Form 990-PF Department of the Treasury

Extended to May 15, 2018 Return of Private Foundation

or Section 4947(a)(1) Trust Treated as Private Foundation

Do not enter social security numbers on this form as it may be made public. ▶ Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf. OMB No. 1545-0052

JUN 30, 2017 JUL 1, 2016 , and ending For calendar year 2016 or tax year beginning A Employer identification number Name of foundation 81-0629010 International Lifeline Fund Room/suite B Telephone number Number and street (or P.O. box number if mail is not delivered to street address) 430 (202)986-47191616 P Street, NW C If exemption application is pending, check here City or town, state or province, country, and ZIP or foreign postal code Washington, DC 20036 D 1. Foreign organizations, check here Initial return of a former public charity Initial return G Check all that apply: Final return Amended return 2. Foreign organizations meeting the 85% test, check here and attach computation Name change Address change X Section 501(c)(3) exempt private foundation H Check type of organization: E If private foundation status was terminated Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation under section 507(b)(1)(A), check here ... I Fair market value of all assets at end of year | J | Accounting method: Cash X Accrual F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here Other (specify) (from Part II, col. (c), line 16) 682,563. (Part I, column (d) must be on cash basis.) >\$ Part I Analysis of Revenue and Expenses (d) Disbursements (b) Net investment (c) Adjusted net (a) Revenue and (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a).) for charitable purposes (cash basis only) income expenses per books income 1,120,364. 1 Contributions, gifts, grants, etc., received 2 Check if the foundation is not required to attach Sch. B Interest on savings and temporary cash investments 133. 133. Statement 133. 4 Dividends and interest from securities 5a Gross rents b Net rental income or (loss) 6a Net gain or (loss) from sale of assets not on line 10 Revenue **b** Gross sales price for all assets on line 6a 0. 7 Capital gain net income (from Part IV, line 2) 0 8 Net short-term capital gain Income modifications ... 10a Gross sales less returns and allowances Statement 159,269 Statement 98,707. b Less: Cost of goods sold ... 60,562. 60,562. c Gross profit or (loss) 18,736.Statement 11 Other income 18,736. 0. 133. 199,795. 79,431. Total. Add lines 1 through 11 247,103. 247,103. 0. 0. Compensation of officers, directors, trustees, etc. 231,525. 0. 0. 193,539. Other employee salaries and wages 89,755. 15 Pension plans, employee benefits 0. 0 83,011. Expenses 171 0. 0. 171. 16a Legal fees Stmt 5 23,117. b Accounting fees Stmt 6 23,117. 0. 0. c Other professional fees Stmt 7 424,823. 0. 0. 442,340. 0. 0. 23. Administrative 23. 17 Interest 24,940. 24,940. 18 Taxes Stmt 8 0. 0. 82,159. 0. 0. Depreciation and depletion 19 51,361. 20 Occupancy 51,361. 0. 0. 21 72,042. 0. 0. 75,122. Travel, conferences, and meetings Printing and publications 13,035. 0. 0. 13,036. 6,058. 329,186. 338,096. 0. 23 Other expenses Stmt 9 Operating 24 Total operating and administrative 6,058. 1,598,150. 0. 1,482,949. expenses. Add lines 13 through 23 0. 0. 25 Contributions, gifts, grants paid 26 Total expenses and disbursements. 6,058. 1,482,949. Add lines 24 and 25 1,598,150. 0. 27 Subtract line 26 from line 12: <398,355.> a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) 79,431 c Adjusted net income (if negative, enter -0-)...

623501 11-23-16 LHA For Paperwork Reduction Act Notice, see instructions.

Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30

	Losses for Tax on Inve				01-0	1029010 Fage 3
	the kind(s) of property sold (e.g., rouse; or common stock, 200 shs. N			(b) How acquired P - Purchase D - Donation	(c) Date acquir (mo., day, yr.	(d) Date sold (mo., day, yr.)
1a				D DOMAITON		
b NONE						
С						
d						
е						
(e) Gross sales price	(f) Depreciation allowed (or allowable)		or other basis pense of sale		(h) Gain or (e) plus (f) m	
a						
b						
C						
d						
Complete only for assets showing ga	in in column (h) and owned by the	foundation	on 12/31/69	1	I) Gains (Col. (h)	ngin minus
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Exc	cess of col. (i)	co	l. (k), but not les Losses (from	ss than -0-) or
a			-			
b						
C						
d						
е						
Capital gain net income or (net capital	loss) { If gain, also enter in If (loss), enter -0- in	Part I, line 7	7	} 2		
3 Net short-term capital gain or (loss) a If gain, also enter in Part I, line 8, colu If (loss), enter -0- in Part I, line 8	s defined in sections 1222(5) and (}		
Part V Qualification Und	er Section 4940(e) for R	Reduced	Tax on Net	Investment Inc	come	
(For optional use by domestic private fou						
		ιο(α) ταλ οπ	not invostment ii	1001110.)		
If section 4940(d)(2) applies, leave this p	art blank.					
Was the foundation liable for the section	4942 tax on the distributable amou	int of any yea	ar in the base pe	riod?		Yes X No
If "Yes," the foundation does not qualify u						
1 Enter the appropriate amount in each	column for each year; see the inst	ructions befo	ore making any e	entries.		
(a) Base period years	(b)		Naturaliza of an	(c)		(d) Distribution ratio
Calendar year (or tax year beginning in			Net value of no	oncharitable-use assets	(001. ((b) divided by col. (c))
2015	1,624			135,453		11.992049
2014	1,649 1,680			170,801		9.654943
2013 2012	1,846			231,045 377,494		7.275098 4.892353
2011	1,453			384,27		3.782666
2011	1,433	, 505.		304,27.	•	3.702000
2 Total of line 1, column (d)					2	37.597109
3 Average distribution ratio for the 5-ye	ar base period - divide the total on	line 2 by 5, 0	or by the number	of years		37.337103
the foundation has been in existence		, ,			3	7.519422
4 Enter the net value of noncharitable-u	se assets for 2016 from Part X, line	e 5			4	140,827
5 Multiply line 4 by line 3					5	1,058,938
6 Enter 1% of net investment income (1	1% of Part I, line 27b)				6	0 .
7 Add lines 5 and 6					7	1,058,938
8 Enter qualifying distributions from Pa	rt XII, line 4				8	1,482,949
If line 8 is equal to or greater than line See the Part VI instructions.						

