Form 990

Department of the Treasury Internal Revenue Service Return of Organization Exempt From Income Tax

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

2018

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

Open to Public Inspection

7	roi me z	and talendar year, or tax year beginning MAY 1, 2018 and	ending P	APR 30, 2019		
В	Check if applicable:	C Name of organization		D Employer identif	ication number	
	Address	Aid For Starving Children				
F	Name	Doing business as			204505	
F	Initial	Number and street (or P.O. box if mail is not delivered to street address)	6 - 1 - 11		.224507	
Ē	Final return/		Room/suite 105	E Telephone number 7 0 7 -	528-3499	
	termin- ated	City or town, state or province, country, and ZIP or foreign postal code		G Gross receipts \$	7,828,570.	
E	Amended	Santa Rosa, CA 95403		H(a) Is this a group r		
	Applica-	F Name and address of principal officer: Monte E. Wilson			s? Yes X No	
	pending	2657 Lenox Rd. #P221, Atlanta, GA 3032	4		ncluded? Yes No	
1	Tax-exem	pt status: X 501(c)(3)	or 527		list. (see instructions)	
J	Website:	▶ www.aidforstarvingchildren.org	and My	H(c) Group exemption		
K	Form of org	anization: X Corporation Trust Association Other ▶	L Year	of formation: 1981	M State of legal domicile; DC	
TIE.	_				•	
9	מי	efly describe the organization's mission or most significant activities: Aid to covides children and families with medic	or St	arving Chil	dren	
Activities & Governance	2 Ch	eck this box if the organization discontinued its operations or dispos	mes,	100d, shelt	er, clean	
Ver	3 Nu	refer of william assemble on of the control of the second		THE RESERVE OF THE PERSON OF T	sets.	
Go	4 Nu	mber of independent voting members of the governing body (Part VI, line 1b)	**********		3	
65	5 Tot	tal number of individuals employed in calendar year 2018 (Part V, line 2a)	manimonin	4	3	
rtie	6 Tot	al number of volunteers (estimate if necessary)	*************		0	
ctiv	7 a Tot	al unrelated business revenue from Part VIII, column (C), line 12	*************	6	0.	
Ā	b Net	unrelated business taxable income from Form 990-T, line 38			0.	
87		Services assessed taxable moone flows of the object of the	ereception contra	Prior Year		
á	8 Co	ntributions and grants (Part VIII, line 1h)		14,334,129.	7,740,344.	
nue	9 Pro	gram service revenue (Part VIII, line 2g)		0.	7,740,344.	
Revenue	10 Invi	estment income (Part VIII, column (A), lines 3, 4, and 7d)	141414	2,374.	4,057.	
ď	11 Oth	er revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	11104	98,691.	84,169.	
	12 Tot	al revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		14,435,194.	7,828,570.	
	13 Gra	nts and similar amounts paid (Part IX, column (A), lines 1-3)		13,186,154.	6,457,415.	
	14 Ber	nefits paid to or for members (Part IX, column (A), line 4)	y - 3 year 4 a 5 a 5	0.	0.	
(S)	15 Sala	aries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	STOCK I	174,660.	195,492.	
Expenses	16a Pro	fessional fundraising fees (Part IX, column (A), line 11e)		0.	0.	
cbe	b Tota	al fundraising expenses (Part IX, column (D), line 25)	1.			
Ŵ	17 Oth	er expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	1,000ce	934,470.	1,124,710.	
-	18 Tota	al expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		14,295,284.	7,777,617.	
	19 Rev	enue less expenses. Subtract line 18 from line 12	******	139,910.	50,953.	
ets or			Beg	inning of Current Year	End of Year	
Sset	20 Tota	al assets (Part X, line 16)		636,936.	658,026.	
Net Asse	21 Tota	al liabilities (Part X, line 26)	111,112	60,961.	17,060.	
Pa	rt II S	assets or fund balances. Subtract line 21 from line 20	Contract Con	575,975.	640,966.	
_			- Villa e			
rue	correct an	of perjury, I declare that I have examined this return, including accompanying schedules a	and statemen	is, and to the best of my	knowledge and belief, it is	
i ue,	COLLECT, all	d complete. Declaration of exparer (other than officer) is based on all information of whice	n preparer h			
Sign		Signature of office		Date 10/1	.5/2019	
Here	2.6 1	Monte Wilson, Chairman	7	Dato		
,,,,		Type or print name and title	/			
	Prin	nt/Type preparer's name Preparer's Stignature	Da	te Check	TI PTIN	
Paid		nthia Williams, EA	10.7	1/14/19 self-employer		
гера		i's name JAMES E. RAFTERY, CPA, PC	1.0	Firm's EIN ▶	86-0503405	
Jse (n's address 606 N Stapley Drive		THIII S EIN	00-0303403	
	_ C _ I _ E	Mesa, AZ 85203		Phone on 480	-835-1040	
May	the IRS di	scuss this return with the preparer shown above (see instructions)		Ti none not 2 0 c	X Yes No	
-		Too more and the second	<u>arabanezenkeitiiki</u>	**********************	. Les I INO	

	990 (2018) Aid For Starving Children	52-1224507 Page 2
Pa	rt III Statement of Program Service Accomplishments	
4	Check if Schedule O contains a response or note to any line in this Part III	X
4	Briefly describe the organization's mission: Aid For Starving Children provides assistance around children and their families by providing medicines, make the contract of th	the world to
	food, shelter, clean water, immunizations, financial	assistance,
	education, and emergency relief to victims of famine,	, natural
2	Did the organization undertake any significant program services during the year which were not listed on	
	prior Form 990 or 990-EZ? If "Yes," describe these new services on Schedule O.	
3	Did the organization cease conducting, or make significant changes in how it conducts, any program sent if "Yes," describe these changes on Schedule O.	vices?Yes X No
4	Describe the organization's program service accomplishments for each of its three largest program service Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to	
_	revenue, if any, for each program service reported.	C. P. H. C.
4a) (Revenue \$
	To provide relief and development to the poor and nee	dy through Medical
	Aid and Financial Support in regions where food, medi	ical care,
	medicines, medical supplies, education, and shelter a between.	are few and far
	The Organization has had the blessing to donate and s	send invaluable
	shipments of medicines and medical supplies containing	ng vital broad
	spectrum antibiotics, diabetes medications, heart med	lications and much,
	much, more; enabling countless children and families	to receive
	necessary medical attention which they may otherwise	not have access
	to. The Organization consistently hears from our part	ners in
	underdeveloped nations that there are severe deficien	cies in available
4b) (Revenue \$
		(1010)004
4c	(Code:) (Expenses \$ including grants of \$)	(Revenue \$)
4d	Other program services (Describe in Schedule O.)	
	(Expenses \$ including grants of \$) (Revenue \$	
4e	Total program service expenses ▶ 6,668,150.	
ganec	12-31-18 See Schedule O for Continuation	Form 990 (2018)
2002	12-31-18 See Schedule O for Continuation	JII \ D /

	le the second state of the second		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?		х	
2	If "Yes," complete Schedule A	2	X	
3	Is the organization required to complete Schedule B, Schedule of Contributors? Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for	2		125
	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4	-	X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			No.
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5	-	X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			**
4	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	1.34	110.0	х
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7	-	Λ
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			x
	Schedule D, Part III	8		Λ
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?		-	
	그렇게 보고되었으며, 하다면 하다 이번 이번 이번 이번 사람들이 되었다면 하다 이번 이번 이번 이번 시간에 바다를 보면 되었다면 하는데 보다면 하다면 하는데 하는데 하는데 보다면 하다면 하는데 하다면 하는데 보다면 하는데	9		х
40	If "Yes," complete Schedule D, Part IV Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent	9		
10		10		х
11	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X	10		21
4.	as applicable.			Fe 1
9	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
a	Part VI	11a	х	
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total	114	- 5	
~	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	116	x	
c	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total	1110		
~	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	110	X	
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in	-110	-	
-	Part X, line 167 // "Yes," complete Schedule D, Part IX	11d		x
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		Х
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	11.0		
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			77
	Schedule D, Parts XI and XII	12a		Х
b	Was the organization included in consolidated, independent audited financial statements for the tax year?		1	1-1-
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	X	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,	-0.		
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000	100	W	
	or more? If "Yes," complete Schedule F, Parts I and IV	146	X	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	X	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to		100	
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			λ:1
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17	-	Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			7.4
	1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	TET		
	complete Schedule G, Part III ,	19	_	Х
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		-
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	971		122
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts Land II	21		X

Form 990 (2018)

22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on		Yes	No
22	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		х
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete	1		1
	Schedule J	23	-	X
24 a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete	04-		x
b	Schedule K. If "No," go to line 25a	24a 24b		- 1
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		E
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit		111	
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a	/ Inc	X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete		E	
	Schedule L, Part I	25b		X
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes,"	26		х
27	complete Schedule L, Part II Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial	26		T
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27	M.	х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
a	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a	X	
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
C	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			E.
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c	7000	Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	X	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30	2 1	х
31	Did the organization liquidate, terminate, or dissolve and cease operations?			100
de.	If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	153		**
33	Schedule N, Part II Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	32		X
34	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and	33		X
54	Part V, line 1	34	x	H 1
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	X	
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b	х	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	7		
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		Х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?			-
	Note. All Form 990 filers are required to complete Schedule O	38	X	
Par	Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V			
-	Check it Schedule O contains a response of note to any line in this Part V		W 1	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable		Yes	No
	Enter the number of Forms W-2G included in line 1a, Enter -0- if not applicable 1b 0	-		
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
3 3	(gambling) winnings to prize winners?	1c	х	
32004	12-31-18	_	990	2010

Par	Statements Regarding Other IRS Filings and Tax Compliance (continued)			
			Yes	No
	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return.			
	the feet the salesting with at the many the feet control of the feeth manufacturation (co	_	Х	-
ь	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Δ	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	-		x
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	-	Α.
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b	-	_
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a	4		v
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X
Ь	If "Yes," enter the name of the foreign country:			6.0
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).	-		х
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b	_	A
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit	155		77
12.14	any contributions that were not tax deductible as charitable contributions?	6a		Х
	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
	were not tax deductible?	6b	_	_
	Organizations that may receive deductible contributions under section 170(c).			-
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		X
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	-	_
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required	L.		-
	to file Form 8282?	7c		X
	If "Yes," indicate the number of Forms 8282 filed during the year			
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	79		
	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h	-71	_
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.	100		
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter:			
	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against	1,)		
	amounts due or received from them.)		- 14	
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	70111		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note. See the instructions for additional information the organization must report on Schedule O.	100.00		
b	Enter the amount of reserves the organization is required to maintain by the states in which the			
	organization is licensed to issue qualified health plans		7	
c	Enter the amount of reserves on hand13c			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		
	is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			1
	excess parachute payment(s) during the year?	15		X
	If "Yes," see instructions and file Form 4720, Schedule N.		120	
	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		Х
		_		1.35

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

000	Check if Schedule O contains a response or note to any line in this Part VI			X
Sec	tion A. Governing Body and Management	-	Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1	res	INO
7	If there are material differences in voting rights among members of the governing body, or if the governing	7		
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			
b	Enter the number of voting members included in line 1a, above, who are independent	3	M. I	
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			
	officer, director, trustee, or key employee?	2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			1(=
	of officers, directors, or trustees, or key employees to a management company or other person?	3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6	Did the organization have members or stockholders?	6		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or		1	N/
	more members of the governing body?	7a		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or	-		
	persons other than the governing body?	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:	410		
a	The governing body?	8a	X	
b	Each committee with authority to act on behalf of the governing body?	86	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			F 20
	organization's malling address? If "Yes," provide the names and addresses in Schedule O	9		X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		X
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,			
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Х	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	7 1		
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Х	
C	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe	inci		
	in Schedule O how this was done	12c	X	
13	Did the organization have a written whistleblower policy?	13	X	
14	Did the organization have a written document retention and destruction policy?	14	X	
15	Did the process for determining compensation of the following persons include a review and approval by independent	101	671	
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
	The organization's CEO, Executive Director, or top management official	15a	X	
b	Other officers or key employees of the organization	15b	T T	X
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			11
	taxable entity during the year?	16a	-	X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation	100		
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's			
_	exempt status with respect to such arrangements?	16b	9-44	
	ion C. Disclosure			
	List the states with which a copy of this Form 990 is required to be filed ▶ CA, CT, FL, IL, MA, MI, NJ, NY, NC			
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))	only) a	ivallab	le
	for public inspection. Indicate how you made these available. Check all that apply.			
13	X Own website Another's website X Upon request Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and	financi	al	
	statements available to the public during the tax year.			
	State the name, address, and telephone number of the person who possesses the organization's books and records			
	The Organization - 707-528-3499			
_	2360 Professional Drive, No. 105, Santa Rosa, CA 95403			
32006	12-31-16 See Schedule O for full list of states	Form	990	2018

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.

