Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

▶ Do not enter social security numbers on this form as it may be made public.

Information about Form 990 and its instructions is at www.irs.gov/form990.

Open to Public Inspection

OMB No 1545-0047

	A F	or the	2016 calendar year, or tax year beginning APR 1, 2016 and ending	MAR 31, 2017					
	B Cr	neck if oplicable	C Name of organization	D Employer identifi	cation number				
		Addres change	YOUNG HEROES FOUNDATION						
		Name change	P I	20-4	O26044				
]initiaj return	Number and street (or P.O. box if mail is not delivered to street address) Room/si	ute E Telephone numbe	er				
		Final return/	15 VILLONE DRIVE		586-2953				
		termin- ated		G Gross receipts \$	193,388.				
		Ameno return		H(a) Is this a group return					
		Application	IF Name and address of principal officer STEPHEN KALLAUGHER	for subordinates	s? Yes X No				
		pendin	SAME AS C ABOVE	H(b) Are all subordinates i	ncluded? Yes No				
				527 If "No," attach a	list (see instructions)				
			e: HTTP://YOUNGHEROES.ORG.SZ	H(c) Group exemption					
				ear of formation: 2006 1	State of legal domicile; MA				
	Pa	rt I	Summary	DIT II O					
	Governance	1	Briefly describe the organization's mission or most significant activities. SEE SCHE	DOLE O					
	ern	2	Check this box 🕨 🔲 if the organization discontinued its operations or disposed of m	nore than 25% of its net a	_				
2017	Š		Number of voting members of the governing body (Part VI, line 1a)	3	6				
9			Number of independent voting members of the governing body (Part VI, line 1b)	4	5				
← -I	ies		Total number of individuals employed in calendar year 2016 (Part V, line)Ža)	5	1				
9	Activities &		· · · · · · · · · · · · · · · · · · ·	2017	20				
AUG	Ac		Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.				
(.)	\dashv	р_	Net unrelated business taxable income from Form 990-T, line 34 ** OGDER	1 1 T . 7b					
E ANNEL		0	Contributions and grants (Part VIII. line 1h)	Prior Year 176,180.	Current Year 193,386.				
	Revenue		Contributions and grants (Part VIII, line 1h) Program service revenue (Part VIII, line 2g)	0.	0.				
	ève.		Investment income (Part VIII, column (A), lines 3, 4, and 7d)	2.	2.				
	ا تقا		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	3,157.	0.				
)		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	179,339.					
			Grants and similar amounts paid (Part IX, column (A), lines 1-3)	136,788.	165,144.				
		14	Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.				
	တ္	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	19,377.	21,530.				
	Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.				
	хbе	b	Total fundraising expenses (Part IX, column (D), line 25) 19,298.						
	ш		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	20,732.					
		18	Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)	176,897.					
		19_	Revenue less expenses Subtract line 18 from line 12	2,442.					
	Net Assets or Fund Balances			Beginning of Current Year	End of Year				
	Sse		Total assets (Part X, line 16)	67,239.					
	niet Liet		Total liabilities (Part X, line 26)	6,458. 60,781.	6, <u>458</u> . 49,706.				
	-	<u>22</u> rt	Net assets or fund balances Subtract line 21 from line 20 Signature Block	00,761.	45,100.				
			lities of perjury, I declare that I have examined this return, including accompanying schedules and sta	tements, and to the best of n	ny knowledge and belief it is				
			et, and complete declaration of preparer (other than officer) is based on all information of which prep		_ 1				
			Alabur Lallansky	9/9	7/17				
	Sigr	1	Signature of officer	Date	7				
	Here		STEPHEN KALLAUGHER, PRESIDENT						
			Type or print name and title						
			Print/Type preparer's name Preparer's fignature	Date Check [PTIN				
	Paid -		THOMAS TERRY	Dh117 If sett-emplo					
	Prep		Firm's name WHITTLESEY & HADLEY, P.C.	Firm's EIN	06-0903326				
	Use	UNIY	Firm's address 14 BOBALA RD	Dha	2 526 2070				
	Mac	the !	HOLYOKE, MA 01040 RS discuss this return with the preparer shown above? (see instructions)	Prione no. 4 1	_3-536-3970 X Yes No				
	IVICIY	U10	AD GIBCUBS WIND FOLULLI WILL LIFE DISPOSED BLOWIT QUOVE (1955 ILIQUICHOLIS)						

