR ANY INCENTIVE AWARDS AS  
DETERMINED THROUGH SESAME WORKSHOP'S TARGETED INCENTIVE PROGRAM ARE  
REVIEWED AND APPROVED. THE CEO'S ACTUAL JOB PERFORMANCE IS REVIEWED BY THE  
PERSONNEL AND COMPENSATION COMMITTEE AND EVALUATED BY THE FULL BOARD OF  
TRUSTEES. THE REVIEW INCLUDES A SURVEY THAT GATHERS INPUT FROM ALL  
TRUSTEES. ANY RECOMMENDED INCENTIVE COMPENSATION AWARD OR SALARY CHANGE IS  
DETERMINED IN CONSULTATION WITH THE INDEPENDENT COMPENSATION CONSULTANT.  
THE RECOMMENDATION IS PRESENTED TO THE FULL BOARD OF TRUSTEES FOR APPROVAL.

THE DELIBERATIONS AND DECISIONS OF THE PERSONNEL & COMPENSATION COMMITTEE,

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AS WELL AS THE FULL BOARD OF TRUSTEES WITH RESPECT TO THE CEO'S PERFORMANCE AND COMPENSATION, ARE CONTEMPORANEOUSLY DOCUMENTED AND THE PERSONNEL & COMPENSATION COMMITTEE REPORTS ON ITS ACTIONS TO THE FULL BOARD OF TRUSTEES.

SESAME WORKSHOP COMMISSIONED ITS LAST COMPENSATION SURVEY AS RECENTLY AS AUGUST 2021.

FORM 990, PART VI, LINE 17, LIST OF STATES RECEIVING COPY OF FORM 990:  
AL, AK, AZ, AR, CA, CO, CT, DE, DC, FL, GA, HI, ID, IL, IN, IA, KS, KY, LA, ME, MD, MA, MI, MN, MS  
MO, MT, NE, NV, NH, NJ, NM, NY, NC, ND, OH, OK, OR, PA, RI, SC, SD, TN, TX, UT, VT, VA, WA, WV, WI,  
WY

FORM 990, PART VI, SECTION C, LINE 19:  
SESAME WORKSHOP'S FORM 990 IS AVAILABLE ON ITS WEBSITE ([HTTP://WWW.SESAMEWORKSHOP.ORG](http://www.sesameworkshop.org)) AS IS SESAME WORKSHOP'S AUDITED FINANCIAL STATEMENTS. THE FORM 990 IS AVAILABLE AT [GUIDESTAR.COM](http://www.guidestar.com). SESAME WORKSHOP'S GOVERNING DOCUMENTS AND CONFLICT OF INTEREST POLICY ARE AVAILABLE UPON WRITTEN REQUEST.

FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:  
RECOVERY OF BAD DEBT -232,526.

**SCHEDULE R  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Related Organizations and Unrelated Partnerships**

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

▶ Attach to Form 990.

▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047

**2020**

**Open to Public  
Inspection**

Name of the organization <p style="text-align: center;">SESAME WORKSHOP</p>	Employer identification number <p style="text-align: center;">13-2655731</p>
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**Part I Identification of Disregarded Entities.** Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

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

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No
SESAME STREET, INC. - 13-2677928 1900 BROADWAY NEW YORK, NY 10023	TITLE HOLDING	DELAWARE	501(C)(2)	N/A	SESAME WORKSHOP	X	
THE ELECTRIC COMPANY INC. - 13-2722079 1900 BROADWAY NEW YORK, NY 10023	TITLE HOLDING	DELAWARE	501(C)(2)	N/A	SESAME WORKSHOP	X	
JOAN GANZ COONEY CENTER FOR EDUCATION - 20-8783702, 1900 BROADWAY, NEW YORK, NY 10023	EDU. RESEARCH	DELAWARE	501(C)(3)	LINE 7	SESAME WORKSHOP	X	
GALLI GALLI SIM SIM EDUCATIONAL INITIATIVE 153 OKHLA INDUSTRIAL ESTATE PHASE III, NEW DEHLI, INDIA 110020	EDU. MEDIA	INDIA	N/A	N/A	SESAME WORKSHOP	X	