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

(A) Name and Title	(B) Average hours per week	DOX,	unle	ss pe	rson i	than obtion/trus	an	(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other
	(list any hours for related organizations below line)	Individual trustee or director	Institutional inustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) Dr. Monte E. Wilson President	12.00	х		x				30,000.	0.	0.
(2) Jeff Baugham Secretary/Treasurer	1.00	х		x				0.	0.	0.
(3) Warren Hays Director	1.00	х						0,	0.	0.
(4) Paul Kelley Vice President (5) Wendy Swezy	1.00	х		3				0.	0.	0.
Administrative Director				x				37,622.	0.	0.
			100							
				-						

832007 12-31-18

Form 990 (2018)

Form 990 (2018)

0

Total number of independent contractors (including but not limited to those listed above) who received more than

\$100,000 of compensation from the organization

	Check if Schedule O cont			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	Revenue excluded from tax under sections 512 - 514
1 a	Federated campaigns	1a	94,634.				
1 a b c d e f	Membership dues	1b					
c	Fundraising events	1c			100000000000000000000000000000000000000		
d	Related organizations	1d					
е	Government grants (contribut	ons) 1e		14.7	1		
f	All other contributions, gifts, gran		LIZE GIRL				
	similar amounts not included abo	ve 1f 7	,645,710.				
g	Noncash contributions included in lines		,137,128.				14
h	Total. Add lines 1a-1f		and the second district th	7,740,344.	The same of the sa		
			Business Code				
2 a							
b							
c							-
d							-
е							-
	All other program service reve						-
	Total. Add lines 2a-2f						
3	Investment income (including		A MARK ARREST	4 057			4,057
7	other similar amounts)			4,057.			4,037
4	Income from investment of tax		Proceedings of the Process of the Pr				
5	Royalties						
	0	(i) Real	(ii) Personal		2.0		
	Gross rents						
	Less: rental expenses		-	A	4		
	Rental income or (loss)						
	Net rental income or (loss)						
/ a	Gross amount from sales of	(i) Securities	(ii) Other				
	assets other than inventory			2 1			
ь	Less: cost or other basis						
	and sales expenses		+				
	Gain or (loss)		D				4
-3	Not gain or (loss)						
	Net gain or (loss)		A section of the sect				N .
	Gross income from fundralsing	g events (not					
	Gross income from fundralsing including \$	g events (not of					
	Gross income from fundraising including \$ contributions reported on line	g events (not of 1c). See					
8 a	Gross income from fundraising including \$ contributions reported on line Part IV, line 18	g events (not of 1c). See					
8 a	Gross income from fundraising including \$ contributions reported on line Part IV, line 18 Less: direct expenses	g events (not of 1c). See &					
8 a	Gross income from fundraising including \$ contributions reported on line Part IV, line 18 Less: direct expenses Net income or (loss) from fund	g events (not of 1c). See & k raising events					
8 a	Gross income from fundraising including \$ contributions reported on line Part IV, line 18 Less: direct expenses Net income or (loss) from fund Gross income from gaming ac	g events (not of 1c). See & t raising events tivities. See	>				
8 a b c 9 a	Gross income from fundraising including \$ contributions reported on line Part IV, line 18 Less: direct expenses Net income or (loss) from fund Gross income from gaming ac Part IV, line 19	g events (not of of see	>				
8 a b c 9 a b	Gross income from fundraising including \$	g events (not of of 1c). See & & k raising events tivities. See &					
8 a b c 9 a b c	Gross income from fundraising including \$	g events (not of of of a a t raising events tivities. See a a t ing activities	>				
8 a b c 9 a b c	Gross income from fundraising including \$	g events (not of of of a a s tivities. See a a ting activities returns					
8 a b c 9 a b c 10 a	Gross income from fundraising including \$ contributions reported on line Part IV, line 18 Less: direct expenses Net income or (loss) from fund Gross income from gaming ac Part IV, line 19 Less: direct expenses Net income or (loss) from gam Gross sales of inventory, less and allowances	g events (not of of of a a s traising events tivities. See a b ing activities . returns					
8 a b c 9 a b c 10 a b	Gross income from fundraising including \$ contributions reported on line Part IV, line 18 Less: direct expenses Net income or (loss) from fund Gross income from gaming ac Part IV, line 19 Less: direct expenses Net income or (loss) from gam Gross sales of inventory, less and allowances Less: cost of goods sold	g events (not of of a a s t s s s					
8 a b c 9 a b c 10 a b	Gross income from fundraising including \$ contributions reported on line Part IV, line 18 Less: direct expenses Net income or (loss) from fund Gross income from gaming ac Part IV, line 19 Less: direct expenses Net income or (loss) from gam Gross sales of inventory, less and allowances Less: cost of goods sold Net income or (loss) from sales	g events (not of of a a s raising events tivities. See a b	D				
8 a b c 9 a b c 10 a b c	Gross income from fundraising including \$ contributions reported on line Part IV, line 18 Less: direct expenses Net income or (loss) from fund Gross income from gaming ac Part IV, line 19 Less: direct expenses Net income or (loss) from gam Gross sales of inventory, less and allowances Less: cost of goods sold Net income or (loss) from sales Miscellaneous Revenue	g events (not of of f		84,169.			84,169
8 a b c 9 a b c 10 a b c	Gross income from fundraising including \$ contributions reported on line Part IV, line 18 Less: direct expenses Net income or (loss) from fund Gross income from gaming ac Part IV, line 19 Less: direct expenses Net income or (loss) from gam Gross sales of inventory, less and allowances Less: cost of goods sold Net income or (loss) from sales Miscellaneous Revenue List Rental Inc	g events (not of of f	Business Code	84,169.			84,169
8 a b c 9 a b c 110 a	Gross income from fundraising including \$ contributions reported on line Part IV, line 18 Less: direct expenses Net income or (loss) from fund Gross income from gaming ac Part IV, line 19 Less: direct expenses Net income or (loss) from gam Gross sales of inventory, less and allowances Less: cost of goods sold Net income or (loss) from sales Miscellaneous Revenue List Rental Inc	g events (not of of f	Business Code	84,169.			84,169
8 a b c 9 a b c 110 a b c	Gross income from fundraising including \$ contributions reported on line Part IV, line 18 Less: direct expenses Net income or (loss) from fund Gross income from gaming ac Part IV, line 19 Less: direct expenses Net income or (loss) from gam Gross sales of inventory, less and allowances Less: cost of goods sold Net income or (loss) from sales Miscellaneous Revenue List Rental Inc	g events (not of of lc). See lc raising events tivities. See lc	Business Code	84,169.			84,169
8 a b c c 9 a b c c 10 a b c c	Gross income from fundraising including \$ contributions reported on line Part IV, line 18 Less: direct expenses Net income or (loss) from fund Gross income from gaming ac Part IV, line 19 Less: direct expenses Net income or (loss) from gam Gross sales of inventory, less and allowances Less: cost of goods sold Net income or (loss) from sales Miscellaneous Revenue List Rental Inc	g events (not of of	Business Code 533110	84,169.			84,169

1

Form 990 (2018) Aid For Starving Children
Part IX Statement of Functional Expenses

_	Check if Schedule O contains a respons	e or note to any line in t (A)	his Part IX	(C)	(D)
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	Total expenses	(B) Program service expenses	Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign	C 457 415	C 457 415		
-0.1	individuals. See Part IV, lines 15 and 16	6,457,415.	6,457,415.		
4	Benefits paid to or for members				
5	Compensation of current officers, directors,	30,000.	15,000.		15,000
	trustees, and key employees	30,000.	13,000.	-	13,000
6	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	138,445.	60,916.	74,760.	2,769
8	Pension plan accruals and contributions (Include	100/110.	00,7220.	7277001	27.02
٥	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits	15,196.	6,686.	8,206.	304
10	Payroll taxes	11,851.	5,214.	6,400.	237
11	Fees for services (non-employees):	10004120-001			
а	Management				
	Legal	630.		630.	
	를 맞는 하다면 무슨 NGC 이 전에도 모든 어떤 것으로 되었다. 그런 그 모든 이 등을 하는 것으로 모든 그를 모든 것이다.	65,766.		65,766.	
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g		20 May 10 May 12	57 table	5.00	
	column (A) amount, list line 11g expenses on Sch O.)	181,142.	84,231.	5,340.	91,571 3,797
12	Advertising and promotion	3,797.			
13	Office expenses	36,995.	2,819.	34,048.	128
14	Information technology	1,641.			1,641
15	Royalties	10.000	1 500	10.000	
16	Occupancy	18,000.	4,680.	13,320.	
17	Travel				
18	Payments of travel or entertainment expenses		total municipality		
224	for any federal, state, or local public officials	52,152.	22,946.	28,162.	1,044
19	Conferences, conventions, and meetings	54,154.	22,940.	40,104.	1,044
20	Interest				
21	Payments to affiliates	2,437.	634.	1,803.	
22		3,669.	1,615.	1,981.	73.
23	Other expenses. Itemize expenses not covered	3,0031	2,013.	1,501.	,,,
-4	above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
а	Direct mail cost	745,827.			745,827
b	List rental expense	6,660.			6,660.
c	Freight and shipping	5,994.	5,994.		
d					
	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	7,777,617.	6,668,150.	240,416.	869,051.
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundralsing solicitation.				

Part X | Balance Shee

		Check if Schedule O contains a response or not	e to arry in	le in this Part X ,	(A)	T	(B)
					Beginning of year		End of year
	1	Cash - non-interest-bearing	aramaaa	anni anaramani da	337,794.	1	294,768
	2	Savings and temporary cash investments		2			
	3	Pledges and grants receivable, net	25,943.	3	44,210		
	4	Accounts receivable, net		20,854.	4	17,582	
	5	Loans and other receivables from current and for	rmer office	rs, directors,			
		trustees, key employees, and highest compensa	ted emplo	yees. Complete		1.50	
	10.7	Part II of Schedule L				5	
	6	Loans and other receivables from other disquali					
	100	section 4958(f)(1)), persons described in section		340			
		employers and sponsoring organizations of sect	ion 501(c)(9) voluntary		100	
2		employees' beneficiary organizations (see instr).	Complete	Part II of Sch L		6	
ASSetS	7	Notes and loans receivable, net				7	
Ë	8	Inventories for sale or use				8	
	9	Prepaid expenses and deferred charges	,		87,748.	9	120,405
	10a	Land, buildings, and equipment: cost or other		140 424		TO K	
	1	basis. Complete Part VI of Schedule D	10a	17,964.			
	b	Less: accumulated depreciation	10b	4,799.	2,728.	10c	13,165
	11	Investments - publicly traded securities				-11	
	12	Investments - other securities. See Part IV, line 1			94,179.	12	100,206
	13	Investments - program-related. See Part IV, line		67,690.	13	67,690	
	14	Intangible assets		14			
	15	Other assets. See Part IV, line 11		15	550 005		
	16	Total assets. Add lines 1 through 15 (must equa	636,936.	16	658,026		
	17	Accounts payable and accrued expenses			60,961.	17	17,060
	18	Grants payable				18	
	19	Deferred revenue				19	
-1	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Complete I		THE RESERVE AND ADDRESS OF THE PROPERTY OF THE RES		21	
3	22	Loans and other payables to current and former					
	110	key employees, highest compensated employee					
Liabilities		Complete Part II of Schedule L				22	
1	23	Secured mortgages and notes payable to unrela				23	
	24	Unsecured notes and loans payable to unrelated				24	
	25	Other liabilities (including federal income tax, par parties, and other liabilities not included on lines					
		물개들이 뭐 있다면 그 없는 아이는 아이들을 하고 있다면 하는 것이 되었다. 그 그 없다				25	
	26	Schedule D Total liabilities, Add lines 17 through 25		and the second s	60,961.	26	17,060
	20	Organizations that follow SFAS 117 (ASC 958)	chock be	ro X and	00,301.	20	#7,000
Ш		complete lines 27 through 29, and lines 33 and		re p (AL) and			
wet Assets of Fully balances	27	Unrestricted net assets			575,975.	27	640,966
5	28	Temporarily restricted net assets			0,0,0,0	28	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
5	29	마부터 영어 내면 일을 가면 하나 수 있는 사람들이 없는 아니라 하나 하나 하다.		1		29	
2	20	Organizations that do not follow SFAS 117 (AS		neck here			
		and complete lines 30 through 34.	30-330, 0	licox fiere p			
2	30	Capital stock or trust principal, or current funds				30	
3	31	Paid-in or capital surplus, or land, building, or eq				31	
5	32	Retained earnings, endowment, accumulated inc				32	192-19 1-1-1-1
2	33	Total net assets or fund balances			575,975.	33	640,966
111	90	Total liabilities and net assets/fund balances			636,936.	34	658,026

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

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 in Schedule O and describe any steps taken to undergo such audits

Act and OMB Circular A-133?

832012 12-31-18

X

Form 990 (2018)

За

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 for instructions and the latest information.

2018

Open to Public Inspection

Name of the organization

Aid For Starving Children

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.)

