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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 black lung benefit trust or private foundation)

▶ The organization may have to use a copy of this return to satisfy state reporting requirements

OMB No 1545-0047

2008Open to Public
Inspection

A For the 2008 calendar year, or tax year beginning <u>04/01, 2008</u> , and ending <u>03/31, 2009</u>	
B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Termination <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization <u>WORLD HUNGER YEAR, INC.</u> Doing Business As _____ Number and street (or P O box if mail is not delivered to street address) Room/suite <u>505 EIGHTH AVENUE</u> <u>2100</u> City or town, state or country, and ZIP + 4 <u>NEW YORK, NY 10018</u>
	D Employer identification number <u>13-2805575</u>
	E Telephone number <u>(212) 629-8850</u>
	G Gross receipts \$ <u>2,376,688.</u>
	H(a) Is this a group return for affiliates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all affiliates included? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "No," attach a list (see instructions) H(c) Group exemption number ▶
F Name and address of principal officer <u>WILLIAM AYRES,</u> <u>505 EIGHTH AVENUE, SUITE 2100, NEW YORK, NY 10018</u>	
I Tax-exempt status <input checked="" type="checkbox"/> 501(c) (3) (insert no) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527	
J Website ▶ <u>WWW.WHYHUNGER.ORG</u>	
K Type of organization <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶	
L Year of formation <u>1975 M State of legal domicile <u>NY</u> </u>	

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities <u>TO ATTACK THE ROOT CAUSES OF HUNGER AND POVERTY BY PROMOTING EFFECTIVE AND INNOVATIVE COMMUNITY-BASED SOLUTIONS THAT CREATE SELF-RELIANCE, ECONOMIC JUSTICE AND FOOD SECURITY.</u>		
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its assets		
	3	Number of voting members of the governing body (Part VI, line 1a)	22
	4	Number of independent voting members of the governing body (Part VI, line 1b)	22
	5	Total number of employees (Part V, line 2a)	21
	6	Total number of volunteers (estimate if necessary)	
	7a	Total gross unrelated business revenue from Part VIII, line 12, column (C)	
7b	Net unrelated business taxable income from Form 990-T, line 34		
Revenue	8	Contribution and grants (Part VIII, line 1h)	Prior Year: 1,404,498. Current Year: 1,446,710.
	9	Program service revenue (Part VIII, line 2g)	279,316. 271,025.
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	6,762. -8,699.
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	293,869. 362,245.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	1,984,445. 2,071,281.
	Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)
14		Benefits paid to or for members (Part IX, column (A), line 4)	NONE
15		Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	1,207,930. 1,375,583.
16a		Professional fundraising fees (Part IX, column (A), line 11)	23,244. 20,975.
16b		Total fundraising expenses (Part IX, column (D), line 25)	154,513.
17		Other expenses (Part IX, column (A), lines 11a-14c, 11f-21)	564,576. 613,810.
18	Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)	1,863,177. 2,230,700.	
19	Revenue less expenses Subtract line 18 from line 12	121,268. -159,419.	
Net Assets or Fund Balances	20	Total assets (Part X, line 16)	Beginning of Year: 647,783. End of Year: 586,204.
	21	Total liabilities (Part X, line 26)	42,314. 196,858.
	22	Net assets or fund balances Subtract line 21 from line 20	605,469. 389,346.

Part II Signature Block

Sign Here	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge			
	Signature of officer <u>MARL WEISS, DIRECTOR OF ADMINISTRATION & FINANCE</u> Type or print name and title	Date <u>1/21/10</u>	Check if self-employed <input type="checkbox"/>	Preparer's identifying number (see instructions) <u>P00037219</u>
Paid Preparer's Use Only	Preparer's signature <u>[Signature]</u>	Date <u>1/21/10</u>	Check if self-employed <input type="checkbox"/>	Preparer's identifying number (see instructions) <u>P00037219</u>
	Firm's name (or yours if self-employed), address, and ZIP + 4 <u>BDO SEIDMAN, LLP</u> <u>100 PARK AVENUE, NEW YORK, NY 10017</u>	EIN <u>13-5381590</u>	Phone no <u>212-885-8000</u>	
May the IRS discuss this return with the preparer shown above? (See instructions) <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No				

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

Form 990 (2008)

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Part III Statement of Program Service Accomplishments (see instructions)**1** Briefly describe the organization's mission:

SEE STATEMENT 1

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

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 services?☐ Yes ☒ No

If "Yes," describe these changes on Schedule O.

4 Describe the exempt purpose achievements for each of the organization's three largest program services by expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.**4a** (Code _____) (Expenses \$ 508,104. including grants of \$ 141,700.) (Revenue \$ _____)

SEE STATEMENT 2

4b (Code _____) (Expenses \$ 498,392 including grants of \$ 7,500.) (Revenue \$ _____)

SEE STATEMENT 2

4c (Code _____) (Expenses \$ 418,829. including grants of \$ _____) (Revenue \$ 250,050)

NATIONAL HUNGER CLEARINGHOUSE - MANAGES THE ONLY CENTRALIZED
 NATIONWIDE DATABASE OF INNOVATIVE GRASSROOTS ORGANIZATIONS WORKING
 ON FOOD, NUTRITION, AND AGRICULTURE ISSUES, CONTAINING ABOUT 3,000
 ORGANIZATIONS THAT SERVE MORE THAN 1.5 MILLION AMERICANS WHO LIVE
 IN POVERTY. THE PROGRAM'S NATIONAL HUNGER HOTLINE 1-866-3-HUNGRY
 HELPS PEOPLE SEEKING EMERGENCY FOOD ASSISTANCE, SHELTER, AND OTHER
 SOCIAL SERVICE PROGRAMS IN THEIR OWN NEIGHBORHOODS, SERVING MORE
 THAN 18,000 CALLERS A YEAR.

4d Other program services. (Describe in Schedule O.)(Expenses \$ 564,435. including grants of \$ 71,132) (Revenue \$ 20,975.)**4e** Total program service expenses ► \$ 1,989,760. (Must equal Part IX, Line 25, column (B).)

Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	X	
2 Is the organization required to complete Schedule B, Schedule of Contributors?	X	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I		X
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II		X
5 Sections 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III		
6 Did the organization maintain any donor advised funds or any accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I		X
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II		X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III		X
9 Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV		X
10 Did the organization hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V	X	
11 Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? If "Yes," complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable	X	
12 Did the organization receive an audited financial statement for the year for which it is completing this return that was prepared in accordance with GAAP? If "Yes," complete Schedule D, Parts XI, XII, and XIII	X	
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E		X
14a Did the organization maintain an office, employees, or agents outside of the U.S.?		X
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the U.S.? If "Yes," complete Schedule F, Part I	X	
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Part II	X	
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Part III		X
17 Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part I	X	
18 Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	X	
19 Did the organization report more than \$15,000 on Part VIII, line 9a? If "Yes," complete Schedule G, Part III		X
20 Did the organization operate one or more hospitals? If "Yes," complete Schedule H		X
21 Did the organization report more than \$5,000 on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	X	
22 Did the organization report more than \$5,000 on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III		X
23 Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? If "Yes," complete Schedule J		X
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer questions 24b-24d and complete Schedule K. If "No," go to question 25		X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
25a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I		X
b Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a prior year? If "Yes," complete Schedule L, Part I		X
26 Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II		X
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or substantial contributor, or to a person related to such an individual? If "Yes," complete Schedule L, Part III		X

Part IV Checklist of Required Schedules (continued)

	Yes	No
28 During the tax year, did any person who is a current or former officer, director, trustee, or key employee		
a Have a direct business relationship with the organization (other than as an officer, director, trustee, or employee), or an indirect business relationship through ownership of more than 35% in another entity (individually or collectively with other person(s) listed in Part VII, Section A)? If "Yes," complete Schedule L, Part IV	28a	X
b Have a family member who had a direct or indirect business relationship with the organization? If "Yes," complete Schedule L, Part IV	28b	X
c Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a professional corporation) doing business with the organization? If "Yes," complete Schedule L, Part IV	28c	X
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	X
31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31	X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32	X
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations section 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33	X
34 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34	X
35 Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35	X
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36	X
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37	X

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Part V Statements Regarding Other IRS Filings and Tax Compliance

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of U.S. Information Returns. Enter -0- if not applicable.	1a	11
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable.	1b	NONE
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	X
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	2a	21
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instructions)	2b	X
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a	X
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	X
b	If "Yes," enter the name of the foreign country ▶ See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a	X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b	X
c	If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?	5c	
6a	Did the organization solicit any contributions that were not tax deductible?	6a	X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b	
7	Organizations that may receive deductible contributions under section 170(c).		
a	Did the organization provide goods or services in exchange for any quid pro quo contribution of more than \$75?	7a	X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	X
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c	X
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d	
e	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e	X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f	X
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g	X
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	7h	X
8	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8	
9	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.		
a	Did the organization make any taxable distributions under section 4966?	9a	
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b	
10	Section 501(c)(7) organizations. Enter		
a	Initiation fees and capital contributions included on Part VIII, line 12	10a	
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b	
11	Section 501(c)(12) organizations. Enter		
a	Gross income from members or shareholders	11a	
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	11b	
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	12b	

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Part VI Governance, Management, and Disclosure (Sections A, B, and C request information about policies not required by the Internal Revenue Code.)**Section A. Governing Body and Management**

For each "Yes" response to lines 2-7b below, and for a "No" response to lines 8 or 9b below, describe the circumstances, process, or changes in Schedule O. See instructions.

	Yes	No
1a Enter the number of voting members of the governing body	22	
1b Enter the number of voting members that are independent	22	
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?	X	
3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?		X
4 Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?		X
5 Did the organization become aware during the year of a material diversion of the organization's assets?		X
6 Does the organization have members or stockholders?		X
7a Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?		X
7b Are any decisions of the governing body subject to approval by members, stockholders, or other persons?		X
8 Did the organizations contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a The governing body?	X	
b Each committee with authority to act on behalf of the governing body?	X	
9a Does the organization have local chapters, branches, or affiliates?		X
9b If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?		
10 Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations must describe in Schedule O the process, if any, the organization uses to review the Form 990	X	
11 Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O		X

Section B. Policies

	Yes	No
12a Does the organization have a written conflict of interest policy? If "No," go to line 13	X	
12b Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	X	
12c Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	X	
13 Does the organization have a written whistleblower policy?	X	
14 Does the organization have a written document retention and destruction policy?	X	
15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision:		
a The organization's CEO, Executive Director, or top management official?	X	
b Other officers or key employees of the organization?	X	
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 taxable entity during the year?		X
16b If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?		

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed NY

18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply.
☒ Own website ☒ Another's website ☒ Upon request

19 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public

20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization MARC WEISS, 505 EIGHTH AVENUE, SUITE 2100, NEW YORK, NY 10018
212-629-9793

[illegible]

2 Total number of individuals (including those in 1a) who received more than \$100,000 in reportable compensation from the organization ► NONE.

	Yes	No
3		X
4		X
5		X

4	X
---	---

5		X
---	--	---

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization

2	Total number of independent contractors (including those in 1) who received more than \$100,000 in compensation from the organization	NONE
---	---	------

Part VIII Statement of Revenue

13-2805575

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, gifts, grants and other similar amounts	1a	Federated campaigns	1a				
	b	Membership dues	1b				
	c	Fundraising events	1c	500,826			
	d	Related organizations	1d				
	e	Government grants (contributions)	1e	124,089			
	f	All other contributions, gifts, grants, and similar amounts not included above	1f	821,795			
	g	Noncash contributions included in lines 1a-1f \$					
	h	Total. Add lines 1a-1f		1,446,710			
Program Service Revenue	2a	NAT'L HUNGER CLEARINGHOUSE CONTRACT	Business Code 900099	250,050	250,050		
	b	KIDS CAN MAKE A DIFFERENCE	900099	20,975	20,975		
	c						
	d						
	e						
	f	All other program service revenue					
	g	Total. Add lines 2a-2f		271,025			
	Other Revenue	3	Investment income (including dividends, interest, and other similar amounts)		4,999		
4		Income from investment of tax-exempt bond proceeds		NONE			
5		Royalties		345,960			345,960
		(i) Real	(ii) Personal				
6a		Gross Rents					
b		Less rental expenses					
c		Rental income or (loss)					
d		Net rental income or (loss)		NONE			
7a		Gross amount from sales of assets other than inventory	(i) Securities 176,520	(ii) Other			
b		Less cost or other basis and sales expenses	190,218				
c		Gain or (loss)	-13,698				
d		Net gain or (loss)		-13,698			-13,698
8a		Gross income from fundraising events (not including \$ 500,826 of contributions reported on line 1c) See Part IV, line 18	STMT 3 115,189				
b		Less direct expenses	115,189				
c		Net income or (loss) from fundraising events	STMT 4	NONE			
9a		Gross income from gaming activities See Part IV, line 19					
b		Less direct expenses					
c		Net income or (loss) from gaming activities		NONE			
10a	Gross sales of inventory, less returns and allowances						
b	Less cost of goods sold						
c	Net income or (loss) from sales of inventory		NONE				
Miscellaneous Revenue			Business Code				
11a	MISCELLANEOUS	900099	16,285			16,285	
b							
c							
d	All other revenue						
e	Total. Add lines 11a-11d		16,285				
12	Total Revenue. Add lines 1h, 2g, 3, 4, 5, 6d, 7d, 8c, 9c, 10c, and 11e		2,071,281	271,025		353,546	