	990-PF (2016) International Lifeline Fund t VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4		06290 - see in			Page 4
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1.					
	Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)					
	Domestic foundations that meet the section 4940(e) requirements in Part V, check here X and enter 1%	1				0.
	of Part I, line 27b					
C	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).					
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2				0.
3	Add lines 1 and 2	3				0.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4				0.
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5				0.
6	Credits/Payments:					
a	2016 estimated tax payments and 2015 overpayment credited to 2016					
b	Exempt foreign organizations - tax withheld at source 6b					
C	Tax paid with application for extension of time to file (Form 8868) 6c					
	Backup withholding erroneously withheld 6d					
7	Total credits and payments. Add lines 6a through 6d	7				0.
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	8				
	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9				0.
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10				
11	Enter the amount of line 10 to be: Credited to 2017 estimated tax	11				
Pai	t VII-A Statements Regarding Activities					
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene	in			Yes	No
	any political campaign?			1a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition	?		1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials publish	ed or				
	distributed by the foundation in connection with the activities.					
C	Did the foundation file Form 1120-POL for this year?			1c		X
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:					
	(1) On the foundation. ► \$ 0 . (2) On foundation managers. ► \$					
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation					
	managers. ► \$0.					
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?			2		X
	If "Yes," attach a detailed description of the activities.					
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or	r				
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes			3		X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?			4a		X
	If "Yes," has it filed a tax return on Form 990-T for this year?			4b		
	Was there a liquidation, termination, dissolution, or substantial contraction during the year?			5		X
	If "Yes," attach the statement required by General Instruction T.					
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:					
	By language in the governing instrument, or					
	 By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state 	law				
	remain in the governing instrument?			6	X	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV			7	X	
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)					
	DE					
	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)					
	of each state as required by General Instruction G? If "No," attach explanation			8b	X	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for cale	ndar				
	year 2016 or the taxable year beginning in 2016 (see instructions for Part XIV)? If "Yes," complete Part XIV			9	X	
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses			10		X
			Forr	990	PF	(2016)

Pa	Int VII-A Statements Regarding Activities (continued)			
			Yes	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of			
	section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?			
	If "Yes," attach statement (see instructions)	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	
	Website address ► www.Lifelinefund.org	0 0	100	
14	The books are in care of ► The Organization Telephone no. ► 301-31	8-8	188	
4.	Located at ► 1616 P Street, NW Suite 430, Washington, DC ZIP+4 ►20			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here			
10	and enter the amount of tax-exempt interest received or accrued during the year 15		I/A	NI-
16	At any time during calendar year 2016, did the foundation have an interest in or a signature or other authority over a bank,	10	Yes	No
	securities, or other financial account in a foreign country? See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the	16	X	
	foreign country See Statement 13			
Pa	art VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a	During the year did the foundation (either directly or indirectly):		100	140
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?			
	(5) Transfer any income or assets to a disqualified person (or make any of either available			
	for the benefit or use of a disqualified person)?			
	(6) Agree to pay money or property to a government official? (Exception. Check "No"			
	if the foundation agreed to make a grant to or to employ the official for a period after			
	termination of government service, if terminating within 90 days.)			
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations			
	section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1b		
	Organizations relying on a current notice regarding disaster assistance check here			
C	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected			
	before the first day of the tax year beginning in 2016?	1c		X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation			
	defined in section 4942(j)(3) or 4942(j)(5)):			
а	At the end of tax year 2016, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning			
	before 2016? Yes X No			
	If "Yes," list the years , , , , , , , , , , , , , , , , , , ,			
	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect			
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach			
	statement - see instructions.) N/A If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.	2b		
32	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			
00	during the year?			
h	If "Yes," did it have excess business holdings in 2016 as a result of (1) any purchase by the foundation or disqualified persons after			
	May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose			
	of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C,			
	Form 4720, to determine if the foundation had excess business holdings in 2016.) N/A	3b		
48	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that	74		41
	had not been removed from jeopardy before the first day of the tax year beginning in 2016?	4b		х