The	organ	ization is not a private for	undation because it is	s: (For lines 1 through 12,	check onl	y one box.)	
1	1.0			ation of churches describe				
2). (Attach Schedule E (Fo			1 10 100	
3				rganization described in				
4		A medical research orga city, and state:	anization operated in	conjunction with a hospita	al describe	d in secti	on 170(b)(1)(A)(iii). Ente	er the hospital's name,
5		An organization operate section 170(b)(1)(A)(iv)		college or university owne	d or opera	ated by a g	overnmental unit descrit	ped in
6				nmental unit described in	section	170(b)(1)(A	N(v)	
7	X			stantial part of its support				public described in
		section 170(b)(1)(A)(vi).				. 211111115:132	The state of the s	pasine accompacting
8		A community trust desc	ribed in section 170	(b)(1)(A)(vi). (Complete Pa	art II.)			
9				ed in section 170(b)(1)(A		ted in con	unction with a land-gran	t college
		or university or a non-lar university;	nd-grant college of ag	riculture (see instructions)	Enter the	name, cit	y, and state of the colleg	ge or
10		The state of the s	mally receives: (1) mo	ore than 33 1/3% of its sup	port from	contributi	ons, membership fees, a	and gross receipts from
		activities related to its ex	xempt functions - sub	ject to certain exceptions	and (2) n	o more tha	in 33 1/3% of its support	from gross investment
				ne (less section 511 tax) fi				
		See section 509(a)(2). (alleb addis alba kaktar
11				usively to test for public s				
12		An organization organize	ed and operated exclu	usively for the benefit of, t	o perform	the function	ons of, or to carry out the	purposes of one or
		more publicly supported	organizations descri	bed in section 509(a)(1)	or section	509(a)(2)	See section 509(a)(3).	Check the box in
				of supporting organization				
а	-	the supported organization	ation(s) the power to	, supervised, or controlled regularly appoint or elect	l by its sup a majority	oported org of the dire	ganization(s), typically by ctors or trustees of the s	giving supporting
		organization. You mus						
b	-			ed or controlled in connec				
				ganization vested in the s	ame perso	ons that co	entrol or manage the sup	ported
		organization(s). You m			a recessor	da Awar		The state of
C	-			ing organization operated				ed with,
d				ns). You must complete				Suc. VX
u				pporting organization ope				
				nization generally must sa complete Part IV, Section				veness
e				a written determination fro				
-				onally integrated support			Type i, Type ii, Type iii	
f	Enter	the number of supporter	d organizations		ng organia	cation.		
q	Provi	de the following informat	ion about the suppor	ted organization(s)	CATORICO CAGO		***************************************	
		Name of supported	(ii) EIN	(III) Type of organization	(iv) is the org	anization listed ling document?	(v) Amount of monetary	(vi) Amount of other
		organization		(described on lines 1-10 above (see instructions))	Yes	No	support (see instructions)	support (see instructions)
				ANAXA (Saa I(IS)) AUGUSTS)				
			4					
			11					

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. 832021 10-11-18 Schedule A (Form 990 or 990-EZ) 2018

Schedule A (Form 990 or 990-EZ) 2018 Aid For Starving Children Part II | Support Schedule for Organizations Described in Sections 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.)