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the U S See Part IV, line 21 . . .	92,882.	92,882.		
2 Grants and other assistance to individuals in the U S See Part IV, line 22	NONE			
3 Grants and other assistance to governments, organizations, and individuals outside the U S See Part IV, lines 15 and 16	127,450.	127,450.		
4 Benefits paid to or for members	NONE			
5 Compensation of current officers, directors, trustees, and key employees	204,797.	161,403.	28,380.	15,014.
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) . . .	NONE			
7 Other salaries and wages	923,924.	829,333.	31,008.	63,583.
8 Pension plan contributions (include section 401 (k) and section 403(b) employer contributions). .	33,853.	30,825.	904.	2,124.
9 Other employee benefits	121,721.	110,475.	3,149.	8,097.
10 Payroll taxes	91,288.	80,334.	4,564.	6,390.
11 Fees for services (non-employees)				
a Management	NONE			
b Legal	NONE			
c Accounting	30,624.	26,996.	1,512.	2,116.
d Lobbying	NONE			
e Professional fundraising services See Part IV, line 17	20,975.			20,975.
f Investment management fees	2,087.		2,087.	
g Other	6,519.			6,519.
12 Advertising and promotion	2,383.	2,323.	60.	
13 Office expenses	152,835.	136,385.	3,839.	12,611.
14 Information technology	103,007.	100,555.	1,129.	1,323.
15 Royalties	NONE			
16 Occupancy	106,610.	93,816.	5,331.	7,463.
17 Travel	47,568.	47,131.	428.	9.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials	NONE			
19 Conferences, conventions, and meetings	11,105.	10,723.	322.	60.
20 Interest	NONE			
21 Payments to affiliates	NONE			
22 Depreciation, depletion, and amortization . . .	23,035.	20,271.	1,152.	1,612.
23 Insurance	16,347.	14,386.	817.	1,144.
24 Other expenses Itemize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below)				
a PROGRAM SUPPLIES	50,916.	50,916.		
b DUES, FEES, & SUBSCRIPTIONS	25,290.	21,058.	842.	3,390.
c REPAIRS AND MAINTENANCE	3,992.	3,513.	200.	279.
d MISCELLANEOUS	31,492.	28,985.	703.	1,804.
e				
f All other expenses				
25 Total functional expenses. Add lines 1 through 24f	2,230,700.	1,989,760.	86,427.	154,513.
26 Joint Costs. Check here <input type="checkbox"/> If following SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Part X Balance Sheet

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing	82,960.	1	57,205.
	2 Savings and temporary cash investments	145,979.	2	60,721.
	3 Pledges and grants receivable, net	140,458.	3	22,885.
	4 Accounts receivable, net		4	133,778.
	5 Receivables from current and former officers, directors, trustees, key employees, or other related parties. Complete Part II of Schedule L		5	
	6 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sales or use	17,690.	8	18,640.
	9 Prepaid expenses and deferred charges	11,177.	9	36,568.
	10a Land, buildings, and equipment cost basis	10a 374,662.		
	b Less accumulated depreciation. Complete Part VI of Schedule D.	10b 275,865.		
		93,559.	10c	98,797.
	11 Investments - publicly traded securities	152,560.	11	154,210.
	12 Investments - other securities. See Part IV, line 11		12	
	13 Investments - program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
15 Other assets. See Part IV, line 11	3,400.	15	3,400.	
16 Total assets. Add lines 1 through 15 (must equal line 34)	647,783.	16	586,204.	
Liabilities	17 Accounts payable and accrued expenses	42,314.	17	185,258.
	18 Grants payable		18	
	19 Deferred revenue		19	11,600.
	20 Tax-exempt bond liabilities		20	
	21 Escrow account liability. Complete Part IV of Schedule D		21	
	22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable		24	
	25 Other liabilities. Complete Part X of Schedule D		25	
	26 Total liabilities. Add lines 17 through 25.	42,314.	26	196,858.
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	605,469.	27	389,346.
	28 Temporarily restricted net assets		28	
	29 Permanently restricted net assets		29	
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds		30	
	31 Paid-in or capital surplus, or land, building, or equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
	33 Total net assets or fund balances	605,469.	33	389,346.
	34 Total liabilities and net assets/fund balances.	647,783.	34	586,204.

Part XI Financial Statements and Reporting

		Yes	No
1	Accounting method used to prepare the Form 990 <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a	X
b	Were the organization's financial statements audited by an independent accountant?	2b	X
c	If "Yes" to lines 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c	X
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	3a	X
b	If "Yes," did the organization undergo the required audit or audits?	3b	

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)
 (Complete only if you checked the box on line 5, 7, or 8 of Part I.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	1,177,750.	1,329,329.	1,268,837.	1,404,498.	1,425,735.	6,606,149.
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1-3	1,177,750.	1,329,329.	1,268,837.	1,404,498.	1,425,735.	6,606,149.
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)						968,187.
6 Public support. Subtract line 5 from line 4						5,637,962.

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
7 Amounts from line 4	1,177,750.	1,329,329.	1,268,837.	1,404,498.	1,425,735.	6,606,149.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	61,408.	483,289.	324,714.	292,817.	350,959.	1,513,187.
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 IV)	1,094.	2,005.	13,762.	5,603.	16,285.	38,749.
11 Total support. Add lines 7 through 10						8,158,085.
12 Gross receipts from related activities, etc. (See instructions)					12	1,323,693.
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here						<input type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2008 (line 6, column (f) divided by line 11, column (f))	14	69.11 %
15 Public support percentage from 2007 Schedule A, Part IV-A, line 26f	15	71.36 %
16a 33 1/3% support test - 2008. 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		<input checked="" type="checkbox"/>
b 33 1/3% support test - 2007. 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		<input type="checkbox"/>
17a 10%-facts-and-circumstances test - 2008. 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 "fact-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts and circumstances" test. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
b 10%-facts-and-circumstances test - 2007. 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 IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
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		<input type="checkbox"/>

Part III Support Schedule for Organizations Described in Section 509(a)(2)
 (Complete only if you checked the box on line 9 of Part I.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1-5						
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 1% of the total of lines 9, 10c, 11, and 12 for the year or \$5,000						
c Add lines 7a and 7b.						
8 Public support. (Subtract line 7c from line 6)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
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 IV)						
13 Total support. (Add lines 9, 10c, 11, and 12)						
14 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 <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

15 Public support percentage for 2008 (line 8, column (f) divided by line 13, column (f))	15	%
16 Public support percentage from 2007 Schedule A, Part IV-A, line 27g	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2008 (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from 2007 Schedule A, Part IV-A, line 27h	18	%
19a 33 1/3% support tests - 2008. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization <input type="checkbox"/>		
b 33 1/3% support tests - 2007. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization <input type="checkbox"/>		
20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions <input type="checkbox"/>		

Part IV **Supplemental Information.** Complete this part to provide the explanation required by Part II, line 10, Part II, line 17a or 17b; or Part III, line 12. Provide any other additional information. (see instructions)

SCHEDULE A, PART II - OTHER INCOME

DESCRIPTION	2004	2005	2006	2007	2008	TOTAL
MISCELLANEOUS	1,094	2,005	13,762	5,603	16,285	38,749
TOTALS	1,094	2,005	13,762	5,603	16,285	38,749

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

► Attach to Form 990. To be completed by organizations that answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

OMB No 1545-0047

2008

Open to Public
Inspection

Name of the organization
WORLD HUNGER YEAR, INC.