orm	990 (2016) YOUNG HEROES FOUNDATION	20-4026044	Page 2
Pai	rt III Statement of Program Service Accomplishments		
	Check if Schedule O contains a response or note to any line in this Part III		X
1	Briefly describe the organization's mission SEE SCHEDULE O		
2	Did the organization undertake any significant program services during the year which were not listed or prior Form 990 or 990-EZ?		X No
^	If "Yes," describe these new services on Schedule O	ervices? Yes	₩.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program s If "Yes," describe these changes on Schedule O	ervices? Yes	LA_I NO
4	Describe the organization's program service accomplishments for each of its three largest program ser Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocation		and
	revenue, if any, for each program service reported		
4 a	(Code) (Expenses \$ 169,648. including grants of \$ 165,144. YOUNG HEROES FOUNDATION RAISES FUNDS TO SUPPORT YOU REGISTERED NON PROFIT IN SWAZILAND WHOSE MISSION IS THOSE CHILDREN UNDER THE AGE OF EIGHTEEN WHO HAVE B DEATHS OF THEIR PARENTS DUE TO THE AIDS EPIDEMIC IN	NG HEROES, A TO FEED AND CLO' EEN ORPHANED BY '	
	COUNTRY.		
4b	(Code) (Expenses \$ including grants of \$.) (Revenue \$)
4c	(Code) (Expenses \$ including grants of \$) (Revenue \$)
4d	Other program services (Describe in Schedule O.) (Expenses \$ including grants of \$) (Revenue \$		
40	Total program service expenses \ 169 648		

Form 990 (2016)

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1_	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	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	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501 (h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			ľ
	similar amounts as defined in Revenue Procedure 98-197 If "Yes," complete Schedule C, Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			ŀ
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			1
	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	9		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X			
	as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			l
	Part VI	11a		X
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
C	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total	١		٦,
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in	١.,,		
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	445		X
40-	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		^
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	12a		х
	Schedule D, Parts XI and XII Was the organization included in consolidated, independent audited financial statements for the tax year?	IZa		- 22
ט	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
_	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	X	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
-	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18	L	X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		X

			Yes	No
2 0a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		<u>X</u>
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		_X_
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	_22_		<u>X</u>
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23		<u>X</u>
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 lines 24b through 24d and complete			
	Schedule K If "No", go to line 25a	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		<u>X</u>
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		_X_
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or			
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes,"			
	complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			
	of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV	3		
	instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b	<u> </u>	X
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			4,5
	director, trustee, or direct or indirect owner? 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	ļ	X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			7.5
	contributions? If "Yes," complete Schedule M	_30_	 -	<u>X</u>
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			v
	Schedule N, Part II	32	-	X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301 7701-2 and 301 7701-3? 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, Part II, III, or IV, and			.
	Part V, line 1	34		X
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		_A_
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b	-	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			· •
	If "Yes," complete Schedule R, Part V, line 2	36	<u> </u>	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
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?		v	
_	Note. All Form 990 filers are required to complete Schedule O	38_	X 990	(2016)

Form 990 (2016)