Calendar year (or fiscal year beginning in) P (a) 2014 (b) 2015 (c) 2016 (d) 2017 (e) 2018 (f) Total of Citis, grants, contributions, and memberatisp fees received. (Do not include any "unusual grants.") 1727 0 4 0 5 . 2119 6 4 2 8 . 1 4 5 1 8 6 8 8 . 1 4 3 3 4 1 2 9 . 77 4 0 3 4 4 . 7 5 0 5 9 9 4 . 1727 0 4 0 5 . 2119 6 4 2 8 . 1 4 5 1 8 6 8 8 . 1 4 3 3 4 1 2 9 . 77 4 0 3 4 4 . 7 5 0 5 9 9 9 4 . 1727 0 4 0 5 . 2119 6 4 2 8 . 1 4 5 1 8 6 8 8 . 1 4 3 3 4 1 2 9 . 77 4 0 3 4 4 . 7 5 0 5 9 9 9 4 . 1727 0 4 0 5 . 2119 6 4 2 8 . 1 4 5 1 8 6 8 8 . 1 4 3 3 4 1 2 9 . 77 4 0 3 4 4 . 7 5 0 5 9 9 9 4 . 1727 0 4 0 5 . 2119 6 4 2 8 . 1 4 5 1 8 6 8 8 . 1 4 3 3 4 1 2 9 . 77 4 0 3 4 4 . 7 5 0 5 9 9 9 4 . 1727 0 4 0 5 . 2119 6 4 2 8 . 1 4 5 1 8 6 8 8 . 1 4 3 3 4 1 2 9 . 77 4 0 3 4 4 . 7 5 0 5 9 9 9 4 . 1727 0 4 0 5 . 2119 6 4 2 8 . 1 4 5 1 8 6 8 8 . 1 4 3 3 4 1 2 9 . 77 4 0 3 4 4 . 7 5 0 5 9 9 9 4 . 1727 0 4 0 5 . 2119 6 4 2 8 . 1 4 5 1 8 6 8 8 . 1 4 3 3 4 1 2 9 . 77 4 0 3 4 4 . 7 5 0 5 9 9 9 4 . 1727 0 4 0 5 . 2119 6 4 2 8 . 1 4 5 1 8 6 8 8 . 1 4 3 3 4 1 2 9 . 77 4 0 3 4 4 . 7 5 0 5 9 9 9 4 . 1727 0 4 0 5 . 2119 6 4 2 8 . 1 4 5 1 8 6 8 8 . 1 4 3 3 4 1 2 9 . 77 4 0 3 4 4 . 7 5 0 5 9 9 9 4 . 1727 0 4 0 5 . 2119 6 4 2 8 . 1 4 5 1 8 6 8 8 . 1 4 3 3 4 1 2 9 . 77 4 0 3 4 4 . 7 5 0 5 9 9 9 4 . 1727 0 4 0 5 . 2119 6 4 2 8 . 1 4 5 1 8 6 8 8 . 1 4 3 3 4 1 2 9 . 77 4 0 3 4 4 . 7 5 0 5 9 9 9 4 . 1727 0 4 0 5 . 2119 6 4 2 8 . 1 4 5 1 8 6 8 8 . 1 4 3 3 4 1 2 9 . 77 4 0 3 4 4 . 7 5 0 5 9 9 9 4 . 1727 0 4 0 5 . 2119 6 4 2 8 . 1 4 5 1 8 6 8 8 . 1 4 3 3 4 1 2 9 . 77 4 0 3 4 4 . 7 5 0 5 9 9 9 4 . 1727 0 4 0 5 . 2119 6 4 2 8 . 1 4 5 1 8 6 8 8 . 1 4 3 3 4 1 2 9 . 77 4 0 3 4 4 . 7 5 0 5 9 9 9 4 . 1727 0 4 0 5 . 2119 6 4 2 8 . 1 4 5 1 8 6 8 8 . 1 4 3 3 4 1 2 9 . 77 4 0 3 4 4 . 7 5 0 5 9 9 9 4 . 1727 0 4 0 5 . 2119 6 4 2 8 . 1 4 5 1 8 6 8 8 . 1 4 3 3 4 1 2 9 . 77 4 0 3 4 4 . 7 5 0 5 9 9 9 4 . 1727 0 4 0 5 . 2119 6 4 2 8 . 1 4 5 1 8 6 8 8 . 1 4 3 3 4 1 2 9 . 77 4 0 3 4 4 . 7 5 0 5 9 9 9 4 . 1727 0 4 0 5 . 2119 6 4 2 8 . 1 4 5 1 8 6 8	Se	ction A. Public Support						
Gilds, grants, contributions, and membership frees medieved, (Do not include any "unusual grants.") 1 Tax revenues levided for the organization's hearist and either paid to or expended on its behalf and either paid to expended on its behalf and either paid to expended on its behalf and expended on	Cal	endar year (or fiscal year beginning in) 🕨	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
Total common	1	그렇게 되었다면 하면 가득하셨다면, 사건 이렇게 하면 가면 가게 하면 하면 하면 하면 하면 하면 하다.			-/11 -1110-4-1			1 1 1 1 1 1
2 Tax revenues levied for the organization is benefit and either paid to or expended on its behalf 3 The value of services or facilities furnished by a governmental unit to the organization without charge 4 Total, Add lines 1 through 3 5 The portion of total contributions by each person (either than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) 6 Public support, Selectine 8 levaline 1/27/04/05.21196428.14518688.14334129.774.0344.75059994. 8 Public support, Selectine 8 levaline 1/27/04/05.21196428.14518688.14334129.774.0344.75059994. 8 Public support selectine 8 levaline 1/27/04/05.21196428.14518688.14334129.774.0344.75059994. 1 Total support Selectine 8 levaline 1/27/04/05.21196428.14518688.14334129.774.0344.75059994. 1 Total support Selectine 8 levaline 1/27/04/05.21196428.14518688.14334129.774.0344.75059994. 1 Total support selection 1/27/04/05.21196428.14518688.14334129.774.0344.75059994. 1 Total support form similar sources 1/27/04/05.21196428.14518688.14334129.774.0344.75059994. 2 Section From the selection 1/27/04/05.21196428.14518688.14334129.774.0344.75059994. 3 Public support benefits 1/27/04/05.21196428.14518688.14334129.774.0344.75059994. 4 Public support level and the selection 1/27/04/05.21196428.14518688.14334129.774.0344.75059994. 5 Public support level and the selection 1/27/04/05.21			17270405.	21196428.	14518688.	14334129.	7740344	75059994.
furnished by a governmental unit to the organization without charge 4 Total. Add lines 1 through 3	2	Tax revenues levied for the organ- lzation's benefit and either paid to				130311031	7710311	, 5055551.
4 Total. Add lines 1 through 3 5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) 6 Public support. Switzed line 5 tom line 4 7 Amounts from line 4 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from interest, dividends, payments received on securities loans, rents, royalties, and income from interest, dividends, payments received on securities loans, rents, royalties, and income from interest, dividends, payments received on securities loans, rents, royalties, and income from interest, dividends, payments received on securities loans, rents, royalties, and income from interest, dividends, payments received on securities loans, rents, royalties, and income from interest, dividends, payments received on securities with the organization of the business is regularly carried on 10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI) 12 12 Gross receipts from related activities, etc. (see instructions) 12 13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) cross receipts from related activities, etc. (see instructions) 12 14 Public support percentage for 2018 (line 6, column of) divided by line 11, column (ft) 15 99.59 98 16a 33 1/3% support test - 2018. If the organization of not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization meets the "facts and circumstances" test. The organization qualifies as a publicly supported organization meets the "facts and circumstances" test. The organization qualifies as a publicly supported organization meets the "facts and circumstances" test. The organization qualifies as a publicly supported organization meets the "facts and circumstances" test. The or	3	The value of services or facilities furnished by a governmental unit to						Lorus
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) 6 Public support. Satirated has 8 from line 4. Soction B. Total Support Calendar year (or fiscal year beginning in) (a) 2014	4		17270405.	21196428.	14518688.	14334129.	7740344.	75059994.
governmental unit or publicly supported organization) included on fine 1 that exceeds 2% of the amount shown on line 11, column (f) 8 Public support, Subtest line 5 bon line 4. 7 Public support, Subtest line 5 bon line 4. 7 Amounts from line 4 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from unrelated business activities, whether or not the business is regularly carried on or loss from the sale of capital assets (Explain in Part VI.) 10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) 11 Total support. Add lines 7 through 10 12 Gross receipts from related activities, etc. (see instructions) 13 First five years, if the Form 900 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. The organization qualifies as a publicly supported organization meets the "facts and circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts and circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts and circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts and circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts and circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts and circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts and circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts and circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts and circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts and circumstances" test. The organization qualifies as a publ	5		A. T. C. C. C. C. C. C. C.					1.11-1.11-1.11
supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) 75059994. Section B. Total Support Calendar year (or fiscal year beginning in) > Calendar year (or fiscal year) > Calendar year (or		by each person (other than a						
on line 1 that exceeds 2% of the amount shown on line 11, column (f) 6 Public support. Subred line 5 from line 4. 7 Soction B. Total Support Calledary yar (or liscal year beginning in) (a) 2014		governmental unit or publicly						
amount shown on line 11, column (f) 6 Public support. Subvect line 5 tom line 4. Section B. Total Support Calendar year (or fiscal year beginning in) 7 Amounts from line 4. 17270405. 21196428. 14518688. 14334129. 7740344. 75059994. 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources. 8 Gross income from unrelated business activities, whether or not the business is regularly carried on. 10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI). 10 Total support. Add lines 7 through 10. 11 Total support. Add lines 7 through 10. 12 Gross receipts from related activities, etc. (see instructions). 12 13 First five 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. 14 Public support percentage for 2018 (line 6, column (f) divided by line 11, column (f)). 15 Public support percentage from 2017 Schedule A, Part II, line 14. 16 99.96 % 18 33 1/3% support test - 2018. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization. 16 10% -facts-and-circumstances test - 2018. If the organization did not check a box on line 13, 16a, and line 15 is 33 1/3% or more, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances"								
Section B. Total Support Selection B. Total Support Calendar year (or fiscal year beginning in) 7 Amounts from line 4 17270405.21196428.14518688.14334129.7740344.75059994. Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from unrelated business activities, whether or not the business are regularly carried on 10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI). 11 Total support. Add lines 7 through 10 12 Gross receipts from related activities, etc. (see instructions) 13 First five 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 14 Public support percentage for 2018 (line 6, column (f) divided by line 11, column (f)) 15 Public support percentage for 2018 (line 6, column (f) divided by line 11, column (f)) 16 33 1/3% support test - 2018. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances test - 2017. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organiz								
Section B. Total Support Calendar year (or fiscal year beginning in) 7 Amounts from line 4					1000		1	100000
Section B. Total Support Calendar year (or fiscal year beginning in) Amounts from line 4 Calendar year (or fiscal year beginning in) Amounts from line 4 Calendar year (or fiscal year beginning in) Amounts from line 4 Calendar year (or fiscal year beginning in) Calendar year (or fiscal year) Calendar year (or fi			<u> </u>	-			2:	
Calendar year (or fiscal year beginning in) Amounts from line 4							k-2,	75059994.
7 Amounts from line 4 17270405 . 21196428 . 14518688 . 14334129 . 7740344 . 75059994 . 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources 626 . 758 . 933 . 2 , 374 . 4 , 057 . 8 , 748 . 9 Net income from unrelated business activities, whether or not the business is regularly carried on 10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) 52 , 595 . 82 , 642 . 79 , 670 . 98 , 691 . 84 , 169 . 397 , 767 . 11 Total support. Add lines 7 through 10 52 , 595 . 82 , 642 . 79 , 670 . 98 , 691 . 84 , 169 . 397 , 767 . 75466509 . 12 . 12 . 13 First five 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.	-		1110044	# 1 0045	1 1 10010	1 1 1 1 1 1 1	4 2 0040	10 T-1-1
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources and income from similar sources set of 26 to 758 to 933 to 2,374 to 4,057 to 8,748 to 99 to 100 miles income from unrelated business activities, whether or not the business is regularly carried on 10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) 10			17270405	21196428	14518688			
dividends, payments received on securities loans, rents, royalties, and income from similar sources			17270403.	21170420.	14310000.	14334123.	7740344.	73033334.
securities loans, rents, royalties, and income from similar sources. Net income from similar sources. Net income from unrelated business activities, whether or not the business is regularly carried on the business is regularly carried on to Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) Total support. Add lines 7 through 10 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501c)(3) organization, check this box and stop here. Section C. Computation of Public Support Percentage Public support percentage for 2018 (line 6, column (f) divided by line 11, column (f)) 12 13 First five years. If the Form 990 is for the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization. b 33 1/3% support test - 2017. If the organization did not check a box on line 13 or 16a, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization weets the "facts-and-circumstances test - 2018. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test, check this box and stop here.	0	요한 12.1kg 12.1kg 15.1kg 15.2kg 13.1kg 13.1kg 13.1kg 13.1kg 15.1kg 13.1kg 13.1kg 13.1kg 12.1kg	0.00	1000	11111111111	1000	1.0	1000
and income from similar sources 626 758 933 2,374 4,057 8,748. Not income from unrelated business activities, whether or not the business is regularly carried on 10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI)					1	1 / / 3	1000	0 - 17 /
9 Net income from unrelated business activities, whether or not the business is regularly carried on 10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)			626.	758.	933.	2.374.	4.057.	8.748.
activities, whether or not the business is regularly carried on 10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	9	경기, 나오는, 경기를 다가 하다니겠다면 그렇게 되었다. 나라 하루 그리고 그는 그 네트워드		17.74		W	2 / 2 / 2	
business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) 52,595,82,642,79,670,98,691,84,169,397,767. Total support. Add lines 7 through 10 Gross receipts from related activities, etc. (see instructions) 12 3 First five 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 14 Public support percentage for 2018 (line 6, column (f) divided by line 11, column (f)) 15 Public support percentage from 2017 Schedule A, Part III, line 14 16a 33 1/3% support test - 2018. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization b 33 1/3% support test - 2017. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 17a 10% -facts-and-circumstances test - 2018. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test, check thi						1000		
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)		Accordance to a secretary and a second of the						
assets (Explain in Part VI.) 52,595, 82,642, 79,670, 98,691, 84,169, 397,767. 11 Total support. Add lines 7 through 10 12 Gross receipts from related activities, etc. (see instructions) 13 First five 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 14 Public support percentage for 2018 (line 6, column (f) divided by line 11, column (f)) 15 Public support percentage from 2017 Schedule A, Part II, line 14 16 33 1/3% support test - 2018. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 17 a 10% -facts-and-circumstances test - 2018. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions 19 A 10% -facts-and-circumstances test - 2017. If the organization qualifies as a publicly supported organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported orga	10	[2] [1] [1] [1] [1] [1] [1] [1] [1] [1] [1						
Total support. Add lines 7 through 10 Gross receipts from related activities, etc. (see instructions) First five 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 14 Public support percentage for 2018 (line 6, column (f) divided by line 11, column (f)) 15 Public support percentage from 2017 Schedule A, Part II, line 14 16 33 1/3% support test - 2018. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 17 a 10% -facts-and-circumstances test - 2018. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization 18 Private foundation. If the organization did not check a bo		or loss from the sale of capital	1 1 1 1 1 1 1 1	7237 - 3859	176.35 8.83	90.7 7200.1		55.17.17.17.1
12 Gross receipts from related activities, etc. (see instructions) 13 First five 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 14 Public support percentage for 2018 (line 6, column (f) divided by line 11, column (f)) 15 Public support percentage from 2017 Schedule A, Part II, line 14 16 99.46 % 16 33 1/3% support test - 2018. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 16 a 33 1/3% support test - 2017. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 17a 10% -facts-and-circumstances test - 2018. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in		assets (Explain in Part VI.)	52,595.	82,642.	79,670.	98,691.		
First five 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 14 Public support percentage for 2018 (line 6, column (f) divided by line 11, column (f)) 15 Public support percentage from 2017 Schedule A, Part II, line 14 15 99.59 % 16a 33 1/3% support test - 2018. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization b 33 1/3% support test - 2017. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 17a 10% -facts-and-circumstances test - 2018. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization 18 Private foundation. If the organization did not	11	Total support. Add lines 7 through 10			1 1 1 4			75466509.
organization, check this box and stop here Section C. Computation of Public Support Percentage 14 Public support percentage for 2018 (line 6, column (f) divided by line 11, column (f)) 15 Public support percentage from 2017 Schedule A, Part II, line 14 16 99.46 % 16 33 1/3% support test - 2018. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 18 Private foundation. If the organization did not check a box on line 13, 16a, 17a, or 17b, check this box and see instructions 19 Public support percentage from 2017 Schedule A, Part II, line 14 19 9.46 % 19 9.59 % 16 33 1/3% support test - 2018. If the organization did not check a box on line 13 ine 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization in Part VI how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test, check this box and stop her		보다. 그 보다 그는 이렇다는 그 아래나다 그러워 하는 그는 그 그리고 있다. 아픈 아이는 그 때문에 그렇						
Section C. Computation of Public Support Percentage 14 Public support percentage for 2018 (line 6, column (f) divided by line 11, column (f)) 15 Public support percentage from 2017 Schedule A, Part II, line 14 16 99.46 % 16 33 1/3% support test - 2018. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions 19 9.46 % 10 99.46 % 10 99.46	13		And the contract of the second second	first, second, thir	d, fourth, or fifth ta	x year as a section	501(c)(3)	
Public support percentage for 2018 (line 6, column (f) divided by line 11, column (f)) 14 99.46 % 15 Public support percentage from 2017 Schedule A, Part II, line 14 16 39.59 % 16a 33 1/3% support test - 2018. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization b 33 1/3% support test - 2017. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 17a 10% -facts-and-circumstances test - 2018. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization 18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions	Se	organization, check this box and stor	c Support Per		en en e	*****************		
15 Public support percentage from 2017 Schedule A, Part II, line 14	_				olumn (f))		14	99.46 %
16a 33 1/3% support test - 2018. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization b 33 1/3% support test - 2017. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 17a 10% -facts-and-circumstances test - 2018. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization P III Service foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions P III Service foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions								
stop here. The organization qualifies as a publicly supported organization b 33 1/3% support test - 2017. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 17a 10% -facts-and-circumstances test - 2018. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions X X X X X X X X X								
b 33 1/3% support test - 2017. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 17a 10% -facts-and-circumstances test - 2018. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test, check t								
and stop here. The organization qualifies as a publicly supported organization 17a 10% -facts-and-circumstances test - 2018. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization b 10% -facts-and-circumstances test - 2017. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions	E	33 1/3% support test - 2017. If the	organization did no	t check a box on i	ine 13 or 16a, and	line 15 is 33 1/3%	or more, check th	s box
17a 10% -facts-and-circumstances test - 2018. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization b 10% -facts-and-circumstances test - 2017. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions								
meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization b 10% -facts-and-circumstances test - 2017. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions	178							
b 10% -facts-and-circumstances test - 2017. If the organization dld not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions		and if the organization meets the "fac	ts-and-circumstand	es" test, check th	is box and stop h	nere. Explain in Par	t VI how the organ	ization
more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions		meets the "facts-and-circumstances"	test. The organizal	ion qualifies as a p	publicly supported	organization		
organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization 18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions	Ł		경우 있다면 하는 것이 되었다. 그런 사람					
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions		그 그 그는 그가 얼마나게 되는 것이 되는 것이 없었다면 하다는 그리스다면 하다. 나		사용하다 보통하다 경기 모양하다 하다.				
							20 20 20 20 20 20 20 20 20 20 20 20 20 2	The second secon
	18	Private foundation. If the organization	n did not check a	box on line 13, 16a	a, 16b, 17a, or 17b	Charles and Control of the Control o		

Schedule A (Form 990 or 990-EZ) 2018 Aid For Starving Children

[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 t
gualify under the tests listed below, please complete Part II.)

Section A. Public Support						
Calendar year (or fiscal year beginning in) ⊳ 📙	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1 Gifts, grants, contributions, and			2,000			
membership fees received. (Do not include any "unusual grants.")						
Gross receipts from admissions, merchandise sold or services per- formed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
Gross receipts from activities that are not an unrelated trade or bus- iness under section 513						
Tax revenues levied for the organ- ization's benefit and either paid to or expended on its behalf						
				1		-
5 The value of services or facilities furnished by a governmental unit to the organization without charge			1			
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and						
3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						0.40
Section B. Total Support						
Calendar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
9 Amounts from line 6	- AA				7 A M. M. M.	
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b Unrelated business taxable income						
(less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is						
regularly carried on 12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						
14 First five years. If the Form 990 is for t	he organization's	first, second, thir	d, fourth, or fifth ta	x year as a section	on 501(c)(3) organiza	ation,
check this box and stop here						▶□
Section C. Computation of Public	Support Per	centage				
15 Public support percentage for 2018 (lin-	e 8, column (f), d	ivided by line 13, o	olumn (f))		15	%
16 Public support percentage from 2017 S Section D. Computation of Investi					16	%
17 Investment income percentage for 201			ne 13, column (fi)	Withman and the same of	17	%
18 Investment income percentage from 20					18	%
19a 33 1/3% support tests - 2018. If the o						
more than 33 1/3%, check this box and						
b 33 1/3% support tests - 2017. If the o	rganization did n	ot check a box on	line 14 or line 19a	, and line 16 is m	ore than 33 1/3%, a	nd
20 Private foundation. If the organization						
zo Private foundation, il the organization	did not check a	50x 011 inte 14, 198	, or rap, check th	III BBS DIVE YOU SII	Structions	

Part IV | Supporting Organizations

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

Section	A.	All	Supr	ortina	Orga	nizations

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

	Yes	No
1		
2		
За	-	
Ja	- 7	
3b		
3c		
- 00		
4a		
4b		
40		
4c	100-1	-
5a		
5b		
5c		
	113	
6		
7		
8		
9a		
and the		1
9b		
On.		
9c		
10a		
10b		
1 100		

Schedule A (Form 990 or 990-EZ) 2018 A:	id F	or Sta	arving (\mathtt{Chil}	dren
---	------	--------	----------	-----------------	------

52-1224507 Page 6

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

Schedule A (Form 990 or 990-EZ) 2018

Schedule A (Form 990 or 990-EZ) 2018

b Excess from 2015
 c Excess from 2016
 d Excess from 2017
 e Excess from 2018

Scriedule A	(Form 990 or 990 EZ) 2018 AIQ FOI SCAIVING CHILICIEN 52-1224507 Page 8
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.)
,	
-	
Balletin and the street County Avides	
-	