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Part VII-B Statements Regarding Activities for Which F	orm 4720 May Be R	equirea (continu	iea)		
5a During the year did the foundation pay or incur any amount to:	4045(=)\0		. 7		
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	4945(e))?	Ye	s 🔼 No		
(2) Influence the outcome of any specific public election (see section 4955); or			. V		
any voter registration drive?		Ye	S A NO		
(3) Provide a grant to an individual for travel, study, or other similar purposes?		Ye	s 👗 No		
(4) Provide a grant to an organization other than a charitable, etc., organization			77		
4945(d)(4)(A)? (see instructions)		Ye	s LX No		
(5) Provide for any purpose other than religious, charitable, scientific, literary,			[]		
the prevention of cruelty to children or animals?		Ye	s 🔼 No		
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und			/-	_	
section 53.4945 or in a current notice regarding disaster assistance (see instruc-	ctions)?		N/A	5b	-
Organizations relying on a current notice regarding disaster assistance check he	ere				
${f c}$ If the answer is "Yes" to question 5a(4), does the foundation claim exemption fr					
expenditure responsibility for the grant?		/ A Ye	s L No		
If "Yes," attach the statement required by Regulations section 53.4945					
6a Did the foundation, during the year, receive any funds, directly or indirectly, to p			[]		
a personal benefit contract?		Ye	s 💹 No	_	
b Did the foundation, during the year, pay premiums, directly or indirectly, on a positive state of the sta	ersonal benefit contract?			6b X	
If "Yes" to 6b, file Form 8870.			[]		
7a At any time during the tax year, was the foundation a party to a prohibited tax s				_	
b If "Yes," did the foundation receive any proceeds or have any net income attribu				7b	_
Part VIII Information About Officers, Directors, Truste Paid Employees, and Contractors	es, Foundation Ma	nagers, Hignly	/		
List all officers, directors, trustees, foundation managers and their	compensation				_
List all officers, all cotors, a assess, foundation managers and their		(c) Compensation	(d) Contributions to	(e) Expense	-
(a) Name and address	(b) Title, and average hours per week devoted to position	(If not paid,	(d) Contributions to employee benefit plans and deferred	(e) Expense account, other allowances	
	to position	enter-0-)	compensation	allowalices	-
See Statement 14		247,103.	20 310	1,778.	
dee Blatement 14		241,103.	20,310.	1,770	-
					-
					-
Compensation of five highest-paid employees (other than those inc	luded on line 1). If none.	enter "NONE."			-
			(d) Contributions to	(e) Expense	-
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances	5
Sabrina Brown - 7101 Solomons Court,	Human Resourc	90	compensation	anowances	-
Brandywine, MD 20613	40.00	58,000.	3,641.	0.	
Standywine, IID 20015	40.00	50,000.	3,041.	0.	-
					-
					-
					-
otal number of other employees paid over \$50,000				(5
	***************************************				_

3 Five highest-paid independent contractors for professional services. If none, enter "NONE."		
(a) Name and address of each person paid more than \$50,000 (b) Type of servi	ice (c) Com	pensation
NONE	(0) 00111	portoution
Total number of others receiving over \$50,000 for professional services		0
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the	Expenses	
number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses	•
1		
Good Ghobana and A.F.		
See Statement 15	1,342	,703.
2		
3		
3		
4		
Part IX-B Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.	Amount	
1 N/A		
2		
All other program-related investments. See instructions.		
3		
Total. Add lines 1 through 3		0
Total. And lines I diloughs	Form 990-F	0.

Г	art A Willimidin investment neturn (All domestic foundations m	nust complete this part	Foreign four	idations, s	ee instructions.)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable	e, etc., purposes:			
a	Average monthly fair market value of securities			1a	429.
	Average of monthly cash balances			1b	142,543.
C	Fair market value of all other assets			1c	
d	Total (add lines 1a, b, and c)			1d	142,972.
е	Reduction claimed for blockage or other factors reported on lines 1a and				
	1c (attach detailed explanation)	1e	0.		
2	Acquisition indebtedness applicable to line 1 assets			2	0.
3	Subtract line 2 from line 1d			3	142,972.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount,	, see instructions)		4	2,145.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on			5	140,827.
6	Minimum investment return. Enter 5% of line 5		The state of the s	6	7,041.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and			d certain	
	foreign organizations check here 🕨 🗶 and do not complete this part.))			
1	Minimum investment return from Part X, line 6			1	
2a	Tax on investment income for 2016 from Part VI, line 5	2a			
b	Income tax for 2016. (This does not include the tax from Part VI.)	2b			
C	Add lines 2a and 2b			2c	
3	Distributable amount before adjustments. Subtract line 2c from line 1			3	
4	Recoveries of amounts treated as qualifying distributions			4	
5	Add lines 3 and 4			5	
6	Deduction from distributable amount (see instructions)			6	
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part			7	
P	art XII Qualifying Distributions (see instructions)				
	dreyth dadniying blothbattono (see instructions)				
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purp				
a	(-/,			1a	1,482,949.
b				1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitab	ole, etc., purposes		2	
3	Amounts set aside for specific charitable projects that satisfy the:				
a	Suitability test (prior IRS approval required)			3a	
b	Cash distribution test (attach the required schedule)			3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and	nd Part XIII, line 4		4	1,482,949.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investigations.				
	income. Enter 1% of Part I, line 27b			5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4			6	1,482,949.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years w	when calculating whether t	ne foundation (qualifies for	the section
	4940(a) reduction of tay in those years				