Employer identification number

13-2805575

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

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate contributions to (during year)		
3 Aggregate grants from (during year)		
4 Aggregate value at end of year		
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?		<input type="checkbox"/> Yes <input type="checkbox"/> No
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor or other impermissible private benefit?		<input type="checkbox"/> Yes <input type="checkbox"/> No

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

1 Purpose(s) of conservation easements held by the organization (check all that apply).

<input type="checkbox"/> Preservation of land for public use (e.g., recreation or pleasure)	<input type="checkbox"/> Preservation of an historically important land area
<input type="checkbox"/> Protection of natural habitat	<input type="checkbox"/> Preservation of certified historic structure
<input type="checkbox"/> Preservation of open space	

2 Complete lines 2a-2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

	Held at the End of the Year
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included in (a)	2c
d Number of conservation easements included in (c) acquired after 8/17/06	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable year ► _____

4 Number of states where property subject to conservation easement is located ► _____

5 Does the organization have a written policy regarding the periodic monitoring, inspection, violations, and enforcement of the conservation easements it holds? ☐ Yes ☐ No

6 Staff or volunteer hours devoted to monitoring, inspecting, and enforcing easements during the year ► _____

7 Amount of expenses incurred in monitoring, inspecting, and enforcing easements during the year ► \$ _____

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)? ☐ Yes ☐ No

9 In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements

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

1a If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items.

b If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items

(i) Revenues included in Form 990, Part VIII, line 1 ► \$ _____

(ii) Assets included in Form 990, Part X ► \$ _____

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items

a Revenues included in Form 990, Part VIII, line 1 ► \$ _____

b Assets included in Form 990, Part X ► \$ _____

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

Schedule D (Form 990) 2008

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

3 Using the organization's accession and other records, check any of the following that are a significant use of its collection items (check all that apply)

- a ☐ Public exhibition
 b ☐ Scholarly research
 c ☐ Preservation for future generations
 d ☐ Loan or exchange programs
 e ☐ Other _____

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV.

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? ☐ Yes ☐ No

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

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIV and complete the following table

	Amount
c Beginning balance	1c
d Additions during the year	1d
e Distributions during the year	1e
f Ending balance	1f

2a Did the organization include an amount on Form 990, Part X, line 21? ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIV

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

	(a) Current Year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	113,043.				
b Contributions					
c Investment earnings or losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance	113,043.				

2 Provide the estimated percentage of the year end balance held as

- a Board designated or quasi-endowment ▶ 100.0000 %
 b Permanent endowment ▶ _____ %
 c Term endowment ▶ _____ %

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by

- (i) unrelated organizations
 (ii) related organizations

	Yes	No
3a(i)		X
3a(ii)		X
3b		

b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?

4 Describe in Part XIV the intended uses of the organization's endowment funds.

Part VI Investments - Land, Buildings, and Equipment. See Form 990, Part X, line 10.

Description of investment	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements		6,745.	4,844.	1,901.
d Equipment		147,692.	130,414.	17,278.
e Other		220,225.	140,607.	79,618.
Total. Add lines 1a-1e (Column (d) should equal Form 990, Part X, column (B), line 10(c))				98,797.

Part VII Investments - Other Securities. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
Financial derivatives and other financial products		
Closely-held equity interests		
Other _____		

Total. (Column (b) should equal Form 990, Part X, col (B) line 12) ▶		

Part VIII Investments - Program Related. See Form 990, Part X, line 13.

(a) Description of investment type	(b) Book value	(c) Method of valuation Cost or end-of-year market value
Total. (Column (b) should equal Form 990, Part X, col (B) line 13)		

Part IX **Other Assets.** See Form 990, Part X, line 15.

(a) Description	(b) Book value
Total. (Column (b) should equal Form 990, Part X, col (B) line 15)	

Part X **Other Liabilities.** See Form 990, Part X, line 25.

(a) Description of liability	(b) Amount
Federal income taxes	
Total. (Column (b) should equal Form 990, Part X, col (B) line 25)	

In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48

Part XI Reconciliation of Change in Net Assets from Form 990 to Financial Statements

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	2,071,281.
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	2,230,700.
3	Excess or (deficit) for the year. Subtract line 2 from line 1	3	-159,419.
4	Net unrealized gains (losses) on investments	4	-15,038.
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	
9	Total adjustments (net). Add lines 4-8	9	-15,038.
10	Excess or (deficit) for the year per financial statements. Combine lines 3 and 9	10	-174,457.

Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

1	Total revenue, gains, and other support per audited financial statements	1	2,033,181.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a	Net unrealized gains on investments	2a	-15,038.
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIV)	2d	
e	Add lines 2a through 2d	2e	-15,038.
3	Subtract line 2e from line 1	3	2,048,219.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	2,087.
b	Other (Describe in Part XIV)	4b	20,975.
c	Add lines 4a and 4b	4c	23,062.
5	Total revenue. Add lines 3 and 4c. (This should equal Form 990, Part I, line 12.)	5	2,071,281.

Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

1	Total expenses and losses per audited financial statements	1	2,207,638.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Losses reported on Form 990, Part IX, line 25	2c	
d	Other (Describe in Part XIV)	2d	
e	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	2,207,638.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	2,087.
b	Other (Describe in Part XIV)	4b	20,975.
c	Add lines 4a and 4b	4c	23,062.
5	Total expenses. Add lines 3 and 4c. (This should equal Form 990, Part I, line 18.)	5	2,230,700.

Part XIV Supplemental Information

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b

SEE PAGE 5

Part XIV Supplemental Information (continued)

PART V, LINE 4

THE USE OF THE PRINCIPAL IS TO BE RETAINED FOR FUTURE GROWTH. THE INCOME
MAY BE APPLIED TO CURRENT PROJECTS AT THE DISCRETION OF THE BOARD OF
DIRECTORS.