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 Open to Public Inspection

Name of the organization

Employer identification number

Aid For Starving	Children	52-1224507
Part I Organizations Maintaining Donor Advis	sed Funds or Other Similar Funds	or Accounts. Complete if the
organization answered "Yes" on Form 990, Part IV,		
	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate value of contributions to (during year)		
3 Aggregate value of grants from (during year)		
4 Aggregate value at end of year		
5 Did the organization inform all donors and donor advisors in		
are the organization's property, subject to the organization 6 Did the organization inform all grantees, donors, and dono		
for charitable purposes and not for the benefit of the dono	경기 보면 그런 그렇게 되었다. 그는 가는 가는 이번 가게 되는 생각이 되었다. 그는 사람들이 되었다. 그렇지 않는 그렇지 않는 것이다.	V 1.2 O 11 1/1 91.
impermissible private benefit?		
Part II Conservation Easements. Complete if the	organization answered "Yes" on Form 990. F	art IV. line 7.
1 Purpose(s) of conservation easements held by the organiza		artifilmo / ;
Preservation of land for public use (e.g., recreation o	[1. 14] [1. 17] [1. 14] [1. 14] [1. 14] [1. 14] [1. 14] [1. 14] [1. 14] [1. 14] [1. 14] [1. 14] [1. 14] [1. 14]	prically important land area
Protection of natural habitat	Preservation of a certi	하는 그 사람이 많아 가지 않아 아이 사는 아이들이 가지 않아 가장이 가장이다.
Preservation of open space	(A)	
2 Complete lines 2a through 2d if the organization held a qua	alified conservation contribution in the form of	f a conservation easement on the last
day of the tax year.		Held at the End of the Tax Yea
a Total number of conservation easements		2a
c Number of conservation easements on a certifled historic s	structure included in (a)	2c
d Number of conservation easements included in (c) acquired	그런 아들이 하는 사용을 잃어지는 이번 가는 사람들이 하다면 하지만 하는데 하는데 하는데 하는데 하는데 하다면 하다.	
listed in the National Register		
3 Number of conservation easements modified, transferred,	released, extinguished, or terminated by the	organization during the tax
year ▶	St. Call in a way on the	
Number of states where property subject to conservation e		
5 Does the organization have a written policy regarding the p	사이가 무슨 이렇게 되었다면 하는데 이렇게 하는데	
violations, and enforcement of the conservation easements 6 Staff and volunteer hours devoted to monitoring, inspecting		
Standard volunteer rouns devoted to monitoring, inspecting	g, nanding of violations, and emoleting const	ivation easements during the year
7 Amount of expenses incurred in monitoring, inspecting, ha	andling of violations, and enforcing conservati	on easements during the year
▶ \$	inding of violations, and differently conservati	on eastments daring the year
8 Does each conservation easement reported on line 2(d) about	ove satisfy the requirements of section 170(h)(4)(B)(i)
and section 170(h)(4)(B)(ii)?	[1] [1] 전 [1] [1] [1] [1] [1] [1] [1] [1] [1] [1]	
9 In Part XIII, describe how the organization reports conserva	ation easements in its revenue and expense s	tatement, and balance sheet, and
include, if applicable, the text of the footnote to the organiz	zation's financial statements that describes th	e organization's accounting for
conservation easements.	ar colore an extraor que la colore de la color de la c	
Part III Organizations Maintaining Collections	그렇게 하셨다면 많은 얼마나가 되었다면 하는 이 모양 회원은 맛이 뭐 하나 바이 없다고 있는데 없	er Similar Assets.
Complete if the organization answered "Yes" on For		
1a If the organization elected, as permitted under SFAS 116 (A	사이 무슨 살이 있다. 아이는 요시 있는 그리를 하는 사람이 하는 사람이 하는 사람이 없다면 하다면 하다면 하다면 하다.	
historical treasures, or other similar assets held for public e		e of public service, provide, in Part XIII,
the text of the footnote to its financial statements that desc		A WEAR AND A SECTION OF A SECTI
b If the organization elected, as permitted under SFAS 116 (4		
treasures, or other similar assets held for public exhibition,	education, or research in furtherance of publi	ic service, provide the following amounts
relating to these items:		S . 6
(i) Revenue included on Form 990, Part VIII, line 1	(unnaminaminaminaminaminaminaminaminaminam	▶ \$ ▶ \$
(ii) Assets included in Form 990, Part X If the organization received or held works of art, historical to	reasures or other similar assets for financial	nain provide
the following amounts required to be reported under SFAS		Janu provide
B	TTO (AGO SOD) relating to trese items.	▶ \$
b Assets included in Form 990. Part X		S

2018-04030 AID FOR STARVING CHILDREN 41153

632051 10-29-18

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

Schedule D (Form 990) 2018

Sche	dule D (Form 990) 2018 Aid For	Starving	Children		52-	1224507 Page 2
	rt III Organizations Maintaining C					
3	Using the organization's acquisition, access (check all that apply):	on, and other record			significant use of	its collection items
а	Public exhibition	- (change programs		
ь	Scholarly research		Other	7 3 7 4 4 4 7 1 1 Y		
c	Preservation for future generations					
4	Provide a description of the organization's co	SERVICE TO CARL THE SERVICE SERVICE		The state of the s	The state of the s	Part XIII.
5	During the year, did the organization solicit of					
D	to be sold to raise funds rather than to be m	aintained as part of t	he organization's o	collection?		Yes No
Pa	t IV Escrow and Custodial Arran reported an amount on Form 990, Pa		ete if the organizat	ion answered "Yes"	on Form 990, Par	t IV, line 9, or
1a	Is the organization an agent, trustee, custod		liary for contribution	ns or other assets no	ot included	
	on Form 990, Part X?					Yes No
b	If "Yes," explain the arrangement in Part XIII	and complete the fo	llowing table:	*******************		
	and the state of t	0.1507.601.619.52.60.9.42	No. 15410, 1272373			Amount
c	Beginning balance	and the same of the same			1c	
d	Additions during the year					
е	Distributions during the year					
f	Ending balance					
2a	Did the organization include an amount on F	orm 990, Part X, line	21, for escrow or	custodial account lia	bility?	Yes No
b	If "Yes," explain the arrangement in Part XIII.		THE COURSE STATE OF THE PARTY O			
Pai						
		(a) Current year	(b) Prior year	(c) Two years back		oack (e) Four years back
1a	Beginning of year balance			17/12/12/12/12		
b	Contributions					
c	Net investment earnings, gains, and losses					
d	Grants or scholarships					
е	Other expenditures for facilities					
NOT.	and programs					
f	Administrative expenses					
0	End of year balance					
2	Provide the estimated percentage of the curr	ent year end balance	e (line 1a. column (a)) held as:	*	
a	Board designated or quasi-endowment		%	-// / loid dd.		
b	Permanent endowment		-0			
-	Temporarily restricted endowment					
-	The percentages on lines 2a, 2b, and 2c sho					
За	Are there endowment funds not in the posse		tion that are held a	and administered for	the organization	
	by:	obioir of the organice	mon mar are more	and damminotored for	uio organization	Yes No
	(i) unrelated organizations					
	(ii) related organizations	***************************************			************	3a(ii)
h	If "Yes" on line 3a(ii), are the related organiza	tions listed as requir	ed on Schedule B3	/*************************************	*************	3b
4	Describe in Part XIII the intended uses of the	organization's endo	wment funds		***************************************	
Par	t VI Land, Buildings, and Equipm		Willett lands.			
	Complete if the organization answered		Part IV. line 11a.	See Form 990, Part	X. line 10.	
	Description of property	(a) Cost or o			Accumulated	(d) Book value
		basis (investr		22.315.325.00	lepreciation	(a) Book value
1a	Land	w1				
	Buildings					
c	Leasehold improvements			17,964.	4,799.	13,165.
	Equipment				-11.55	
	Other					
	Add lines 1a through 1e. (Column (d) must e		V column /DL line	10-1	D	13,165.

Schedule D (Form 990) 2018

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 for instructions and the latest information.

2018
Open to Public Inspection

Name of the organization

Employer identification number

Aid For Starvin	g Childre	en		52-12245	07
Part I General Info	rmation on A	ctivities Out	tside the United States. Comp	lete if the organization answered	"Yes" on
Form 990, Part I					
			ds to substantiate the amount of its gra the selection criteria used to award the		Yes 🔲 No
2 For grantmakers. Desc United States.	cribe in Part V the	organization's	procedures for monitoring the use of it	s grants and other assistance out	side the
3 Activities per Region. (T	he following Part	I, line 3 table ca	an be duplicated if additional space is r	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, pro- gram services, investments, grants to recipients located in the region)	is a program service,	(f) Total expenditures for and investments in the region
Sub-Saharan Africa - Angola, Benin, Botswana, Burkina Faso,	0	0	Program services	Cash given for program	242,300.
Central America and the Caribbean - Antigua & Barbuda, Aruba, Bahamas,	0	0,	Program services and humanitarian aid	Emergency Relief, medicines, education, feeding, sustainability projects, and improving	6,209,615.
East Asia and the Pacific - Australia, Brunei, Burma, Cambodia, ,	0	0	Program services	Emergency Relief, medicines, education, feeding, sustainability projects, and improving	5,500.
3 a Subtotal	0	0			6,457,415.
b Total from continuation					
sheets to Part I c Totals (add lines 3a	0	0			0.
and 3b)	0	0			6,457,415.

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

See Part V for Column (e) descriptions

Schedule F (Form 990) 2018

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. Aid For Starving Children Schedule F (Form 990) 2018 Part II

(i) Method of valuation (book, FMV, appraisal, other) Pair Market Value (h) Description of noncash assistance 6137128, Medicines (g) Amount of noncash assistance ö 0 0 0 0 0 cash disbursement (f) Manner of Wire Wire Wire 12,000 Wire 33,600. Wire 56,200, Wire 162,000. Wire 5,500. 18,000. 17,200. 0 of cash grant (e) Amount (d) Purpose of and the Caribbean Humanitarian Aid rogram Support Program Support Program Support Program Support Program Support rogram Support Program Support grant and the Caribbean and the Caribbean ast Asia and the and the Caribbean Monthly Grant, frica - Angola, enin, Botswana, frica - Angola, enin, Botswana, Central America Central America Central America Central America urkina, Faso, (c) Region runei, Burma, urkina, Faso, os Brasiles Sub-Saharan Jub-Saharan Sub-Saharan ustralia, acific -Africa and EIN (if applicable) (b) IRS code section (a) Name of organization

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

Enter total number of other organizations or entities

Schedule F (Form 990) 2018

30

Page 2		(i) Method of valuation (book, FMV, appraisal, other)					
		(h) Description of non-cash assistance					
24507	90), Part II, line 1)	(g) Amount of non-cash assistance					
52-1224507	(Schedule F (Form 990), Part II, line 1)	(f) Manner of cash disbursement					
		(e) Amount of cash grant	9				
hildren	Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States.	(d) Purpose of grant					
Aid For Starving Children	Assistance to Organizati	(c) Region	Sub-Saharan Africa				
Aid F	Grants and Other	(b) IRS code section and EIN (if applicable)					
H -	Part II Continuation of	1 (a) Name of organization		(B)			

04-01-18

Page 3

Schedule F (Form 990) 2018 Aid For Starving Children

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.

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

1	Torcign Torris		
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	Yes	X No
	Corporation (see Instructions for Form 926)	Yes	A NO
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization		
	may be required to separately file Form 3520, Annual Return To Report Transactions With Foreign		
	Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign		
	Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; don't file with Form 990)	Yes	X No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes,"		
	the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect To		
	Certain Foreign Corporations (see Instructions for Form 5471)	X Yes	☐ Na
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	Value of the same	
	(see Instructions for Form 8621)	Yes Yes	X No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes,"		
	the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain		
	Foreign Partnerships (see Instructions for Form 8865)	Yes	X No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If		
	"Yes," the organization may be required to separately file Form 5713, International Boycott Report (see		
	Instructions for Form 5713; don't file with Form 990)	Yes Yes	X No
_	Sal	edule F (For	m 990) 2010

Part V | Supplemental Information

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

Part I, Line 2:

The Organization has reviewed and approved all foreign projects as being in furtherance of its own exempt purpose and it retains control and discretion as to the use of these contributions.

Part I, line 3:

Expenditures are valued at Fair Market Value.

Gifts-in-Kind are valued and recorded at their estimated fair value based upon the Organization's estimate of the wholesale value that would be received for selling the goods in its principal exit market considering the goods condition and utility for use at the time they are contributed by the donor using Level 3 inputs. The Organization does not sell donated Gifts-in-Kind and only distributes the goods for program use.