YOUNG HEROES FOUNDATION

Part V Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response or note to any line in this Part V						
						Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable	1a		0			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b		0			1
С	Did the organization comply with backup withholding rules for reportable payments to vendors and re-	eportal	ble gam	ing			ĺ
	(gambling) winnings to prize winners?				1c		<u> </u>
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,						ĺ
	filed for the calendar year ending with or within the year covered by this return	2a		1			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns	ns?			2b	X	<u> </u>
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions	s)					
3а	Did the organization have unrelated business gross income of \$1,000 or more during the year?				3a		<u>X</u> _
b	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule	0			3b		<u> </u>
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other a	author	ty over	, a			ĺ
	financial account in a foreign country (such as a bank account, securities account, or other financial	accour	nt)?		4 a_		<u> </u>
b	If "Yes," enter the name of the foreign country ▶						
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial A	ccoun	ts (FBA	R).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?				<u>5a</u>		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction	ction?		ļ	5b		X
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			-	<u>5c</u>		<u> </u>
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	ne orga	ınızatıoı	n solicit	,		
	any contributions that were not tax deductible as charitable contributions?				6a		<u>X</u> _
b	If "Yes," did the organization include with every solicitation an express statement that such contribut	ions o	r gifts				
	were not tax deductible?				6b		
7	Organizations that may receive deductible contributions under section 170(c).				_		3.5
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and set	rvices p	rovided	to the payor?	7a		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?			•	7b		├─
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it w	as requ	uirea		7-		x
_	to file Form 8282?	ایجا	•••		7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit of	7d	+2		7e		X_
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contri				7f		X
' '	If the organization received a contribution of qualified intellectual property, did the organization file Fo		199 as re	equired?	7g	_	-
9 h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization				7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained						
	sponsoring organization have excess business holdings at any time during the year?	•			. 8		
9	Sponsoring organizations maintaining donor advised funds.		•				
а	Did the sponsoring organization make any taxable distributions under section 4966?				9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?				9b		
10	Section 501(c)(7) organizations. Enter						
а	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						
а	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				ł	
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form	10411	?		12a		<u> </u>
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year .	12b					
13	Section 501(c)(29) qualified nonprofit health insurance issuers.						<u> </u>
а	Is the organization licensed to issue qualified health plans in more than one state?				13a	<u> </u>	<u> </u>
	Note. See the instructions for additional information the organization must report on Schedule O						
b	Enter the amount of reserves the organization is required to maintain by the states in which the	ı	Ī]	
	organization is licensed to issue qualified health plans	13b					
С	Enter the amount of reserves on hand	13c	L			<u> </u>	
14a	Did the organization receive any payments for indoor tanning services during the tax year?			•	14a	ļ	X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedul	e O .		• • • • • • • • • • • • • • • • • • • •	14b		(2016)
					Cara		C/111/21

Form 990 (2016) YOUNG HEROES FOUNDATION 20-4026044 Page 6 Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. TT