	(a)	(b)	(c)	(d)
	Corpus	Years prior to 2015	2015	2016
Distributable amount for 2016 from Part XI, line 7				
Undistributed income, if any, as of the end of 2016:				
a Enter amount for 2015 only				
b Total for prior years:				
, ,				
Excess distributions carryover, if any, to 2016:				
a From 2011				
b From 2012				
c From 2013				
d From 2014				
e From 2015				
f Total of lines 3a through e				
Qualifying distributions for 2016 from				
Part XII, line 4: ►\$				
a Applied to 2015, but not more than line 2a				
b Applied to undistributed income of prior				
years (Election required - see instructions)				
c Treated as distributions out of corpus				
(Election required - see instructions)				
d Applied to 2016 distributable amount				
e Remaining amount distributed out of corpus				
Excess distributions carryover applied to 2016				
(If an amount appears in column (d), the same amount				
must be shown in column (a).) Enter the net total of each column as indicated below:				
a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5				
b Prior years' undistributed income. Subtract				
line 4b from line 2b				
c Enter the amount of prior years'				
undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed				
d Subtract line 6c from line 6b. Taxable				
amount - see instructions				
e Undistributed income for 2015. Subtract line				
4a from line 2a. Taxable amount - see instr				
f Undistributed income for 2016. Subtract				
lines 4d and 5 from line 1. This amount must be distributed in 2017				
Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3) (Election				
may be required - see instructions)				
Excess distributions carryover from 2011				
not applied on line 5 or line 7				
Excess distributions carryover to 2017.				
Subtract lines 7 and 8 from line 6a				
Analysis of line 9:				
a Excess from 2012				
b Excess from 2013				
c Excess from 2014				
d Excess from 2015				
e Excess from 2016				

Form 990-PF (2016) International Lifeline Fund Part XIV Private Operating Foundations (see instructions and Part VII-A, question 9)

1 :	a If the foundation has received a ruling o	r determination letter that	it is a private operating			
	foundation, and the ruling is effective fo					
-	b Check box to indicate whether the found	dation is a private operating	ng foundation described in		4942(j)(3) or 49	942(j)(5)
	a Enter the lesser of the adjusted net	Tax year		Prior 3 years	10 12())(0) 01	12())(0)
	income from Part I or the minimum	(a) 2016	(b) 2015	(c) 2014	(d) 2013	(e) Total
	investment return from Part X for					.,
	each year listed	7,041.	6,773.	8,540.	11,552.	33,906.
-	b 85% of line 2a	5,985.	5,757.	7,259.		28,820.
	c Qualifying distributions from Part XII,					
	line 4 for each year listed	1,482,949.	1,624,335.	1,649,074.	1,680,875.	6,437,233.
	d Amounts included in line 2c not					
	used directly for active conduct of					
	exempt activities	0.	0.	0.	0.	0.
	e Qualifying distributions made directly					
	for active conduct of exempt activities.					
	Subtract line 2d from line 2c Complete 3a, b, or c for the alternative test relied upon: a "Assets" alternative test - enter: (1) Value of all assets	1,482,949.	1,624,335.	1,649,074.	1,680,875.	6,437,233.
	(2) Value of assets qualifying					
	under section 4942(j)(3)(B)(i)					0.
	b "Endowment" alternative test - enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed	4,694.	4,515.	5,693.	7,701.	22,603.
("Support" alternative test - enter:					
	(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					0.
	(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)					0.
	(3) Largest amount of support from					0.
	an exempt organization					0.
	(4) Gross investment income					0.
Pa	art XV Supplementary Info	rmation (Comple	te this part only i	f the foundation	had \$5,000 or mo	ore in assets
	at any time during t	he year-see instr	uctions.)			
1	Information Regarding Foundation	n Managers:				
	a List any managers of the foundation wh year (but only if they have contributed m	o have contributed more nore than \$5,000). (See s	than 2% of the total contrection 507(d)(2).)	ibutions received by the	foundation before the clos	se of any tax
	niel Wolf					
	b List any managers of the foundation wh other entity) of which the foundation has	o own 10% or more of th s a 10% or greater interes	e stock of a corporation (st.	or an equally large portio	on of the ownership of a pa	artnership or
	one					
2	Information Regarding Contribution Check here ► X if the foundation of the foundation makes gifts, grants, etc.	nly makes contributions t	o preselected charitable o	organizations and does n	ot accept unsolicited requ	ests for funds. If
- 1	a The name, address, and telephone num					
-	b The form in which applications should b	e submitted and informat	ion and materials they sh	ould include:		
-	Any submission deadlines:					
-	d Any restrictions or limitations on awards	s, such as by geographica	ıl areas, charitable fields, l	kinds of institutions, or o	other factors:	

Form 990-PF (2016) International Lifeline Fund 81-0629010 Page 11 Part XV Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or show any relationship to **Amount** status of any foundation manager contribution Name and address (home or business) or substantial contributor recipient a Paid during the year None Total **▶** 3a 0. **b** Approved for future payment None