Part I, line 3, Column (e):

(a) Region:

Central America and the Caribbean - Antigua & Barbuda, Aruba, Bahamas,

(e) Specific Types of Services in Region: Emergency Relief, medicines,

education, feeding, sustainability projects, and improving nutritional
status and income

Region: East Asia and the Pacific - Australia, Brunei, Burma, Cambodia,

(e) Specific Types of Services in Region: Emergency Relief, medicines,

education, feeding, sustainability projects, and improving nutritional

status and income

SCHEDULE L

(Form 990 or 990-EZ)

Transactions With Interested Persons

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.

OMB No. 1545-0047

Department of the Treasury

Attach to Form 990 or Form 990-EZ.

Open To Public

Name of the organization	P 50 to		3,,,,,,	3 .01 11	istructions and the	TOTO I III DI III DI DI III	Em	nlove	ident	ificati	15-111	mbo		
	Aid For	Starving	Chi	ldr	en		52	-12	245		on nu	HDE		
					ion 501(c)(4), and 50									
Complete if the	The last of the second second second				art IV, line 25a or 25b	o, or Form 990-EZ, P	art V, I	ine 40	b.		-	77.0		
1 (a) Name of disqualified	d person (b)	(b) Relationship between disqualified person and organization			lified (c	(c) Description of transaction			saction			(d) Corrected		
TINATA STORM	1 300 MA				-					- Y	es	No		
			_	-						+	=			
											\neg			
	10.00	TAC WALL DOWN				in a market of the state	_	_				_		
2 Enter the amount of ta section 4958			70.0											
3 Enter the amount of ta	x if any on line 2	above reimbur	sed by	the or				P \$				_		
, Emorario ambant or ta	A, ii dily, dir iilid E	, above, remibuli	ocu by	the org	garnzation		*****							
Part II Loans to a	nd/or From In	terested Per	sons					-	_	_				
Complete if the	e organization ans	swered "Yes" on	Form :	990·EZ	Part V, line 38a or F	form 990, Part IV, lin	e 26; c	or if th	e orga	nizatio	n			
	nount on Form 99		7			The state of the s			lile) Ani	nroved				
(a) Name of interested person	(b) Relationship with organization		fro	oan to or m the	principal amount	(f) Balance due	(g) In default?		(h) Approved by board or committee? (i)		(i) W	Written eement?		
moradia paradi	With organizatio	dioi.		From					Yes		Yes			
			10	FIOIT			Yes	No	res	NO	Yes	140		
			-											
									-			_		
	_	-	-	-					_			_		
		+	1	-								-		
	4									-				
										-				
otal				-	▶\$			2000						
	ssistance Be													
	organization ans				rt IV, line 27. (c) Amount of	(d) Tuno	of		(-)	Dive		_		
(a) Name of interested person		(b) Relationship between interested person and the organization			assistance	(d) Type assistant) Purpose of assistance					
					and the state of the state of	and the second								
									_		_	_		
						_		+		_		-		
						+	-					_		
										_				
	1							- 1						

832131 10-25-18

SCHEDULE M (Form 990)

Noncash Contributions

OMB No. 1545-0047

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

2018

Department of the Treasury Internal Revenue Service Attach to Form 990.

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

Open to Public Inspection

Name of the organization Employer identification number Aid For Starving Children 52-1224507 Types of Property Part I (d) (a) (c) Number of Noncash contribution Check if Method of determining contributions or amounts reported on applicable noncash contribution amounts items contributed Form 990, Part VIII, line 1g 1 Art - Works of art Art - Historical treasures 2 Art - Fractional Interests 3 Books and publications 4 Clothing and household goods 5 Cars and other vehicles 6 Boats and planes 7 Intellectual property 8 Securities - Publicly traded _____ 9 Securities - Closely held stock 10 Securities - Partnership, LLC, or 11 trust interests Securities - Miscellaneous 12 Qualified conservation contribution -13 Historic structures Qualified conservation contribution - Other ... 14 Real estate - Residential 15 Real estate - Commercial 16 Real estate - Other 17 18 Collectibles Food inventory 19 6,137,128. Fair Market Value Drugs and medical supplies _____ 20 21 Taxidermy Historical artifacts 22 Scientific specimens 23 Archeological artifacts 24 25 Other > 26 Other > 27 Other > 28 Other > 29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement Yes No 30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period? X b If "Yes," describe the arrangement in Part II. X Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions? 31 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions? 32a b If "Yes," describe in Part II. If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, 33

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

Schedule M (Form 990) 2018

Schedule M (Form 990) 2018 Aid For Starving Children	52-1224507	Page 2
Part II Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and 33, a is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination part for any additional information.	and whether the organizat nation of both. Also comp	ion
Schedule M, Part I, Column (b):		
The actual number of contributions is listed.		
Schedule M, Line 32b:		
When the Organization receives a grant request for tangible	e property,	
it will contact other relief organizations to assist in loc	cating and	
obtaining the goods requested and will subsequently reimbur	se any	
organizations that were able to locate the requested goods	for their	
costs to administrate the transaction.		
	W Eu	

832142 10-18-18

Schedule M (Form 990) 2018

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.

OMB No. 1545-0047 Open to Public Inspection

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

Name of the organization

Employer identification number

Aid For Starving Children 52-1224507 Form 990, Part I, Line 1, Description of Organization Mission: water, immunization, clothing, education, and financial assistance around the world and also helps victims of disasters. Form 990, Part III, Line 1, Description of Organization Mission: disasters, and war. Form 990, Part III, Line 4a, Program Service Accomplishments: medications within hospitals and clinics, and that these medical donations go a long way in combating this need. Monetary assistance has also been provided in order to help save lives through feeding programs, clean water programs, health care and children's homes; and equips children and families for future success through education, training, and sustainable self-development through small business and agriculture projects. Form 990, Part VI, Section B, line 11b: The audit committee reviews the Form 990; it is then sent to all board members electronically for review and approval. Form 990, Part VI, Section B, Line 12c: Compliance is checked and discussed in board meetings, and if any conflict arises, the affected party will recuse themselves from voting on items

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

Schedule O (Form 990 or 990-EZ) (2018)

related to that issue.

Name of the organization Employer identification number Aid For Starving Children 52-1224507 Form 990, Part VI, Section B, Line 15a: The board reviewed and approved compensation for its Chairman based on tasks being performed and time spent on behalf of The Organization. The Chairman recused himself from these discussions. Form 990, Part VI, Line 17, List of States receiving copy of Form 990: CA, CT, FL, IL, MA, MI, NJ, NY, NC, OH, RI, WI, AK, TX, KS, MD, NH, OK, OR, PA, TN, AR, KY, MN, MS VA, WV, DC, ME, MO, NM, ND Form 990, Part VI, Section C, Line 18: The Organization makes its 1023 and 990 available to the public when a request has been made for the documents. Form 990, Part VI, Section C, Line 19: The Organization makes its governing documents, conflict of interest policy, and financial statements available to the public when a request has been made for the documents. Form 990, Part XI, line 9, Changes in Net Assets: Allowance for uncollectable pledges -14,737. Form 990, Part XII, Line 2C The Organization made no changes to its audit oversight or selection process during the fiscal year covered by the return.

SCHEDULE R (Form 990) Department of the Treasury Internal Revenue Service

Name of the organization

Part

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

▶ Attach to Form 990.

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

Open to Public Inspection 2018

OMB No. 1545-0047

Employer identification number 52-1224507

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

Aid For Starving Children

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

(g) Section 512(b)(13) controlled No entity? Yes M 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. African American Aid for Starving Direct controlling Children fka entity status (if section Public charity 501(c)(3)) Exempt Code section Legal domicile (state or foreign country) Germany Providing assistance to soor and needy people Primary activity ground the world Name, address, and EIN of related organization Gebende Hande (Giving Hands) GERMANY 53111 Adenauerallee 11 Bonn,

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

See Part VII for Continuations

832161 10-02-18 LHA

Schedule R (Form 990) 2018

52-1224507

Page 2

Schedule R (Form 990) 2018 Aid For Starving Children

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

(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? Yes No	Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	General or managing partner?	(i) (k) General or Percentage managing ownership
	1 1									
										Î

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. Part IV

(b) (c) (d) (e) (f) (g) (g) (g) (g) (himary activity Legal domicille (state or foreign foreign country) (C corp, S corp, income end-of-year or trust)					
(a) Name, address, and EIN of related organization					

832162 10-02-18

Schedule R (Form 990) 2018

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

During the tax year, old the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?	transactions with one or more r	elated organizations listed	in Parts II-W?	1
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	trolled entity			13
b Gift, grant, or capital contribution to related organization(s)	***************************************			4
c Giff, grant, or capital contribution from related organization(s)				×
d Loans or loan guarantees to or for related organization(s)				+
e Loans or loan guarantees by related organization(s)				- p
f Dividends from related arranization(a)				
	***************************************		***************************************	#
	***************************************	***************************************	***************************************	19
n Furchase of assets from related organization(s)				- t
i Exchange of assets with related organization(s)				7
 j Lease of facilities, equipment, or other assets to related organization(s) 				÷
k Lease of facilities, equipment, or other assets from related organization(s)	(S)			į
Performance of services or membership or fundralsing solicitations for related organization(s)	elated organization(s)	***************************************		¥ ;
m Performance of services or membership or fundraising solicitations by related organization(s)	lated organization(s)	***************************************	***************************************	= ;
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	l organization(s)			E ¢
 Sharing of paid employees with related organization(s) 		***************************************		
D. Reimbursement paid to related organization(s) for evoceses				0
a Reimbursement baid by related organization(s) for congress			***************************************	dt d
	***************************************	***************************************		10
r Other transfer of cash or property to related organization(s)s Other transfer of cash or property from related organization(s)				14
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 transmiss throughout	ation on who must complete the	nis line, including covered a	plationships and transaction througholds	1s
		as me, mending covered	elationships and transaction thresholds.	
(a) Name of related organization	(b) Transaction type (a:s)	(c) Amount involved	(d) Method of determining amount involved	pen
(1) Gebende Hande (Giving Hands)	υ	274,249.	274,249.Wire transfers	
(2)				
(3)				
(4)				
(5)				
(6)				
382363 10-02-18			Option Many College Co	

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

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

Name, address, and EIN of entity	Primary activity	Legal domicile (state or foreign country)	Predominant income patriers sec. (related, unrelated, 5010)3 (2010)3 excluded from tax under sections 512-514) Yes No	sec. Share of total toome	Share of end-of-year assets	Dispropor- tionale allocations?	Dispropor-	General or managing partner?	Percentage ownership
					26				
								_	

Schedule R (Form 990) 2018

Schedule R (Form 990) 2018 Aid For Starving Children	52-1224507 Page 5
Part VII Supplemental Information.	
Provide additional information for responses to questions on Schedule R. See instructions.	
Part II, Identification of Related Tax-Exempt Organizations	!:
Name of Related Organization:	
Gebende Hande (Giving Hands)	
Direct Controlling Entity: Aid for Starving Children fka Af	rican American
Self-Help Foundation	
beir neip roditateron	

Form 5471

(Rev. December 2018)

Department of the Treasury
Internal Revenue Service

Information Return of U.S. Persons With Respect to Certain Foreign Corporations

▶ Go to www.irs.gov/Form5471 for instructions and the latest information.
Information furnished for the foreign corporation's annual accounting period (tax year required by section 898) (see instructions) beginning MAY 1 , 2018, and ending APR 30, 2019

OMB No. 1545-0123

Attachment Sequence No. 121

Name of person filing this return	one) beginning		A Identifying nun		0, 202			
Aid For Starving Children			52-1224	507				
Number, street, and room or suite no. (or P.O. box number if mail is no	of delivered to street address	as)	B Category of file	r (See instruc	tions. Check	applicable l	box(es)):	
2360 Professional Drive, N	0. 105		P22.3626.2	1 2		4 X		
City or town, state, and ZIP code			C Enter the total j	A STATE OF THE PARTY OF THE PAR		and the same of the same of the		
Santa Rosa, CA 95403	0010		you owned at the			nting period	80	.00 %
Filer's tax year beginning MAY 1	,2018 , and end	ding AP	R 30	,20	19			
D Check box if this is a final Form 5471 for the foreign co E Check if any excepted specified foreign financial assets			arant on article section of	CONTRACTOR OF THE PARTY OF THE		***********	munios.	-
F Person(s) on whose behalf this information return is fill		ini (see ins	aructions)	CARLET AND DESCRIPTION OF THE PARTY OF THE P	*********	***********		-
	F-37 75	0007		HARATA PARA	- 100 Tel	(4) Chec	k applicabl	e box(es)
(1) Name	(2) Addi	ress		(3) Identifyi	ng number	Shareholder	Officer	Director
						1		
								L
Important: Fill in all applicable lines and schedul unless otherwise indicated.	es. All information f	must <i>be in</i>	English. All amou	unts must be	e stated in	U.S. dollar	S	
1a Name and address of foreign corporation Gebende Hande GmbH				b(1) Emp	oloyer identi	fication num	ber, if any	
Baumschulallee 3A Bonn 53115						mber (see i Hande		;)
Germany d Date of L a Principal place of business If Principal				1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	ntry under v	vhose laws	incorporate	d
d Date of e Principal place of business f Principal business activity			rincipal business a	ctivity	Imarry	h Function	al currency	
12/19/96Germany	813000	Cita	LICY WOLK		Europ	ean U	nion	Euro
2 Provide the following information for the foreign corpo		eriod stated	above.		par op	cuir o.		Hurt
a Name, address, and identifying number of branch office				b If a U.S.	income tax	return was t	filed, enter:	
An annual methods are an annual de desire de serviciones de la contraction de la con				(i) Taxable in		(ii) t	J.S. income (after all cr	e tax paid
Name and address of foreign corporation's statutory of in country of incorporation	r resident agent		Name and address person (or persons) with custody	of the boo	ks and recor	ds of the fe	oreign
			corporation, and th	e location of s	uch books	and records,	il differen	į.
Christine Schirrmacher								
Baumschulallee 3A								
Bonn 53115								
Germany	- Contract				_			
Schedule A Stock of the Foreign Cor	poration		-	[/6\ No.	mbar of aba	raa laawad a	ad sutstan	dina
Lat Danidation of the	to along of along					res issued a		
(a) Description of eac	IT Class of Stock			account	ing of annua ing period	a	ii) End of a ccounting p	period
Common				COO	2	00	- Control of	200
						41		
LUA For Panaguark Paduation Act Notice and instruction	ine					Form F	5471 /Da	(9100-01