500	tion A. Coverning Rody and Management					•	لما		
Sec	tion A. Governing Body and Management	-				Vez			
_	Enter the number of voting members of the severage hadrest the send of the torright	مه ا		6		Yes	<u>No</u>		
та	Enter the number of voting members of the governing body at the end of the tax year	1a							
	If there are material differences in voting rights among members of the governing body, or if the governing	1			ļ				
	body delegated broad authority to an executive committee or similar committee, explain in Schedule 0.	46		5	l				
ь	Enter the number of voting members included in line 1a, above, who are independent	1b	any other	ار	ł				
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship	p with	any other			x			
_	officer, director, trustee, or key employee?			•	_2_				
3	Did the organization delegate control over management duties customarily performed by or under the	e airea	ct supervision		ا ؞ ا		v		
_	of officers, directors, or trustees, or key employees to a management company or other person?	200	- 61-40		3		<u>X</u>		
4	Did the organization make any significant changes to its governing documents since the prior Form 5		is filed /		4		X		
5	Did the organization become aware during the year of a significant diversion of the organization's as	sets?		•	5 6		X		
	6 Did the organization have members or stockholders?								
7a	Did the organization have members, stockholders, or other persons who had the power to elect or a	ppoint	one or		_	i	v		
	more members of the governing body?			- }	7a		<u>X</u>		
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, s	stockh	olders, or				7.7		
	persons other than the governing body?			}	7b		<u>X</u> _		
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year	ar by th	e following:						
а	The governing body?			- }	8a	X			
b	Each committee with authority to act on behalf of the governing body?			-	<u>8b</u>		<u>X</u>		
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be real	ached a	at the						
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O				9		<u>X</u>		
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal R	evenue	e Code.)			-			
				r		Yes	No		
10a	Did the organization have local chapters, branches, or affiliates?				_10a		<u>X</u>		
b	If "Yes," did the organization have written policies and procedures governing the activities of such c	hapter	s, affiliates,		-				
	and branches to ensure their operations are consistent with the organization's exempt purposes?				10b				
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing boo	ly befo	re filing the for	m,	11a		<u>X</u>		
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.								
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13				12a		X		
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise				12b				
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Y	es," d	escnbe						
	ın Schedule O how this was done				12c				
13	Did the organization have a written whistleblower policy?				_13		<u>X</u>		
14	Did the organization have a written document retention and destruction policy?				14		_X_		
15	Did the process for determining compensation of the following persons include a review and approve		ndependent			. !	i		
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	•							
а	The organization's CEO, Executive Director, or top management official	•			15a		_X_		
b	Other officers or key employees of the organization				15b		X		
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			ļ					
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrange	ment v	vith a						
	taxable entity dunng the year?		•		16a		<u>X</u>		
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate	ate its p	participation						
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organical statements are safeguard to safeguard the organical statements.	ınızatıc	ก'ร						
	exempt status with respect to such arrangements?				16b		L		
Sec	tion C. Disclosure								
17	List the states with which a copy of this Form 990 is required to be filed ►MA								
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-	T (Sect	tion 501(c)(3)s	only) a	vailab	le			
	for public inspection. Indicate how you made these available. Check all that apply								
	Own website Another's website X Upon request Other (explain	ın Sc	hedule O)						
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, co	onflict o	of interest polic	y, and	finan	cıal			
	statements available to the public during the tax year		-						
20	State the name, address, and telephone number of the person who possesses the organization's bo	ooks ai	nd records:						
_	STEPHEN KALLAUGHER - 413-586-2953								
	15 VILLONE DR, LEEDS, MA 01053								

Earm	ann	(2016)	

YOUNG HEROES FOUNDATION

20-4026044

Page 7

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

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

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

- 1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid
 - List all of the organization's current key employees, if any See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