PART XI, LINE 10

THE NET ASSETS OF THE ORGANIZATION AS OF MARCH 31, 2008 WERE RESTATED TO
REFLECT A CORRECTION MADE. THE ORGANIZATION HAD RECORDED EXCESSIVE
CONTRACTS RECEIVABLE FROM THE USDA WHICH WERE DETERMINED TO BE IN ERROR.

THE ADJUSTMENT IS REFLECTED IN THE NET ASSETS BALANCES AS FOLLOWS:

NET ASSETS REPORTED AS OF MARCH 31, 2008 = \$605,469

TO REDUCE CONTRACTS RECEIVABLE = (41,666)

NET ASSETS AS OF MARCH 31, 2008, RESTATED = \$563,803

PARTS XII & XIII, LINE 4B

PROFESSIONAL FUNDRAISING FEES

**Schedule F
(Form 990)**

Statement of Activities Outside the United States

OMB No 1545-0047

2008

**Open to Public
Inspection**

Department of the Treasury
Internal Revenue Service

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

Name of the organization

Employer identification number

WORLD HUNGER YEAR, INC.

13-2805575

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

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

2 For grantmakers. Describe in Part IV the organization's procedures for monitoring the use of grant funds outside the United States.

3 Activities per Region (Use Schedule F-1 (Form 990) if additional space is needed)

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures in region
SUB-SAHARAN AFRICA			GRANTMAKING		43,000.
EAST ASIA AND THE PACIFIC			GRANTMAKING		40,200.
SOUTH AMERICA			GRANTMAKING		24,250.
CENTRAL AMERICA/CARIBBEAN			GRANTMAKING		20,000.
Totals ▶					127,450.

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Schedule F (Form 990) 2008

JSA

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Part IV Supplemental Information

Complete this part to provide the information required in Part I, line 2, and any other additional information.

PART I, LINE 2

GRANTEES ARE REQUIRED TO PROVIDE THE ORGANIZATION WITH THE INFORMATION
NECESSARY TO DISBURSE THE FUNDS IN A TIMELY MANNER AND MAINTAIN OPEN
COMMUNICATION WITH THE ORGANIZATION.

THE FUNDS THAT ARE RECEIVED THROUGH THE CAMPAIGN HAVE THE FOLLOWING
RESTRICTIONS:

A.) THE FUNDS ARE SPENT IN THEIR ENTIRETY ON ACTIVITIES, ITEMS OR
PROJECTS THAT FURTHER THE ORGANIZATION'S STATED MISSION, AND

B.) THE ACTIVITIES, ITEMS OR PROJECTS PAID FOR THROUGH THESE FUNDS ARE
FOCUSED ON IMPROVING THE SITUATION OF CHILDREN AND YOUTH AND ADDRESS
SUSTAINABLE AGRICULTURE OR HUNGER.

OTHER THAN THE ABOVE TWO RESTRICTIONS, THE FUNDS ARE AVAILABLE FOR USE
FOR WHATEVER PURPOSE THE ORGANIZATION CHOOSES - STAFF COSTS, VEHICLES,
EQUIPMENT, OPERATIONAL COSTS, AGRICULTURAL EQUIPMENT, OFFICE COSTS, ETC.

(Form 990 or 990-EZ)

Name of the organization

► **Attach to Form 990 or Form 990-EZ.** Must be completed by organizations that answer "Yes" to Form 990, Part IV, lines 17, 18, or 19, and by organizations that enter more than \$15,000 on Form 990-EZ, line 6a.

**Open To Public
Inspection**

Employer identification number
13-2805575

Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17.

- | | | | | | |
|----------|-------------------------------------|-------------------------|----------|-------------------------------------|---------------------------------------|
| a | <input checked="" type="checkbox"/> | Mail solicitations | e | <input checked="" type="checkbox"/> | Solicitation of non-government grants |
| b | <input checked="" type="checkbox"/> | Email solicitations | f | <input checked="" type="checkbox"/> | Solicitation of government grants |
| c | <input checked="" type="checkbox"/> | Phone solicitations | g | <input checked="" type="checkbox"/> | Special fundraising events |
| d | <input checked="" type="checkbox"/> | In-person solicitations | | | |

- b** If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. Form 990-EZ filers are not required to complete this table

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

OK, OR, PA, RI, SC, SD, TN, TX, UT, VT, VA, WA, WV, WI, WY.

Part II Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 on Form 990-EZ, line 6a. List events with gross receipts greater than \$5,000.

	(a) Event #1 <u>CHAPIN DINNER</u> (event type)	(b) Event #2 _____ (event type)	(c) Other Events <u>NONE</u> (total number)	(d) Total Events (Add col (a) through col (c))
Revenue				
1 Gross receipts	616,015.			616,015.
2 Less Charitable contributions	500,826.			500,826.
3 Gross revenue (line 1 minus line 2)	115,189.			115,189.
Direct Expenses				
4 Cash prizes				
5 Non-cash prizes				
6 Rent/facility costs				
7 Other direct expenses	115,189.			115,189.
8 Direct expense summary. Add lines 4 through 7 in column (d)				(115,189.)
9 Net income summary. Combine lines 3 and 8 in column (d)				

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

	(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (Add col (a) through col (c))
Revenue				
1 Gross revenue				
Direct Expenses				
2 Cash prizes				
3 Non-cash prizes				
4 Rent/facility costs				
5 Other direct expenses				
6 Volunteer labor	Yes _____ % No _____ %	Yes _____ % No _____ %	Yes _____ % No _____ %	
7 Direct expense summary. Add lines 2 through 5 in column (d)				()
8 Net gaming income summary. Combine lines 1 and 7 in column (d)				

	Yes	No
9 Enter the state(s) in which the organization operates gaming activities _____		
a Is the organization licensed to operate gaming activities in each of these states?	9a	
b If "No," Explain _____		
10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year?	10a	
b If "Yes," Explain _____		
11 Does the organization operate gaming activities with nonmembers?	11	
12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming?	12	

13 Indicate the percentage of gaming activity operated in

- | | | |
|--|------------|---|
| a The organization's facility | 13a | % |
| b An outside facility | 13b | % |

14 Provide the name and address of the person who prepares the organization's gaming/special event books and records

Name ► _____

Address ► _____

15a Does the organization have a contract with a third party from whom the organization receives gaming revenue? **15a**

- b**
- If "Yes," enter the amount of gaming revenue received by the organization ► \$ _____ and the amount of gaming revenue retained by the third party ► \$ _____

c If "Yes," enter name and address

Name ► _____

Address ► _____

16 Gaming manager information

Name ► _____

Gaming manager compensation ► \$ _____

Description of services provided ► _____

☐ Director/officer☐ Employee☐ Independent contractor**17** Mandatory distributions

- a**
- Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?
- 17a**

- b**
- Enter the amount of distributions required under state law distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ► \$ _____

OMB No 1545-0047

2008

Open to Public Inspection

► Complete if the organization answered "Yes," on Form 990, Part IV, lines 21 or 22.
► Attach to Form 990.