Form **990-PF** (2016)

Total

Part Avi-A Analysis of income-Producing Activitie	Part XVI-A	Analysis of Income-Producin	a Activities
---------------------------------------------------	------------	-----------------------------	--------------

Enter gross amounts unless otherwise indicated.	Unrelated	business income		ed by section 512, 513, or 514	(e)
	(a) Business	(b) Amount	(C) Exclu- sion	(d) Amount	Related or exempt function income
1 Program service revenue:	code	7 inount	code	Amount	Tunction income
a					
b					
C					
d					
e					
g Fees and contracts from government agencies					
Membership dues and assessments					
3 Interest on savings and temporary cash investments			14	133.	
4 Dividends and interest from securities					
5 Net rental income or (loss) from real estate: a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal property					
7 Other investment income					
8 Gain or (loss) from sales of assets other than inventory					
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					60,562
11 Other revenue:					
a Miscellaneous			01	18,736.	
b					
C					
d					
e					
12 Subtotal. Add columns (b), (d), and (e)			0.	18,869.	60,562
13 Total. Add line 12, columns (b), (d), and (e)					
12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.)					

Relationship of Activities to the Accomplishment of Exempt Purposes

Line No.	Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes).										
						,					
10	Assessment of existing fuel efficient stoves and fuel alternativ										
	projects.										

Parl	t XVII	Information Regarding T Exempt Organizations	ransfers To	and Transactions	and Relations	hips With No	ncharitable	
1 D	id the or	ganization directly or indirectly engage ir	any of the following	ng with any other organizati	ion described in sect	ion 501(c) of		Yes No
		other than section 501(c)(3) organization				1011 30 1(0) 01		103 140
		from the reporting foundation to a nonc			inzations:			
							4.40	77
(2) Other	accate						X
h (ther tree	assetssactions;				•••••	1a(2)	X
		of assets to a noncharitable exempt org						
(1b(1)	X						
(1b(2)	X						
(;	1b(3)	X						
(1b(4)	X						
(1b(5)	X						
(1b(6)	X						
c S	sharing of	f facilities, equipment, mailing lists, other	assets, or paid em	ployees			1c	X
0 C	r service olumn (d	ver to any of the above is "Yes," complete s given by the reporting foundation. If th) the value of the goods, other assets, o	e foundation receiv services received.	ed less than fair market val	lways show the fair nue in any transaction	narket value of the good or sharing arrange	goods, other asse ement, show in	ets,
(a) Line	e no.	(b) Amount involved (c) Na	me of noncharitable	e exempt organization	(d) Description	of transfers, transaction	ons, and sharing arra	angements
			N/A					
-								
ir	section	ndation directly or indirectly affiliated witl 501(c) of the Code (other than section 5 complete the following schedule.					Yes	X No
		(a) Name of organization		(b) Type of organization		(c) Description of re	elationship	
		N/A						
Sigr Here	and be	penalties of perjury, I declare that I have examin dief, it is true, correct, and complete. Declaration	ned this return, includir o of preparer (other tha	ng accompanying schedules and n taxpayer) is based on all inform	d statements, and to the mation of which preparer Presidents	has any knowledge.	May the IRS di return with the shown below (preparer
	Sign	ature of officer or trustee		Date	Title			
		Print/Type preparer's name	Preparer's s	ignature	Date	Check if	PTIN	
						self- employed		
Paid		Jeremy Feinberg		Feinberg	11/27/17		P012494	
	parer	Firm's name ► Taksey Nef	f Feinbe	rg LLC		Firm's EIN ► 5		
Use	Only	_						
		Firm's address ▶ 2 Researc	ch Place	Suite 310				
		Rockville				Phone no. (3	01)294-1	1100
						1. 110110 1101		-PF (2016)

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

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

Attach to Form 990, Form 990-EZ, or Form 990-PF.
 Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

Employer identification number

2016

Ir	nternation	nal Lifeline Fund	81-0629010
Organization type (check of	one):		
Filers of:	Section:		
Form 990 or 990-EZ	501(c)() (enter number) organization	
	4947(a)(1)	nonexempt charitable trust not treated as a private foundation	
	527 politic	al organization	
Form 990-PF	X 501(c)(3) e	xempt private foundation	
	4947(a)(1)	nonexempt charitable trust treated as a private foundation	
	501(c)(3) t	axable private foundation	
Charleif			
		General Rule or a Special Rule. Anization can check boxes for both the General Rule and a Special Ru	le. See instructions.
General Rule			
		990-EZ, or 990-PF that received, during the year, contributions totaling Complete Parts I and II. See instructions for determining a contributor'	
Special Rules			
sections 509(a)(1)	and 170(b)(1)(A)(vi or, during the year,	tion 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, total contributions of the greater of (1) \$5,000 or (2) 2% of the amour Parts I and II.	or 16b, and that received from
year, total contribu	utions of more than	tion 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from a \$1,000 exclusively for religious, charitable, scientific, literary, or educator animals. Complete Parts I, II, and III.	
year, contributions is checked, enter he purpose. Don't con	s exclusively for relinere the total continuers the total continuers. The properties any of the properties are secured.	tion 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from a gious, charitable, etc., purposes, but no such contributions totaled market ibutions that were received during the year for an exclusively religious parts unless the General Rule applies to this organization because it restotaling \$5,000 or more during the year	ore than \$1,000. If this box , charitable, etc., received <i>nonexclusively</i>
but it must answer "No" on	Part IV, line 2, of i	the General Rule and/or the Special Rules doesn't file Schedule B (Fots Form 990; or check the box on line H of its Form 990-EZ or on its Fots of Schedule B (Form 990, 990-EZ, or 990-PF).	orm 990, 990-EZ, or 990-PF), orm 990-PF, Part I, line 2, to