Part 1 U.S. Shareholders of Foreign	(see instructions)	T WANTED AT		
(a) Name, address, and identifying number of shareholder	(b) Description of each class of stock held by shareholder. Note: This description should match the corresponding description entered in Schedule A, column (a).	(c) Number of shares held at beginning of annual accounting period	(d) Number of shares held at end of annual accounting period	(e) Pro rata share of Subpart F income (enter as a percentage)
Aid For Starving Childre 2360 Professional Dr 105 Santa Rosa CA 95403 52-1224507	Common	160	160	
(a) Name, address, and identifying number of shareholder. Also include country of incorporation or formation, if applicable.	ign Corporation (see instructions) (b) Description of each class of stock held Note: This description should match the description entered in Schedule A, c	corresponding	(c) Number of shares held at beginning of annual accounting period	(d) Number of shares held at end of annual accounting period
				4

Form 5471 (Rev. 12-2018)

Page 3

Schedule C Income Statement

Important: Report all information in functional currency in accordance with U.S. GAAP. Also, report each amount in U.S. dollars translated from functional currency (using GAAP translation rules). However, if the functional currency is the U.S. dollar, complete only the U.S. Dollars column. See instructions for special rules for DASTM corporations.

	177 America (1886)	7.	Functional Currency	U.S. Dollars
	1a Gross receipts or sales	1a	17,495,763.	20,270,679
	b Returns and allowances	1b		
	c Subtract line 1b from line 1a	1c	17,495,763.	20,270,679
	2 Cost of goods sold	2	E CONTRACTOR OF THE PARTY OF TH	
	3 Gross profit (subtract line 2 from line 1c)	3	17,495,763.	20,270,679
e e	4 Dividends	4		
псоте	5 Interest	5		
Ē	6a Gross rents	6a		
	b Gross royalties and license fees			
	7 Net gain or (loss) on sale of capital assets	7		
	8a Foreign currency transaction gain or loss - unrealized			
	b Foreign currency transaction gain or loss - realized	8b		
	9 Other income (attach statement) See Statement 1	9	3,235.	-37,283.
	10 Total income (add lines 3 through 9)	10	17,498,998.	
	11 Compensation not deducted elsewhere	-11	550,088.	632,352
	12a Rents	12a	30,393.	34,938
	b Royalties and license fees	12b		02/300
S	13 Interest	13		
Deductions	14 Depreciation not deducted elsewhere	14	2,428.	2,791,
duc	15 Depletion	15		
De	16 Taxes (exclude income tax expense (benefit))	16	14,614,610.	19,553,206.
	17 Other deductions (attach statement - exclude income tax expense	10		25,000,200
	(benefit)) See Statement 2	17	16.836.229.	19,512,204.
	18 Total deductions (add lines 11 through 17)	18	32,033,748.	39,735,491.
	19 Net income or (loss) before unusual or infrequently occurring items, and	1 10	02/000//201	05/100/1021
ō	income tax expense (benefit) (subtract line 18 from line 10)	19	-14,534,750.	-19 502 095
Net Income	20 Unusual or infrequently occurring items	20		25/502/055.
č	21a Income lax expense (benefit) - current	21a		
Net	b Income tax expense (benefit) - deferred	21b		
	22 Current year net income or (loss) per books (combine lines 19 through 21b)	22	-14,534,750.	-19 502 095
	23a Foreign currency translation adjustments	23a	22/002//001	13,302,033.
alve	b Other	23b		
prehen	c Income tax expense (benefit) related to other comprehensive income	230		
Comprehensive	24 Other comprehensive income (loss), net of tax (line 23a plus line 23b less	Ti		
_	(ine 23c)	24		

Form 5471 (Rev. 12-2018)

fore	portant: Report all amounts in U.S. dollars prepared and translated in accordance with n exception for DASTM corporations.	U.S. C	IAAP. See Instruction	ons		
ior a	Assets		(a) Beginning of an accounting per	nual iod	(b) End of a accountin	annual
1	Cash	1	610,	490.	77	9,911.
2a	Trade notes and accounts receivable	2a		0.	1	8,403.
b	Less allowance for bad debts	2b	() ((
3	Derivatives	3				-100-0
4	Inventories	4	- 1	001		7 107
5	Other current assets (attach statement) See Statement 3	5	1,	901.		7,107.
7	Loans to shareholders and other related persons	7				
8	Investment in subsidiaries (attach statement) Other investments (attach statement) See Statement 4	8	170,	137	15	7,334.
9a	Buildings and other depreciable assets	9a	18.	870.	1	8,271.
b	Less accumulated depreciation	9b		359.)	1	2,325.
10a	Depletable assets	10a	1			
b	Less accumulated depletion	10b	() (
11	Land (net of any amortization)	11				
12	Intangible assets:	E LO				
a	Goodwill	12a				
b	Organization costs	12b				
C	Patents, trademarks, and other intangible assets	12c				
d	Less accumulated amortization for lines 12a, 12b, and 12c	12d	1) (7 - 11
13	Other assets (attach statement) See Statement 5	13		530.		3,365.
14	Liabilities and Shareholders' Equity	14	794,	669.	97	2,066.
15		15	207,	210	11	0,032.
16	Accounts payable Other current liabilities (attach statement) See Statement 6	15		569.		6,801.
17	Derivatives	17	13,	303.	- 4	0,001.
18	Loans from shareholders and other related persons	18				
19	Other liabilities (attach statement)	19				
20	Capital stock:	1000				
a	Preferred stock	20a				
b	Common stock	20b				
21	Paid-in or capital surplus (attach reconcillation)	21				
22	Retained earnings	22	567,8	381.	50.	5,233.
23	Less cost of treasury stock	23	()()
24	Total liabilities and shareholders equity	24	794,6	69.	97:	2,066.
SCI	nedule G Other Information	_			_	· · · · ·
1	During the tax year, did the foreign corporation own at least a 10% interest, directly or indirectly, in	any fo	rainn			Yes No
1						
	partnership? If "Yes," see the instructions for required statement.	411247724		amminus):		
2	During the tax year, did the foreign corporation own an interest in any trust?					\square
3	During the tax year, did the foreign corporation own any foreign entities that were disregarded as s	eparate	from its		eresensem in	
	owner under Regulations sections 301.7701-2 and 301.7701-3 or did the foreign corporation own	any for	eign			
	branch (see instructions)?	*******			oimeimhia.	
	If "Yes," you are generally required to attach Form 8858 for each entity or branch (see instructions)					
4a	During the tax year, did the filer pay or accrue any base erosion payment under section 59A(d) to the corporation or did the filer have a base erosion tax benefit under section 59A(c)(2) with respect to		4.			
	payment made or accrued to the foreign corporation (see instructions)? If "Yes," complete lines 4b and 4c.		ganamanoonus.	enemmen.	BILLIAN BRIGHT	ىما ب
b					•	
				that a second	\$	
	The state of the s				Φ	
52	During the tax year, did the foreign corporation pay or accrue any interest or royally for which the	16/10/16/16				
5a	During the tax year, did the foreign corporation pay or accrue any interest or royally for which the callowed under section 267A?					
5a	During the tax year, did the foreign corporation pay or accrue any interest or royalty for which the callowed under section 267A? If "Yes," complete line 5b.					X 🗆

Sch	nedule G Other Information (continued)		age 5
6a	Is the filer of this Form 5471 claiming a foreign-derived intangible income deduction (under section 250) with respect	Yes	No
	to any amounts listed on Schedule M?		X
b	Enter the amount of gross income derived from sales, leases, exchanges, or other dispositions (but not licenses) from transactions with the foreign corporation that the filer included in its computation of foreign-derived deduction eligible income (FDDEI) (see instructions) \$		
C	Enter the amount of gross income derived from a license of property to the foreign corporation that the filer included		
d	in its computation of FDDEI (see Instructions) Enter the amount of gross income derived from services provided to the foreign corporation that the filer included in its computation of FDDEI (see Instructions) \$		
7	During the tax year, was the foreign corporation a participant in any cost sharing arrangement?	X	
8	During the course of the tax year, did the foreign corporation become a participant in any cost sharing arrangement?	X	
	If the answer to question 7 is "Yes," was the foreign corporation a participant in a cost sharing arrangement that was in effect before January 5, 2009?		X
10	If the answer to question 7 is "Yes," did a U.S. taxpayer make any platform contributions as defined under		41
20	Regulations section 1.482-7(c) to that cost sharing arrangement during the taxable year?		X
11	If the answer to question 10 is "Yes," enter the present value of the platform contributions in U.S. dollars S		
	determine the price of the platform contribution transaction(s): Comparable uncontrolled transaction method Income method Acquisition price method Market capitalization method Residual profit split method Unspecified methods From April 25, 2014, to December 31, 2017, did the foreign corporation purchase stock or securities of a		
	shareholder of the foreign corporation for use in a triangular reorganization (within the meaning of Regulations section 1.358-6(b)(2))?		X
14a I	Did the foreign corporation receive any intangible property in a prior year or the current tax year for which the U.S.		1
	transferor is required to report a section 367(d) annual income inclusion for the taxable year? If "Yes," go to line 14b.		X
	Enter the amount of the earnings and profits reduction pursuant to section 367(d)(2)(B) for the taxable year		
	During the tax year, was the foreign corporation an expatriated foreign subsidiary under Regulations section		
	1.7874-12(a)(9)?		X
1	If "Yes," see instructions and attach statement.	_	-
16 I	During the tax year, did the foreign corporation participate in any reportable transaction as defined in Regulations section 1.6011-4?		X
- 6	f "Yes," attach Form(s) 8886 if required by Regulations section 1.6011-4(c)(3)(i)(G).		
17 E	During the tax year, did the foreign corporation pay or accrue any foreign tax that was disqualified for credit under		X
18 D	section 901(m)? During the tax year, did the foreign corporation pay or accrue foreign taxes to which section 909 applies, or treat		22
	oreign taxes that were previously suspended under section 909 as no longer suspended?		X
19 D	Did you answer "Yes" to any of the questions in the instructions for line 19?	H	X
	f "Yes," enter the corresponding code(s) from the instructions and atlach statement (see instructions)		441
	Form 5471 (R	ev 12-	2018)

Form 5471 (Rev. 12-2018) Page 6 Schedule I Summary of Shareholder's Income From Foreign Corporation If item F on page 1 is completed, a separate Schedule I must be filed for each Category 4 or 5 filer for whom reporting is furnished on this Form 5471. This Schedule I is being completed for: Name of U.S. shareholder ▶ Identifying number Section 964(e)(4) Subpart F dividend income from the sale of stock of a lower-tier foreign corporation (see instructions) 1a Section 245A(e)(2) Subpart F Income from hybrid dividends of tiered corporations (see instructions) 16 Other Subpart F income (enter the result from Worksheet A in the instructions) 10 Earnings invested in U.S. properly (enter the result from Worksheet B in the instructions) 2 2 Previously excluded export trade income withdrawn from investment in export trade assets (enter the result from Worksheet C in the instructions) Factoring Income 4 See instructions for reporting amounts on lines 1 through 4 on your income tax return. Dividends received (translated at spot rate on payment date under section 989(b)(1)) 5 Exchange gain or (loss) on a distribution of previously taxed income 6 Yes No • Was any income of the foreign corporation blocked? 1000 No. 200 N

Form 5471	Other	r Income		Statement 1
Description		Functional Currency	Exchange Rate	U.S. Dollar
Unrealized gain Miscellaneous income Gain on currency exchange		-741. 3,976.		-852. 4,571. -41,002.
Total to 5471, Schedule C, lin	ne 9	3,235.		-37,283.
Form 5471	Other I	Deductions		Statement 2
Description		Functional Currency	Exchange Rate	U.S. Dollar
Contribution - Non-monetary Contributions - Monetary Advertising Procurement fees Printing Travel Postage Utilities Repairs and maintenance Telephone Office expenses Temporary labor Accounting Professional fees Freight & shipping Insurance		8,372,106. 2,972,638. 312,342. 183,688. 2,627,925. 61,772. 59,271. 3,057. 1,060. 1,542. 1,778,529. 8,208. 49,674. 162,342. 241,276. 799.		9,782,296. 3,417,187. 359,052. 211,158. 3,020,923. 71,010. 68,135. 3,515. 1,219. 1,773. 2,044,501. 9,436. 57,103. 186,620. 277,358. 918.
Total to 5471, Schedule C, lin	ne 17	16,836,229.		19,512,204.