Department of the Treasury
Internal Revenue Service
Name of the organization

Employer Identification number

13-2805575

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ☐ Yes
- 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

Part III Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use Part IV and Schedule I-1 (Form 990) if additional space is needed

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
IDAHO COMMUNITY ACTION NETWORK 3450 HILL ROAD BOISE, ID 83703	82-0357348		7,000.				EIGHT HUNGER
COMMUNITY FOOD BANK, INC. PO BOX 26727, 3003 S COUNTRY CLUB RD ROCHESTER, ROOTS	51-0192519		7,000.				EIGHT HUNGER
121 N. FITZTHUGH ST. ROCHESTER, NY 14614 GROWING POWER, INC.	16-1398194		7,000.				EIGHT HUNGER
5500 W SILVER SPRING DRIVE PICTURE THE HOMELESS	39-1876495		7,000.				EIGHT HUNGER
2427 MORRIS AVE., 2ND FLOOR BRONX, NY 10468 RURAL RESOURCES	32-0017919		7,000.				EIGHT HUNGER
2870 HOLLEY CREEK ROAD TEXAS TENANTS UNION	62-1546161		7,000.				EIGHT HUNGER
4228 MAIN STREET DALLAS, TX 75226 EDIBLE SCHOOLYARD	75-1678612		7,000.				EIGHT HUNGER
2319 VALENCE STREET NEW ORLEANS, LA 70115	72-1409800		20,000.				EIGHT HUNGER

- | | | | |
|---|--|-------|---|
| 2 | Enter total number of section 501(c)(3) and government organizations | | ▲ |
| 3 | Enter total number of other organizations | | ▲ |
| 8 | | | |

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

Part III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Use Schedule I-1 (Form 990) if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance

Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.

B.) THE ACTIVITIES, ITEMS OR PROJECTS PAID FOR THROUGH THESE FUNDS ARE
 FOCUSED ON IMPROVING THE SITUATION OF CHILDREN AND YOUTH AND ADDRESS
 SUSTAINABLE AGRICULTURE OR HUNGER.

OTHER THAN THE ABOVE TWO RESTRICTIONS, THE FUNDS ARE AVAILABLE FOR USE
 FOR WHATEVER PURPOSE THE ORGANIZATION CHOOSES - STAFF COSTS, VEHICLES,
 EQUIPMENT, OPERATIONAL COSTS, AGRICULTURAL EQUIPMENT, OFFICE COSTS, ETC.

**SCHEDULE J-2
(Form 990)**

Department of the Treasury
Internal Revenue Service

Continuation Sheet for Form 990

▶ Attach to Form 990 to list additional information for Form 990, Part VII, Section A, line 1a.

OMB No 1545-0047

2008

**Open to Public
Inspection**

Name of the Organization

WORLD HUNGER YEAR, INC.

Employer Identification number

13-2805575

Part I Continuation of Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
CHARLES SANDERS CHAIR	10.	X		X				NONE	NONE	NONE
BRIAN MCMORROW VICE-CHAIR	3.	X		X				NONE	NONE	NONE
STEPHEN J. BENINATI TREASURER	2.	X		X				NONE	NONE	NONE
JENNIFER CHAPIN SECRETARY	2.	X		X				NONE	NONE	NONE
STEPHEN APKON DIRECTOR	1.	X						NONE	NONE	NONE
EDWARD BARRON DIRECTOR	1.	X						NONE	NONE	NONE
TOM CHAPIN DIRECTOR	2.	X						NONE	NONE	NONE
BETSY FRIEDLANDER DIRECTOR	1.	X						NONE	NONE	NONE
ALAN C. HANDELL DIRECTOR	2.	X						NONE	NONE	NONE
JAKE HOLMES DIRECTOR	1.	X						NONE	NONE	NONE
MICHAEL KEATS DIRECTOR	1.	X						NONE	NONE	NONE
JOSHUA KURLAND DIRECTOR	1.	X						NONE	NONE	NONE
PAUL KURLAND DIRECTOR	2.	X						NONE	NONE	NONE
CARL LUKENS DIRECTOR	1.	X						NONE	NONE	NONE
DAVID MILLER DIRECTOR	4.	X						NONE	NONE	NONE
LORETTA MUNOZ DIRECTOR	1.	X						NONE	NONE	NONE
BICH HA PHAM DIRECTOR	1.	X						NONE	NONE	NONE
JANET POPPENDIECK DIRECTOR	1.	X						NONE	NONE	NONE
ANN JOHNS RUCKERT DIRECTOR	1.	X						NONE	NONE	NONE
SCOTT RYAN DIRECTOR	1.	X						NONE	NONE	NONE
PATRICK SULLIVAN DIRECTOR	1.	X						NONE	NONE	NONE

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

Schedule J-2 (Form 990) 2008

JSA

8E1294 1 000

04908D 702V 01/07/2010 15:21:24 V08-8.3 131157

Department of the Treasury
Internal Revenue Service

▶ **Attach to Form 990 to list additional information for Form 990, Part VII, Section A, line 1a.**

OMB No 1545-0047

2008

Open to Public Inspection

Name of the Organization

Employer Identification number

WORLD HUNGER YEAR, INC.

13-2805575

Part I Continuation of Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. **Schedule J-2 (Form 990) 2008**

**SCHEDULE O
(Form 990)**

Department of the Treasury
Internal Revenue Service

Name of the organization

WORLD HUNGER YEAR, INC.

Supplemental Information to Form 990

► Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

OMB No 1545-0047

2008

**Open to Public
Inspection**

Employer identification number

13-2805575

FORM 990, PART III, LINE 4D

1) REINVESTING AMERICA -

TOTAL EXPENSES: 213,584. TOTAL GRANTS: 4,880.

2) GENERAL MEDIA FOR PROGRAM SERVICES -

TOTAL EXPENSES: 190,640.

3) HARRY CHAPIN SELF RELIANCE AWARDS -

TOTAL EXPENSES: 87,755. TOTAL GRANTS: 52,500.

4) HARRY CHAPIN MEDIA AWARDS -

TOTAL EXPENSES: 56,546. TOTAL GRANTS: 13,752.

5) KIDS CAN MAKE A DIFFERENCE -

TOTAL EXPENSES: 15,910. TOTAL REVENUE: 20,975.

Name of the organization

Employer identification number

WORLD HUNGER YEAR, INC.