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2016)

Name of organization

Employer identification number

International Lifeline Fund

81-0629010

Part I	Contributors (See instructions). Use duplicate copies of Part I if addition	onal space is needed.	0029020
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	George Wolf Memorial Trust 1220 N Street NW, PH2 Washington, DC 20005	\$\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	Gesellschaft International 65760 Eschborn Deutschland, GERMANY	\$\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3	Water to Thrive P.O Box 26747 Austin, TX 78755	\$ 55,067.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4	WORLD FOOD PROGRAMME 78 Ave du Large Bujumbura, BURUNDI	\$\$110,542.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>5</u>	Thrive Networks 1611 Telegraph Avenue, Suite 1420 Oakland, CA 94612	\$35,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
6	Elsie & Marvin Dekelboum Family Fndtn 4600 N. Park Avenue Plaza South Chevy Chase, MD 20815	\$12,000.	Person X Payroll
23452 10-18	-16	Cahadula D /Face o	

Name of organization

Employer identification number

International Lifeline Fund

81-0629010

Part I	Contributors (See instructions). Use duplicate copies of Part I if additional	al space is needed.	0027010
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7	Christadelphian Meal a Day Fund 1413 Orchard Hill Lane Charlottesville, VA 22911	\$13,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
8	Steven Sklaver 330 S. Saltair Avenue Los Angeles, CA 90049	\$5,360.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
9	Lee Sender 14318 Long Avenue, 12 Cottage Row Midlothian, IL 60445	\$10,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
10	Malik Hamid 5601 Chadwick Road Fairway, KS 66205	\$10,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
11	Suhalla Farhat 3200 North Central Avenue, Suite 1600 Phoenix, AZ 85012	\$6,500.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

Employer identification number

International Lifeline Fund

81-0629010

Part II	Noncash Property (See instructions). Use duplicate copies of Part	II if additional space is needed.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		 \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		 \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
322452 10.19			

Name of orga	nization		Employer identification number
Intern Part III	ational Lifeline Fund Exclusively religious, charitable, etc., con	tributions to organizations described i	81-0629010 n section 501(c)(7), (8), or (10) that total more than \$1,000 for
	the year from any one contributor. Complete completing Part III, enter the total of exclusively religioung Use duplicate copies of Part III if addition	COLUTTINS (a) INFOUGH (e) and THE TOLLOW us, charitable, etc., contributions of \$1,000 or le	INQ line entry, For organizations
(a) No.	ede daplicate copies of Fait III II addition	all space is fleeded.	
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	Transferee's name, address, a	(e) Transfer of gift	Relationship of transferor to transferee
(a) No.	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
Part I			(a) Decemples of new girt is field
		(e) Transfer of gift	
	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	Transferee's name, address, a	(e) Transfer of gift	Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
		(e) Transfer of gift	
	Transferee's name, address, a		Relationship of transferor to transferee
-			

Form 990-PF Interest on Savings	and Temporary	Cash Investments	Statement 1
Source	(a) Revenue Per Books	(b) Net Investment Income	(c) Adjusted Net Income
Interest-Savings, Short Term	133.	133.	133.
Total to Part I, line 3	133.	133.	133.

Form 990-PF	Income and Cost of Goods Sold Included on Part I, Line 10		Statement 2
Income			
2. Returns and allowance	es	159,269	159,269
4. Cost of goods sold (5. Gross profit (line 3	line 15)	98,707	60,562
6. Other Income			
7. Gross Income (add li	nes 5 and 6)		60,562
Cost of Goods Sold			
8. Inventory at beginni 9. Merchandise purchase 10. Cost of labor 11. Materials and suppli 12. Other costs 13. Add lines 8 through	es	98,707	98,707
14. Inventory at end of 15. Cost of goods sold (year		98,707

				
Form 990-PF Cos	t of Goods S	Sold - Other C	osts	Statement 3
Description				Amount
Other Costs				98,707.
Total Other Costs			_	98,707.
			-	30,101.
Form 990-PF	Other	Income		Statement 4
Description	_	(a) Revenue Per Books	(b) Net Invest- ment Income	(c) Adjusted Net Income
Miscellaneous		18,736.	0.	18,736.
Total to Form 990-PF, Part I	7, line 11 =	18,736.	0.	18,736.
Form 990-PF	Lega	l Fees		Statement 5
Description	(a) Expenses Per Books	(b) Net Invest- ment Income	(c) Adjusted Net Income	(d) Charitable Purposes
Legal Fees	171.	. 0.	0	171.
To Fm 990-PF, Pg 1, ln 16a	171.	0.	0	171.
Form 990-PF	Accounti	ng Fees		Statement 6
				Statement 6
Description -	(a) Expenses Per Books	(b) Net Invest- ment Income	(c) Adjusted Net Income	(d) Charitable Purposes
Accounting Fees	23,117.	0.	0.	23,117.
To Form 990-PF, Pg 1, ln 16b =	23,117.	0.	0.	23,117.
어머니는 아무지 않는데 아들이 가는 그들이 가장 아름이 살아왔다. 그 아이들은 아름이 없어 그리고 있다는 사람들이 아름이 살아보니 그 사람들이 되었다.				