Check this box if neither the organization		l	IIIZZ			iibei	ısaı	(D)	(F)		
(A) Name and Title	(B) Average	ł		Pos	C) ition)		Reportable	(E) Reportable	Estimated	
Name and Tide	hours per					than o		compensation	compensation	amount of	
	week					r/trus		from	from related	other	
	(list any	횮						the	organizations	compensation	
	hours for	l dire				ed		organization	(W-2/1099-MISC)	from the	
	related	tee	nste			eusa		(W-2/1099-MISC)		organization	
	organizations	量	ia i		loyee	E CO				and related	
	below	Individual trustee or director	institutional trustee	Officer	Key employee	Highest compensated employee	Former			organizations	
	line)	트	Ē	5	\$	± 5	로				
(1) STEPHEN KALLAUGHER	20.00	١						20 000	•	•	
PRESIDENT AND EXEC DIRECTO	F 00	X		X		<u> </u>		20,000.	0.	0.	
(2) EDWARD KLEPACKI	5.00	┨	İ							•	
TREASURER		X		X	 			0.	0.	0.	
(3) MICHAEL LIPTON	2.00					'			_	•	
DIRECTOR		X			├			0.	0.	0.	
(4) DONALD GRAHAM	2.00	٠.,		l	ļ				•	_	
DIRECTOR	2 00	X		├				0.	0.	0.	
(5) DAVID VESTY	2.00	٠.,		l					_	0	
DIRECTOR	1 2 00	X			1	├	-	0.	0.	0.	
(6) SANDY VESTY	2.00	٠,	ł	ļ				0.	0.	_	
DIRECTOR		X	 	╁	├	\vdash	<u> </u>	0.	0.	0.	
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(A) Name and title		(B) Average hours per week (C) Position (do not check more than one box, unless person is both an officer and a director/trustee)							(D) Reportable compensation from	(E) Reportable compensation from related	1	(F) stimate nount o	
		(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	fr org an	pensarom the janization diretate	ed
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					<u></u>						 		
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	Sub-total otal from continuation sheets to Part V	Il Section A			<u> </u>	L	<u> </u>	>	20,000.	0			0
<u>d T</u> 2 T	otal (add lines 1b and 1c) otal number of individuals (including but r		nose	liste	ed a	bov	e) wl	ho re	20,000 eceived more than \$100	0,000 of reportable	•		0
	compensation from the organization Old the organization list any former officer	director, or tri	uste	e. ke	ev er	olan	ovee	. or	highest compensated e	employee on	Γ	Yes	No
lı	ne 1a? If "Yes," complete Schedule J for some any individual listed on line 1a, is the si	such individual									_3_	Ť	X
5 [and related organizations greater than \$15 Old any person listed on line 1a receive or	accrue compe	nsat	tion	from	any	y uni				4		X
Section	endered to the organization? If "Yes," control B. Independent Contractors									£100,000 of commo	5	from	
	Complete this table for your five highest con the organization Report compensation for								n the organization's tax				
	(A) Name and business	address	N	ON	E_				(B) Description of	services	Compe	C) ensatio	n
		<u> </u>	_										
									<u></u>				
	Total number of independent contractors (\$100,000 of compensation from the organ		not l	ımıte	d to		ose li O	stec	d above) who received r	more than			

Page 8

Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII (D)
Revenue excluded from tax under (B) (C) Unrelated Related or Total revenue exempt function business sections 512 - 514 revenue revenue Contributions, Gifts, Grants and Other Similar Amounts 1 a Federated campaigns 1a b Membership dues 1b c Fundraising events 1c d Related organizations 1d e Government grants (contributions) 1e f All other contributions, gifts, grants, and similar amounts not included above 1f <u>193,386.</u> 9 Noncash contributions included in lines 1a-1f \$ 193,386 h Total. Add lines 1a-1f **Business Code** Program Service Revenue f All other program service revenue g Total. Add lines 2a-2f Investment income (including dividends, interest, and other similar amounts) Income from investment of tax-exempt bond proceeds 5 Royalties (i) Real (ii) Personal 6 a Gross rents b Less rental expenses c Rental income or (loss) d Net rental income or (loss) (i) Securities (ii) Other 7 a Gross amount from sales of assets other than inventory b Less cost or other basis and sales expenses c Gain or (loss) d Net gain or (loss) 8 a Gross income from fundraising events (not Other Revenue including \$ contributions reported on line 1c) See Part IV, line 18 **b** Less direct expenses c Net income or (loss) from fundraising events 9 a Gross income from gaming activities See Part IV, line 19 b Less direct expenses c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances b Less cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue 11 a b d All other revenue e Total. Add lines 11a-11d 0 193,388. 0. Total revenue See instructions.