13-2805575

FORM 990, PART VI, SECTION A

LINE 2: TOM CHAPIN, DIRECTOR, AND JENNIFER CHAPIN, SECRETARY, ARE UNCLE
AND NIECE, RESPECTIVELY.

PAUL KURLAND, DIRECTOR, AND JOSHUA KURLAND, DIRECTOR, ARE FATHER AND SON,
RESPECTIVELY.

LINE 10: DRAFT COPIES OF FORM 990 WILL BE DISTRIBUTED ELECTRONICALLY TO
THE FINANCE COMMITTEE OF THE BOARD FOR THEIR REVIEW AND COMMENT.

Name of the organization

Employer identification number

WORLD HUNGER YEAR, INC.

13-2805575

FORM 990, PART VI, SECTION B

LINE 12C: OFFICERS AND DIRECTORS MUST COMPLETE AND CERTIFY ANNUALLY A

LIST OF CONFLICT OF INTEREST.

LINE 15A&B: THE EXECUTIVE COMMITTEE OF THE BOARD REVIEWS AND SETS THE

COMPENSATION OF THE EXECUTIVE DIRECTOR. THE EXECUTIVE DIRECTOR REVIEWS

AND SETS THE COMPENSATION FOR KEY EMPLOYEES. COMPARABILITY DATA IS

GATHERED FROM A VARIETY OF SOURCES INCLUDING, BUT NOT LIMITED TO,

GUIDESTAR AND THE SOCIETY FOR HUMAN RESOURCE MANAGEMENT. ORGANIZATIONS OF

LIKE SIZE AND TYPE ARE USED AS A BASIS OF COMPARISON.

Name of the organization

Employer identification number

WORLD HUNGER YEAR, INC.

13-2805575

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 ON ITS WEBSITE

AND UPON A WRITTEN REQUEST.

FORM 990, PART III, LINE 1 - ORGANIZATION'S MISSION
=====

WORLD HUNGER YEAR, INC. WAS FOUNDED IN 1975 AS A NOT FOR PROFIT ORGANIZATION TO ATTACK THE ROOT CAUSES OF HUNGER AND POVERTY BY PROMOTING EFFECTIVE AND INNOVATIVE COMMUNITY-BASED SOLUTIONS THAT CREATE SELF-RELIANCE, ECONOMIC JUSTICE AND FOOD SECURITY.

FORM 990, PART III - PROGRAM SERVICES
=====4A PROGRAM SERVICE

ARTISTS AGAINST HUNGER AND POVERTY/HUNGERTHON - WHY FORGES RELATIONSHIPS BETWEEN ARTISTS AND GRASSROOTS ORGANIZATIONS TO RAISE FUNDS, COLLECT FOOD, AND GENERATE AWARENESS IN SUPPORT OF THE FIGHT AGAINST HUNGER IN AMERICA AND AROUND THE GLOBE. PARTICIPATING ARTISTS DURING THIS REVIEW PERIOD INCLUDED BRUCE SPRINGSTEEN, MICHAEL MCDONALD, JACKSON BROWNE, LUPE FIASCO, JOSS STONE, DARRYL 'DMC' MCDANIELS, CROSBY STILLS & NASH, AND OTHERS. THIS INITIATIVE HELPED 74 GRASSROOTS ORGANIZATIONS IN THE UNITED STATES AND 8 OTHERS AROUND THE WORLD WHO ARE HELPING THOUSANDS OF PEOPLE RECEIVE FOOD, SHELTER, GOVERNMENT BENEFITS, AS WELL AS ACCESS TO JOB TRAINING, AGRICULTURAL PROGRAMS, AND THE EDUCATION THEY SO DESPERATELY NEED TO REBUILD THEIR LIVES.

4B PROGRAM SERVICE

GLOBAL MOVEMENTS - WORKS THROUGH INTERNATIONAL AND U.S. CIVIL SOCIETY NETWORKS TO LINK WHY'S DOMESTIC WORK ON HUNGER AND POVERTY TO BROADER GLOBAL MOVEMENTS FOR FOOD SOVEREIGNTY AND THE BASIC RIGHTS TO FOOD, LAND, WATER, AND SUSTAINABLE LIVELIHOODS. ITS ONLINE FOOD SECURITY LEARNING CENTER IS A HUB OF INFORMATION EXCHANGE AND ACTION FOR THE COMMUNITY FOOD SECURITY MOVEMENT IN THE US, WITH LINKS TO FOOD SECURITY INITIATIVES THROUGHOUT THE WORLD. THE FOOD SECURITY LEARNING CENTER PROVIDES IN-DEPTH INFORMATION ON TOPICS RANGING FROM NUTRITION PROGRAMS, TO FAMILY FARMS, TO FARM TO CAFETERIA PROGRAMS, AS WELL AS POLICY INITIATIVES, PROFILES OF MODEL PROGRAMS, ARTICLES, LINKS, RESOURCES, AND WAYS TO TAKE ACTION AGAINST HUNGER AND POVERTY.

FORM 990, PART VIII - EXCLUDED CONTRIBUTIONS
=====DESCRIPTION
-----AMOUNT

WHY-CHAPIN DINNER EVENT

500,826.

TOTAL

500,826.
=====

FORM 990, PART VIII - FUNDRAISING EVENTS
=====

DESCRIPTION -----	GROSS INCOME -----	DIRECT EXPENSES -----	NET INCOME -----
WHY-CHAPIN DINNER EVENT	115,189.	115,189.	NONE
TOTALS	115,189.	115,189.	NONE
	=====	=====	=====

Depreciation and Amortization
(Including Information on Listed Property)**2008**Attachment
Sequence No **67**

Name(s) shown on return

WORLD HUNGER YEAR, INC.

Business or activity to which this form relates

Identifying number

13-2805575

GENERAL DEPRECIATION**Part I Election To Expense Certain Property Under Section 179***Note: If you have any listed property, complete Part V before you complete Part I.*

1	Maximum amount See the instructions for a higher limit for certain businesses	1	
2	Total cost of section 179 property placed in service (see instructions)	2	
3	Threshold cost of section 179 property before reduction in limitation (see instructions)	3	
4	Reduction in limitation Subtract line 3 from line 2. If zero or less, enter -0-	4	
5	Dollar limitation for tax year Subtract line 4 from line 1. If zero or less, enter -0- If married filing separately, see instructions	5	
6	(a) Description of property	(b) Cost (business use only)	(c) Elected cost
7	Listed property Enter the amount from line 29	7	
8	Total elected cost of section 179 property Add amounts in column (c), lines 6 and 7	8	
9	Tentative deduction Enter the smaller of line 5 or line 8	9	
10	Carryover of disallowed deduction from line 13 of your 2007 Form 4562	10	
11	Business income limitation Enter the smaller of business income (not less than zero) or line 5 (see instructions)	11	
12	Section 179 expense deduction Add lines 9 and 10, but do not enter more than line 11	12	
13	Carryover of disallowed deduction to 2009 Add lines 9 and 10, less line 12	13	

*Note: Do not use Part II or Part III below for listed property. Instead, use Part V.***Part II Special Depreciation Allowance and Other Depreciation (Do not include listed property) (See instructions)**

14	Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year (see instructions)	14	
15	Property subject to section 168(f)(1) election	15	
16	Other depreciation (including ACRS)	16	23,035.