Form 5471 Other Current Ass	sets	Statement 3
Description	Beg. of Annual Accounting Period	End of Annual Accounting Period
Prepaid expenses	1,901.	7,107.
Total to 5471, Page 4, Schedule F, line 5	1,901.	7,107.

Form 5471	Other Investments		Statement 4
Description		Beg. of Annual Accounting Period	End of Annual Accounting Period
Long-term investments		170,137.	157,334.
Total to 5471, Page 4,	Schedule F, line 8	170,137.	157,334.
Form 5471	Other Assets		Statement 5
Description		Beg. of Annual Accounting Period	End of Annual Accounting Period
Deposits		3,630.	3,365.
Total to 5471, Page 4,	Schedule F, line 13	3,630.	3,365.
Form 5471	Other Current Liabilit	ies	Statement 6
Description		Beg. of Annual Accounting Period	End of Annual Accounting Period
Payroll liabilities Other obligations		11,078. 8,491.	13,617. 13,184.
Total to 5471, Page 4,	Schedule F, line 16	19,569.	26,801.

Form 5471	Explanation of Blocked or Unblocked	Statement 7
	Income of Foreign Corporation	

The shareholder's portion of ${\tt E\&P}$ is blocked, however, the shareholder does receive grants during the year.

SCHEDULE H (Form 5471)

(December 2018) Department of the Treasury Internal Revenue Service

Current Earnings and Profits

Attach to Form 5471.

➤ Go to www.irs.gov/Form5471 for instructions and the latest information.

OMB No. 1545-0123

	of person filing Form 5471 For Starving Children				Identifyi		mber 1224507
	of foreign corporation ende Hande GmbH	EIN	(if any)			ce ID	number (see instr.) HandeGmb
b	Separate Category (Enter code-see instructions.)	e sanction	ned country (see inst	tructions)		A A	
IMPO	DRTANT: Enter the amounts on lines 1 through 5c in functions	al currenc	у.				
1	Current year net income or (loss) per foreign books of account	manag		.,	almana.	1	-14534750.
2	Net adjustments made to line 1 to determine current earnings and profits according to U.S. financial and tax accounting standards (see instructions):		Net Additions	Net Subtra	actions		
a	Capital gains or losses	2a	7.71				
b	Depreciation and amortization	2b					
C	Depletion						
d	Investment or incentive allowance	100 Sept 1400					
e	Charges to statutory reserves	2e					
f	Inventory adjustments	2f					
g	Income taxes (see Schedule E, Part I, line 9, column (j))	. 2g					
h	Foreign currency gains or losses						
i	Other (attach statement)						
3	Total net additions						
4	Total net subtractions						
5 a		-		dan address in	TAN-LOS	5a	-14534750.
b	DASTM gain or (loss) for foreign corporations that use DASTM					5b	
C	Combine lines 5a and 5b					5c	-14534750.
d	Current earnings and profits in U.S. dollars (line 5c translated a	t the aver	age exchange rate.	as			
	defined in section 989(b)(3) and the related regulations (see inst	tructions))	E-1 - ALL - ALL - EVEL - 1972 - ALL -		8000	5d	-17140035.

LHA For Paperwork Reduction Act Notice, see instructions.

Schedule H (Form 5471) (12-2018)

SCHEDULE J (Form 5471) (Rev. December 2018)
Department of the Treasury
Internal Revenue Service
Name of person filing Form 5471

Accumulated Earnings & Profits (E&P) of Controlled Foreign Corporation

Go to www.irs.gov/Form5471 for instructions and the latest information. ▶ Attach to Form 5471.

OMB No. 1545-0123

Identifying numbe

52-1224507

EIN (if any)

GebendeHandeGmbH Reference ID number

GEN

If code 901 is entered on line a, enter the country code for the sanctioned country (see instructions) Part I | Accumulated E&P of Controlled Foreign Corporation

a Separate Category (Enter code - see instructions.)

Gebende Hande GmbH

Name of foreign corporation

Aid For Starving Children

Check the box if person filing return does not have all U.S. Shareholders' information to complete amount for columns (elfin-felfin) and felfuin feed inch

0.000 1000 1000 1000 1000 1000 1000 100	macroscio miormanon to complete amount for columns (e)(iii) (e)(iii) (e)(vii)-(ix) (see illstructions)	to complete amount to	COIDINIS (e)(II)-(e)(IV) a	nia (e)(vii)-(ix) (see iiisa	uctions).	
portant: Enter amounts in functional currency.	(a)	(b)	(0)	(d)	(e) Previously Taxed E&P (see instruction	2&P (see instruction
	Post-2017 E&P Not	DST-1986	Pre-1987 E&P Not	Hovering Deficit	Hovering Deficit In Faminas Invested (ii) Section 065	(ii) Section 065
	Previously Taxed	Previously Taxed Unideat 1086 and Previously Taxed	Previously Taxed	and Deduction	in II o Denoctiv	(ii) dection and

Impo	Important: Enter amounts in functional currency.	(a)	(b)	(0)	(p)	(e) Previously Taxed E	(e) Previously Taxed E&P (see instructions)
		Post-2017 E&P Not Previously Taxed (post-2017 section 959(c)(3) balance)	Undistributed Earnings (post-1986 and pre-2018 section 959(c)(3) balance)	Pre-1987 E&P Not Previously Taxed (pre-1987 section 959(c)(3) balance)	Hovering Deficit and Deduction for Suspended Taxes	(i) Earnings Invested in U.S. Property (section 959(c)(1)(A))	(ii) Section 965(a) Inclusion (section 959(c)(1)(A))
4	Balance at beginning of year (as reported on prior						
	year Schedule J)		476,480.				
4							
9	Adjusted beginning balance (combine lines 1a and 1b)		476,480.				
23	2a Reduction for taxes unsuspended under anti-splitter rules						
2p	Disallowed deduction for taxes suspended under					W	
	anti-splitter rules						
8	Current year E&P (or deficit in E&P)						
4	E&P attributable to distributions of previously taxed						
	E&P from lower-tier foreign corporation						
5a	_						
20							
	nonrecognition transaction						
ď	Othor soli interests (attach statement)						

E&P from lower-tier foreign corporation	
E&P carried over in nonrecognition transaction	
Reclassify deficit in E&P as hovering deficit after	
nonrecognition transaction	
Other adjustments (attach statement)	

	Other adjustments (attach statement)	
	Total current and accumulated E&P (combine lines	
- 1	1c through 6)	
	Amounts reclassified to section 959(c)(2) E&P from	
	cartion 050/A/21 E2D	

476,480.

	1c through 6)
œ	Amounts reclassified to section 959(c)(2) E&P from
	section 959(c)(3) E&P
6	Actual distributions
19	10 Amounts reclassified to section 959(c)(1) E&P

Ī					İ
	Amounts reclassified to section 959(c)(1) E&P	from section 959(c)(2) E&P	Amounts included as earnings invested in U.S. property	and reclassified to section 959(c)(1) E&P (see instructions)	
1		- 1		- 1	

7

	and reclassified to section 959(c)(1) E&P (see instructions)	
12	2 Other adjustments (attach statement)	
5	Hovering deficit offset of undistributed	
	posttransaction E&P (see instructions)	
4	14 Balance at beginning of next year (combine lines 7	
	through 13)	

812421 12-05-18 LHA For Paperwork Reduction Act Notice, see the Instructions for Form 5471.

Schedule J (Form 5471) (Rev. 12-2018)

476,480.

Schedule J (Form 5471) (Rev. 12-2018)

Part I Accumulated E&P of Controlled Foreign Corporation (co.

(iii) Section 965(b)(4)(A) (iv) Section 959(c)(1)(B) (vi) Subpart F Income (vii) Section 965(a) (section 959(c)(1)(A) (section 959(c)(1)(B)) (section 959(c)(2))		(A)
13 1b 1c 2a 2b 4 5a 5a 5a 5b 6 7 8 9 10 11 12	Section 955(b)(4)(A) (ix) Section 951A (ix) Section 951A (ix) Section 959(c)(2)) (section 959(c)(2))	951A Total Section 964(a) E&P (combine columns (a), (b), (c), and (e)(i) through (e)(ix))
1b 1c 2a 2b 4 5a 5a 6 6 7 8 9 10 11 12		476 480
1c 1c<		.00#/0/#
2a 2b 4 5a 5b 6 7 8 9 10 11 12		476 480
2b 4 5 6 6 7 7 10 11 12		***************************************
3 4 4 5 6 6 6 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7		
5a 5b 6 7 8 9 10 11 12		
5a 6 6 6 7 8 9 6 10 6 11 11 12 12		
5b 6 8 8 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9		
6 8 8 9 9 11 1 12 12 1 1 1 1 1 1 1 1 1 1 1 1		
8 8 9 10 11 12 13	0	
9 10 11 12 13		
9 10 11 12 13		
10 11 12 13		
11 12 13		
12 13		
13		
14		476.480.

Enter amounts in functional currency.

Balance at beginning of year
 Additions (amounts subject to future recapture)

Subtractions (amounts recaptured in current year)

4 Balance at end of year (combine lines 1 through 3)

Schedule J (Form 5471) (Rev. 12-2018)

SCHEDULE M (Form 5471)

(Rev. December 2018)
Department of the Treasury
Internal Revenue Service

Transactions Between Controlled Foreign Corporation and Shareholders or Other Related Persons

Attach to Form 5471.

▶ Go to www.irs.gov/Form5471 for instructions and the latest information.

OMB No. 1545-0123

Name of person filing Form 5471		Identifying number
Aid For Starving Children		52-1224507
Name of foreign corporation	EIN (if any)	Reference ID number
Gebende Hande GmbH		GebendeHandeGmbH

the annual accounting period between the foreign corporation and the persons listed in columns (b) through (f). All amounts must be stated in U.S. dollars translated from functional currency at the average exchange rate for the foreign corporation's tax year. See instructions.

(a) Transactions of foreign corporation	(b) U.S. person filing this return	(C) Any domestic corporation or partnership controlled by U.S. person filing this return	(d) Any other foreign corporation or partnership controlled by U.S. person filing this return	(e) 10% or more U.S., shareholder of controlled foreign corporation (other than the U.S., person filling this return)	(1) 10% or more U.S. shareholder of any corporation controlling the foreign corporation
1 Sales of stock in trade (inventory)			H CELEBRATE		
2 Sales of tangible property other than					
stock in trade					
3 Sales of property rights (patents,					
trademarks, etc.) 4 Platform contribution transaction payments received					
5 Cost sharing transaction payments received					
6 Compensation received for technical,					
managerial, engineering, construction,					
or like services					
7 Commissions received					
8 Rents, royalties, and license fees received					
9 Hybrid dividends received (see instr.)					
10 Dividends received (exclude hybrid dividends, deemed distributions under subpart F, and distributions of					
previously taxed income)					
1 Interest received					
2 Premiums received for insurance or reinsurance					
3 Add lines 1 through 12					
4 Purchases of stock in trade (inventory)					
5 Purchases of tangible property other than stock in trade					11
6 Purchases of property rights (patents, trademarks, etc.)					
7 Platform contribution transaction payments paid					
8 Cost sharing transaction payments paid	745,827.				
9 Compensation paid for technical, managerial, engineering, construction, or like services	- 10 - 27 9 10				
0 Commissions paid					
1 Rents, royalties, and license fees paid					
2 Hybrid dividends paid (see instructions) 3 Dividends paid (exclude hybrid dividends					
4 Interest paid					
5 Premiums paid for insurance or reinsurance					
6 Add lines 14 through 25	745,827.				
7 Accounts Payable	123/02/				
Amounts borrowed (enter the maximum					-
loan balance during the year) - see instr.					
Accounts Receivable					
O Amounts loaned (enter the maximum loan balance during the year) - see instr.				77010	

812371 12-12-18 LHA For Paperwork Reduction Act Notice, see the Instructions for Form 5471.

Schedule M (Form 5471) (Rev. 12-2018)