Part IX | Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) Check if Schedule O contains a response or note to any line in this Part IX (D) Fundraising (A) Total expenses Do not include amounts reported on lines 6b, Management and general expenses Program service 7b, 8b, 9b, and 10b of Part VIII. expenses **expenses** Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 Grants and other assistance to domestic individuals See Part IV, line 22 Grants and other assistance to foreign organizations, foreign governments, and foreign 165,144. 165,144 individuals See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, 4,000 4,000. 12,000. 20,000. trustees, and key employees Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Other salanes and wages Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) Other employee benefits 306. 918. 1,530 306. Payroll taxes 10 Fees for services (non-employees): a Management Legal 6,849. 6,849. c Accounting Lobbying e Professional fundraising services. See Part IV, line 17 Investment management fees Other (If line 11g amount exceeds 10% of line 25, 1,618 1,618. column (A) amount, list line 11g expenses on Sch O.) 499. 499. Advertising and promotion 12 1,563 1,563. Office expenses 13 Information technology 14 Royalties 15 Occupancy 16 198. 197. 395 Travel 17 Payments of travel or entertainment expenses for any federal, state, or local public officials Conferences, conventions, and meetings 19 Interest 20 Payments to affiliates 21 Depreciation, depletion, and amortization 22 997 997. 23 Other expenses. Itemize expenses not covered 24 above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.) 5,684 5,684. SPECIAL EVENT EXPENSE 184 184 DUES AND SUBSCRIPTIONS All other expenses 204,463. 169,648. 15,517. 19,298. Total functional expenses. Add lines 1 through 24e **25** Joint costs Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. if following SOP 98-2 (ASC 958-720) Check here

67,239

56,164.

Total liabilities and net assets/fund balances

Form	1 990 (2016) YOUNG HEROES FOUNDATION 20	-4026044	Pag	ge 12
Pa	rt XI Reconciliation of Net Assets	_		
	Check if Schedule O contains a response or note to any line in this Part XI			
1	Total revenue (must equal Part VIII, column (A), line 12) 1	19	<u>3,3</u>	<u>88.</u>
2	Total expenses (must equal Part IX, column (A), line 25)			<u>63.</u>
3	Revenue less expenses Subtract line 2 from line 1 3	-1	1,0	<u>75.</u>
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	6	0,7	<u>81.</u>
5	Net unrealized gains (losses) on investments			
6	Donated services and use of facilities 6			_,
7	Investment expenses 7			
8	Pnor period adjustments 8			
9	Other changes in net assets or fund balances (explain in Schedule O)			0.
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33,			
	column (B))	4	9,7	<u>06.</u>
Pa	rt XIII Financial Statements and Reporting			
	Check if Schedule O contains a response or note to any line in this Part XII			<u>ட</u> ்
			Yes	No
1	Accounting method used to prepare the Form 990 Cash Accrual Other			
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O			,
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	. 2a	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a			
	separate basis, consolidated basis, or both	-		
	X Separate basis Consolidated basis Both consolidated and separate basis		٠,	
b	Were the organization's financial statements audited by an independent accountant?	2b		X
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basi	s,	12	
	consolidated basis, or both			
	Separate basis Consolidated basis Both consolidated and separate basis			
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit	rt,		ļ
	review, or compilation of its financial statements and selection of an independent accountant?	2c		X
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule	0		ĺ
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single A	udit		
	Act and OMB Circular A-133?	3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required and	udit		
	or guides, explain why in Schedule O and describe any steps taken to undergo such audits	3h		

Form **990** (2016)

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Total

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

► Attach to Form 990 or Form 990-EZ.

Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form 990.

2016

Open to Public Inspection

Name of the organization Employer identification number YOUNG HEROES FOUNDATION 20-4026044 Part I Reason for Public Charity Status (All organizations must complete this part) See instructions. The organization is not a private foundation because it is (For lines 1 through 12, check only one box) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ)) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, 4 city, and state An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi), (Complete Part II) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university 10 L An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization You must complete Part IV. Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s) You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions) You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions) You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization. f Enter the number of supported organizations Provide the following information about the supported organization(s). (iv) is the organization listed (v) Amount of monetary (vi) Amount of other (iii) Type of organization (i) Name of supported (ii) EIN in your governing document? (described on lines 1-10 organization support (see instructions) support (see instructions) Yes above (see instructions))