Part III MACRS Depreciation (Do not include listed property) (See instructions.)**Section A**

17	MACRS deductions for assets placed in service in tax years beginning before 2008	17	
18	If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here		

Section B - Assets Placed in Service During 2008 Tax Year Using the General Depreciation System

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only - see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a 3-year property						
b 5-year property						
c 7-year property						
d 10-year property						
e 15-year property						
f 20-year property						
g 25-year property			25 yrs		S/L	
h Residential rental property			27 5 yrs	MM	S/L	
i Nonresidential real property			39 yrs	MM	S/L	

Section C - Assets Placed in Service During 2008 Tax Year Using the Alternative Depreciation System

20a Class life					S/L	
b 12-year			12 yrs		S/L	
c 40-year			40 yrs	MM	S/L	

Part IV Summary (See instructions.)

21	Listed property Enter amount from line 28	21	
22	Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return Partnerships and S corporations - see instr	22	23,035.
23	For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

Part V Listed Property (Include automobiles, certain other vehicles, cellular telephones, certain computers, and property used for entertainment, recreation, or amusement.)

Note: For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete **only** 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable

Section A - Depreciation and Other Information (Caution: See the instructions for limits for passenger automobiles)

24a Do you have evidence to support the business/investment use claimed?				Yes	No	24b If "Yes," is the evidence written?				Yes	No
(a) Type of property (list vehicles first)	(b) Date placed in service	(c) Business/investment use percentage	(d) Cost or other basis	(e) Basis for depreciation (business/investment use only)	(f) Recovery period	(g) Method/Convention	(h) Depreciation deduction	(i) Elected section 179 cost			
25 Special depreciation allowance for qualified listed property placed in service during the tax year and used more than 50% in a qualified business use (see instructions)								25			
26 Property used more than 50% in a qualified business use											
		%									
		%									
		%									
27 Property used 50% or less in a qualified business use											
		%				S/L -					
		%				S/L -					
		%				S/L -					
28 Add amounts in column (h), lines 25 through 27. Enter here and on line 21, page 1.								28			
29 Add amounts in column (i), line 26. Enter here and on line 7, page 1.								29			

Section B - Information on Use of Vehicles

Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person.

If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles.

	(a) Vehicle 1		(b) Vehicle 2		(c) Vehicle 3		(d) Vehicle 4		(e) Vehicle 5		(f) Vehicle 6	
30 Total business/investment miles driven during the year (do not include commuting miles)												
31 Total commuting miles driven during the year												
32 Total other personal (noncommuting) miles driven												
33 Total miles driven during the year. Add lines 30 through 32												
34 Was the vehicle available for personal use during off-duty hours?	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
35 Was the vehicle used primarily by a more than 5% owner or related person?												
36 Is another vehicle available for personal use?												

Section C - Questions for Employers Who Provide Vehicles for Use by Their Employees

Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who are not more than 5% owners or related persons (see instructions).

37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees?	Yes	No
38 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners.		
39 Do you treat all use of vehicles by employees as personal use?		
40 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received?		
41 Do you meet the requirements concerning qualified automobile demonstration use? (See instructions)		

Note: If your answer to 37, 38, 39, 40, or 41 is "Yes," do not complete Section B for the covered vehicles.

Part VI Amortization

(a) Description of costs	(b) Date amortization begins	(c) Amortizable amount	(d) Code section	(e) Amortization period or percentage	(f) Amortization for this year
42 Amortization of costs that begins during your 2008 tax year (see instructions)					
43 Amortization of costs that began before your 2008 tax year					43
44 Total. Add amounts in column (f). See the instructions for where to report.					44

GENERAL DEPRECIATION

DEPRECIATION

Listed Property						
Less Retired Assets						
Subtotals						
TOTALS						

AMORTIZATION

*Assets Retired
JSA
8X9024 1 000

If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II and check this box ☒ **X**

Note. Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868.

If you are filing for an Automatic 3-Month Extension, complete only Part I (on page 1).

Part II Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no copies needed).

Type or print File by the extended due date for filing the return. See instructions.	Name of Exempt Organization	Employer Identification number
	WORLD HUNGER YEAR, INC.	13-2805575
	Number, street, and room or suite no. If a P.O. box, see instructions.	For IRS use only
	505 EIGHTH AVENUE, 21ST FLOOR	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions.	
	NEW YORK, NY 10018	

Check type of return to be filed (File a separate application for each return):

<input checked="" type="checkbox"/> Form 990	<input type="checkbox"/> Form 990-PF	<input type="checkbox"/> Form 1041-A	<input type="checkbox"/> Form 6069
<input type="checkbox"/> Form 990-BL	<input type="checkbox"/> Form 990-T (sec. 401(a) or 408(a) trust)	<input type="checkbox"/> Form 4720	<input type="checkbox"/> Form 8870
<input type="checkbox"/> Form 990-EZ	<input type="checkbox"/> Form 990-T (trust other than above)	<input type="checkbox"/> Form 5227	

STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.

The books are in the care of **WORLD HUNGER YEAR, INC.**

Telephone No. **212 629-8850**

FAX No. **212 629-8850**

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) **0000**. 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.

4 I request an additional 3-month extension of time until **02/16/2010**

5 For calendar year **2009**, or other tax year beginning **04/01/2008** and ending **03/31/2009**

6 If this tax year is for less than 12 months, check reason: ☐ Initial return ☐ Final return ☐ Change in accounting period

7 State in detail why you need the extension

INFORMATION NECESSARY TO FILE A COMPLETE AND ACCURATE TAX RETURN

IS NOT YET AVAILABLE FROM THIRD PARTIES.

8a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	8a	\$
8b If this application is for Form 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 and any amount paid previously with Form 8868.	8b	\$
8c Balance Due. Subtract line 8b from line 8a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	8c	\$

Signature and Verification

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form.

Signature **Paul E. Hammerschmidt**

Title **CFA, PA Agent**

Date **11/16/09**

Form 8868 (Rev 4-2009)

BDO SEIDMAN, LLP- ATTN: PAUL E. HAMMERSCHMIDT
100 PARK AVENUE
NEW YORK, NY 10017-5001