Ca	(d) Charitable Purposes 0. 442,340 0. 442,340 Statement (d)	•
Expenses Net Invest Adjusted Net Income	Charitable Purposes 0. 442,340 0. 442,340 Statement (d)	
To Form 990-PF, Pg 1, ln 16c 424,823. 0. 0. 0. Form 990-PF Taxes Stat (a) (b) (c) Expenses Net Invest- Adjusted Net Income Local Taxes Payroll Taxes 215. 0. 0. 0. To Form 990-PF, Pg 1, ln 18 24,940. 0. 0.	0. 442,340 Statement (d)	· =
Form 990-PF Taxes (a) (b) Expenses Net Invest- Adjusted One Net Income Local Taxes Payroll Taxes Payroll Taxes To Form 990-PF, Pg 1, ln 18 24,940. Output Description 100 (c) Adjusted Output Net Income 215. 24,725. 0. 0. 0. 0. 0.	Statement (d)	= =
Ca	(b)	= 8
Description Expenses Per Books Net Invest-ment Income Adjusted Net Income Control Net Income Local Taxes Payroll Taxes 215. 24,725. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0.		
Payroll Taxes 24,725. 0. 0. 0. To Form 990-PF, Pg 1, ln 18 24,940. 0. 0.		
Form 000 PF		
Form 990-PF Other Expenses State	0. 24,940.	•
	Statement 9	9
		е
Bank Fees 6,058. 6,058. 0. Advertising/Marketing 24,937. 0. 0. Dues, Fees, & Subscriptions 1,232. 0. 0. Gifts 129. 0. 0. Meals & Entertainment 11,494. 0. 0. Relocation/Moving 1,229. 0. 0. Survey Supplies 370. 0. 0. Survey Supplies 97,120. 0. 0. Supplies 97,120. 0. 0. Vendor Processing Fees 1,746. 0. 0. Registration Fees 1,113. 0. 0. Equipment 22,554. 0. 0. Repairs & Maintenance 3,704. 0. 0. Utilities 2,750. 0. 0. Auto expenses 95,781. 0. 0. Insurance 22,304. 0. 0. Technology 14,718. 0. 0. Telephone and Communications 10,895. 0. 0. Training and Education 4,991.	0. 24,936. 1,232. 129. 0. 11,504. 1,229. 370. 97,343. 1,434. 1,746. 1,113. 22,564. 3,704. 2,750. 90,414.	•

International Lifeline Fund						81-062	9010
Currency Exchange Gain Charitable Contributions Payroll Expenses Continuing Education Bad Debt Expense Fundraising Expense	5,123. 80. 4,032. 262. 3,700. 387.		0. 0. 0. 0.		0. 0. 0. 0.	5 , : 4 , (123. 80. 032. 262. 0.
To Form 990-PF, Pg 1, ln 23 3	38,096.	6,	058.		0.	329,1	L86.
Form 990-PF Depreciation of Ass	ets Not	Held for	Investmen	t	Sta	tement	10
Description	Cost Other		Accumulate Depreciat		Во	ok Valu	ıe
Equipment	8	50,114.	640,	310.		209,3	04.
Total To Fm 990-PF, Part II, ln 1	4 8	50,114.	640,8	310.		209,3	04.
					,		
Form 990-PF	Other A	ssets			Sta	tement	11
Description	Beginn Yr Book	ing of Value	End of Yea			r Marke Value	t
Employee Advances Deposits	2	08,748. 8,800.	109,7	758.		109,7	
To Form 990-PF, Part II, line 15	2	17,548.	118,5	58.		118,5	58.
T							
Form 990-PF Oth	ner Liab	ilities			Stat	ement	12
Description			BOY Amoun	.t	EOY	Amount	
Deferred Rent Liability			4,9	00.			0.
Total to Form 990-PF, Part II, lin	ne 22		4,9	00.			0.

Form 990-PF		ign Country in Whas Financial In		State	ement 13
Name of Country					
Kenya Uganda Haiti					
Form 990-PF Pa		t of Officers, D: Foundation Manag		State	ement 14
Name and Address		Title and Avrg Hrs/Wk	Compen- sation	Employee Ben Plan Contrib	
Daniel Wolf 1220 N Street NW, PH Washington, DC 20005		President 20.00	0.	0.	0.
Deborah Terry 1220 N Street NW, PH Washington, DC 20005		Vice President 5.00	0.	12,408.	0.
Harriet Isom Ranch 74661 Yoakum Road Echo, OR 97826		Board Member 0.00	0.	0.	0.
Jay Schaulkin 157 Madrone Avenue Lakspur, CA 94939		Board Member 0.00	0.	0.	0.
Mark Lambert 2415 Green Street San Francisco, CA 94	123	Board Member 0.00	0.	0.	0.
John Brown 621 North Oakland St Arlington, VA 22203	reet	Board Member 0.00	0.	0.	0.
Heidi Myers 7880 Red Jacket Way		Director of Fin	nance 79,340.	3,641.	0.