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

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

Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	243,711.	157,704.	208,695.	195,942.	193,386.	999,438.
2	Tax revenues levied for the organ-						
	ızatıon'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 through 3	243,711.	157,704.	208,695.	195,942.	193,386.	999,438.
5	The portion of total contributions					3	
	by each person (other than a			* .		÷*	
	governmental unit or publicly		, ,	·,	,		
	supported organization) included		,	•		,	
	on line 1 that exceeds 2% of the					1 3	
	amount shown on line 11,						
	column (f)			., " '			000 400
	Public support. Subtract line 5 from line 4				9 -		999,438.
	ction B. Total Support					4) 0040	40 T-1-1
	ndar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
	Amounts from line 4	243,711.	157,704.	208,695.	195,942.	193,386.	999,438.
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties	3.	8.	2.	2.	2.	17.
_	and income from similar sources	3.	0.	2.	.4.	4.	<u> </u>
9	Net income from unrelated business						
	activities, whether or not the						
40	business is regularly carned on Other income. Do not include gain						
Ю	or loss from the sale of capital						
	assets (Explain in Part VI)						
11	Total support. Add lines 7 through 10						999,455.
	Gross receipts from related activities,	etc. (see instructi	ons)			12	
	First five years. If the Form 990 is for			d. fourth, or fifth ta	ax vear as a sectio		
	organization, check this box and stop		,,	_, , .	•		. •
Se	ction C. Computation of Publ		rcentage				
14	Public support percentage for 2016 (line 6, column (f) d	ivided by line 11, o	column (f))		14	100.00 %
	Public support percentage from 2015					15	99.99 %
16	a 33 1/3% support test - 2016. If the	organization did no	ot check the box o	n line 13, and line	14 is 33 1/3% or r	nore, check this bo	
	stop here. The organization qualifies	as a publicly supp	orted organization	ı			. ▶ X
ı	33 1/3% support test - 2015. If the	organization did no	ot check a box on	line 13 or 16a, and	line 15 is 33 1/3%	or more, check the	nis box
	and stop here. The organization qua				•		▶∟
17:	a 10% -facts-and-circumstances tes						
	and if the organization meets the "fac					rt VI how the orgai	nization
	meets the "facts-and-circumstances"						▶∟
ı	o 10% -facts-and-circumstances tes						
	more, and if the organization meets t	L - 864		hook this how and	stan hara Evolui	Dart VI how the	9
							 -
	organization meets the "facts-and-cir Private foundation. If the organization	cumstances" test.	The organization	qualifies as a publi	cly supported org	anization	▶□

Schedule A (Form 990 or 990-EZ) 2016 YOUNG HEROES FOUNDATION Part III | Support Schedule for Organizations Described in Section 509(a)(2)

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

Section A. Public Support	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		-				
Calendar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 20	216	(f) Total
1 Gifts, grants, contributions, and							
membership fees received (Do not		į					
include any "unusual grants ")						_	
2 Gross receipts from admissions,							
merchandise sold or services per-							
formed, or facilities furnished in any activity that is related to the							
organization's tax-exempt purpose						- [
3 Gross receipts from activities that							
are not an unrelated trade or bus-						i	
iness under section 513							
4 Tax revenues levied for the organ-							
ization'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					1	į	
6 Total. Add lines 1 through 5			1			$\overline{}$	
7a Amounts included on lines 1, 2, and			1-2		 		
3 received from disqualified persons							
b Amounts included on lines 2 and 3 received			1		 		
from other than disqualified persons that							
exceed the greater of \$5,000 or 1% of the							
amount on line 13 for the year c Add lines 7a and 7b							
8 Public support. (Subtract line 7c from line 6) Section B. Total Support		L		<u> </u>			
Calendar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 20	016	(f) Total
9 Amounts from line 6	(a) 2012	(0) 2010	(0) 2014	(4) 2013		3.0	(I) TOTAL
10a Gross income from interest,							
dividends, payments received on							
securities loans, rents, royalties				ļ		1	
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 10b11 Net income from unrelated business			1		1		
activities not included in line 10b,							
whether or not the business is							
regularly carned on 12 Other income Do not include gain				-			
or loss from the sale of capital							
assets (Explain in Part VI.)		+		1	-		
13 Total support. (Add lines 9, 10c, 11, and 12)							otion .
14 First five years. If the Form 990 is for	or the organization	s first, second, thi	ra, tourth, or fifth t	tax year as a sect	E)(3)1 UC NOI	, organiza	auon, ▶□
check this box and stop here .	lie Cupport De	roontago		•		··	
Section C. Computation of Pub			(0)		145		
15 Public support percentage for 2016			column (f))		15		%
16 Public support percentage from 201					16		%
Section D. Computation of Inve					T I		
17 Investment income percentage for 2			ine 13, column (f))		17		%
18 Investment income percentage from					18		%
19a 33 1/3% support tests - 2016. If th						and line 1	7 is not
more than 33 1/3%, check this box						•	. ▶∟∟
b 33 1/3% support tests - 2015. If th							
line 18 is not more than 33 1/3%, ch							▶∟
20 Private foundation. If the organization	on did not check a	box on line 14, 19	Pa. or 19b, check t	this box and see i	nstructions		▶∟