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

Schedule R (Form 990) 2020



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

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

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?	
								Yes	No
CTW COMMUNICATIONS, INC - 13-2422089 1900 BROADWAY NEW YORK, NY 10023	HOLDING	DE	SESAME WORKSHOP	C CORP	3,779.	59,234.	100%	X	
SESAME WORKSHOP INITIATIVES (INDIA) PLC 153 OKHLA INDUSTRIAL ESTATE PHASE III, NEW DEHLI, INDIA 110020	EDUCA. MEDIA	INDIA	SESAME WORKSHOP	C CORP	2,502,253.	2,484,540.	99.00%	X	
SESAME STREET BRAND MGMT & SVC SHANGHAI ROOM 504, W. TOWER, SHANGHAI CENTER NO. 1376, NANJING WEST ROAD, 200040, CHINA	EDUCA. MEDIA	CHINA	SESAME WORKSHOP	C CORP	3,629,481.	4,703,980.	100%	X	
SESAME STREET SEASON 51 PRODUCTIONS, INC - 84-3808148, 1900 BROADWAY, NEW YORK, NY 10023	VIDEO PROD.	DE	SESAME WORKSHOP	C CORP	-632,708.	779,687.	100%	X	
SESAME STREET SEASON 52 PRODUCTIONS, INC - 85-1104505, 1900 BROADWAY, NEW YORK, NY 10023	VIDEO PROD.	DE	SESAME WORKSHOP	C CORP	-978,593.	1,025,718.	100%	X	





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

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

**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?

	Yes	No
<b>a</b> Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity .....	X	
<b>b</b> Gift, grant, or capital contribution to related organization(s) .....	X	
<b>c</b> Gift, grant, or capital contribution from related organization(s) .....		X
<b>d</b> Loans or loan guarantees to or for related organization(s) .....		X
<b>e</b> Loans or loan guarantees by related organization(s) .....	X	
<b>f</b> Dividends from related organization(s) .....		X
<b>g</b> Sale of assets to related organization(s) .....		X
<b>h</b> Purchase of assets from related organization(s) .....		X
<b>i</b> Exchange of assets with related organization(s) .....		X
<b>j</b> Lease of facilities, equipment, or other assets to related organization(s) .....		X
<b>k</b> Lease of facilities, equipment, or other assets from related organization(s) .....		X
<b>l</b> Performance of services or membership or fundraising solicitations for related organization(s) .....	X	
<b>m</b> Performance of services or membership or fundraising solicitations by related organization(s) .....	X	
<b>n</b> Sharing of facilities, equipment, mailing lists, or other assets with related organization(s) .....	X	
<b>o</b> Sharing of paid employees with related organization(s) .....	X	
<b>p</b> Reimbursement paid to related organization(s) for expenses .....		X
<b>q</b> Reimbursement paid by related organization(s) for expenses .....	X	
<b>r</b> Other transfer of cash or property to related organization(s) .....		X
<b>s</b> Other transfer of cash or property from related organization(s) .....		X

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

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1) SESAME STREET BRAND MANAGEMENT	M	168,055.	COST
(2) JOAN GANZ COONEY CENTER FOR EDUCATIONAL MEDIA	L	1,022,934.	COST
(3) SESAME WORKSHOP INDIA INITIATIVES, PLC	M	1,047,688.	COST
(4) SESAME WORKSHOP INTERNATIONAL, INC.	B	1,655,165.	CASH
(5) SESAME STREET BRAND MANAGEMENT	A	187,762.	CASH
(6) SESAME STREET SEASON 51 PRODUCTIONS, INC	E	639,823.	COST

**Part V** Continuation of Transactions With Related Organizations (Schedule R (Form 990), Part V, line 2)

(a) Name of other organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(7) SESAME STREET SEASON 51 PRODUCTIONS, INC	M	3,367,257.	COST
(8) SESAME STREET SEASON 51 PRODUCTIONS, INC	A	178,515.	COST
(9) SESAME STREET SEASON 52 PRODUCTION, INC	E	973,873.	COST
(10) SESAME STREET SEASON 52 PRODUCTION, INC	M	12,927,748.	COST
(11) SESAME STREET SEASON 52 PRODUCTION, INC	A	58,389.	COST
(12) SESAME STREET SEASON 53 PRODUCTION, INC	E	43,886.	COST
(13) SESAME STREET SEASON 53 PRODUCTION, INC	M	1,053,271.	COST
(14) SESAME STREET SEASON 53 PRODUCTION, INC	A	373.	COST
(15)			
(16)			
(17)			
(18)			
(19)			
(20)			
(21)			
(22)			
(23)			
(24)			