Jessup, MD 20794

International Lifeline I	Fund		81	-0629010
Alexander Kunin 4603 Chatsworth Way Ellicott City, MD 21043	Board Member 0.00	0.	0.	0.
Vahid Jahangiri 8643 Stonecutter Road Columbia, MD 21045	Deputy Director 40.00	90,000.	5,393.	1,200.
Dr. F. Ronald Denham 15 Danville Drive Toronto, Ontario, CANADA M	Board Member 0.00 12P1H7	0.	0.	0.
Wayne Firestone 6804 Breezewood Terrace Rockville, MD 20852	Chief Executive 40.00		6,876.	578.
Brett Freedman 1014 S. Mansion Drive Silver Spring, MD 20910	Board Member 0.00	0.	0.	0.
Romanus Berg 4918 Saint Elmo Avenue Bethesda, MD 20814	Board Member 0.00	0.	0.	0.
Totals included on 990-PF,	Page 6, Part VIII	247,103.	28,318.	1,778.
Form 990-PF Summary	of Direct Charitable Act	ivities	Stater	ment 15
Activity One				
Assessment of existing fue	l efficient stoves and fu	iel		

Assessment of existing fuel efficient stoves and fuel alternative projects. Assessment of local resources to improve design and preformance in Africa. Organize and fund construction of fuel efficient stoves and drill water wells in Uganda, Sudan, and Tanzania.

To	Form	990-PF,	Part	IX-A,	line	1	

Expenses
1,342,703.

2016 DEPRECIATION AND AMORTIZATION REPORT

Acquired Method Life 0 May Control of the control of	Acquired Method Life 0 No. Cost of Displaces 20 Septiment Septiment	Form 990-PF Page 1	4		1	990-PF	0.000	* 40					
Various 200DE 5.00 HY17 850,114. 850,114. 558,651. 82,159. 850,114. 558,651. 82,159.	Various 2000E 5.00 HY17 850,114. 850,114. 850,114. 558,651. 82,159.		Date Acquired	00=>	Cost Or Basis	Bus % Excl	Section 179 Expense	Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
850,114. 859,651. 82,159.	850,114. 558,651. 82,159.		Various						850,114.	558,651.		82,159.	640,810.
		1 Depr			850,114.				850,114.	558,651.		82,159.	640,810.

26

(D) - Asset disposed

* ITC, Salvage, Bonus, Commercial Revitalization Deduction, GO Zone

Form **8868** (Rev. January 2017)

Department of the Treasury Internal Revenue Service

Application for Automatic Extension of Time To File an **Exempt Organization Return**

File a separate application for each return.

▶ Information about Form 8868 and its instructions is at www.irs.gov/form8868 .

OMB No. 1545-1709

Electronic filing (e-file). You can electronically file Form 8868 to request a 6-month automatic extension of time to file any of the forms listed below with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, for which an extension request must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/efile, click on Charities & Non-Profits, and click on e-file for Charities and Non-Profits.

Automatic 6-Month Extension of Time. Only submit original (no copies needed). All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns. Enter filer's identifying number Type or Name of exempt organization or other filer, see instructions. Employer identification number (EIN) or print International Lifeline Fund File by the 81-0629010 Number, street, and room or suite no. If a P.O. box, see instructions. due date for Social security number (SSN) filing your 1616 P Street, NW, No. 430 return. See City, town or post office, state, and ZIP code. For a foreign address, see instructions. instructions Washington, DC 20036 Enter the Return Code for the return that this application is for (file a separate application for each return) 0 4 Application Return Application Return Is For Code Is For Code Form 990 or Form 990-EZ 01 Form 990-T (corporation) 07 Form 990-BL 02 Form 1041-A 08 Form 4720 (individual) 03 Form 4720 (other than individual) 09 Form 990-PF 04 Form 5227 10 Form 990-T (sec. 401(a) or 408(a) trust) 05 Form 6069 11 Form 990-T (trust other than above) 06 Form 8870 12 The Organization The books are in the care of ► 1616 P Street, NW Suite 430 - Washington, DC 20036 Telephone No. ► 301-318-8188 Fax No. If the organization does not have an office or place of business in the United States, check this box If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) _. If this is for the whole group, check this box 🕨 . If it is for part of the group, check this box 🕨 ... and attach a list with the names and EINs of all members the extension is for. I request an automatic 6-month extension of time until May 15, 2018 , to file the exempt organization return for the organization named above. The extension is for the organization's return for: calendar year ► X tax year beginning <u>JUL</u> 1, 2016 , and ending JUN 30, 2017 If the tax year entered in line 1 is for less than 12 months, check reason: Initial return Final return Change in accounting period If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.

Caution: If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions. LHA

For Privacy Act and Paperwork Reduction Act Notice, see instructions.

If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.

Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required,

by using EFTPS (Electronic Federal Tax Payment System). See instructions.

Form 8868 (Rev. 1-2017)

3a

3b

Mail to: Department of the Treasury Internal Revenue Service Center Ogden, UT 84201-0045