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

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

		Yes	No
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		<u>-402604</u>	4 Pa	<u>age 5</u>
Fa	rt IV Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?		-	
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)			
	below, the governing body of a supported organization?	11a	<u> </u>	
	A family member of a person described in (a) above?	11b	 	
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c	<u> </u>	
Sec	tion B. Type I Supporting Organizations		1.,	Γ
	Diddle divides broken avandende of the second of the secon		Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to			
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or			
	controlled the organization's activities. If the organization had more than one supported organization,			
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported			
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1	<u> </u>	
2	Did the organization operate for the benefit of any supported organization other than the supported		·	
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in	3 2	Ì	
	Part VI how providing such benefit carned out the purposes of the supported organization(s) that operated,	***	,	
	supervised, or controlled the supporting organization.	2		
Sec	tion C. Type II Supporting Organizations		_	
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			14.5
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control	, '	1	
	or management of the supporting organization was vested in the same persons that controlled or managed	ž	€,	1
	the supported organization(s)	1	1	
Sec	tion D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
-	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax	, *		
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported	•		
_	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how	ł		
	the organization maintained a close and continuous working relationship with the supported organization(s).			
_		2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
<u></u>	supported organizations played in this regard.	3	l	
	tion E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the yea(see instruction of the control o	ons).		
а	The organization satisfied the Activities Test Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
С	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see	e instructi on s	<u>}</u>	
2	Activities Test. Answer (a) and (b) below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities	2a		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more			
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the			
	reasons for the organization's position that its supported organization(s) would have engaged in these			
	activities but for the organization's involvement	2b		
3	Parent of Supported Organizations. Answer (a) and (b) below.		†	
o a				
d	trustees of each of the supported organizations? Provide details in Part VI.	3a		
la.	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each	34	t —	\vdash
D	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	25		
	or its supported organizations in res, describe in rait vi the role played by the organization in this regard.	3b	1	

Sche	edule A (Form 990 or 990-EZ) 2016 YOUNG HEROES FOUNDATION	ŗ		20-4026044 Page 6
	rt V Type III Non-Functionally Integrated 509(a)(3) Supportin			20 1020011 Tage 0
1	Check here if the organization satisfied the Integral Part Test as a qualifyin			n Part VI.) See instructions. A
	other Type III non-functionally integrated supporting organizations must co			,
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
_2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3	4		
_5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or		 	
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect	tion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year)			
a	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
c	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other			^ V ;
	factors (explain in detail in Part VI)			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d	3		
4	Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount,			
	see instructions)	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by .035	6		1
7	Recovenes of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2	Enter 85% of line 1	2		
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4	Enter greater of line 2 or line 3	4		
_5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions)	6		
7	Check here if the current year is the organization's first as a non-functional	ly integrate	d Type III supporting or	ganization (see

Schedule A (Form 990 or 990-EZ) 2016

instructions)

	dule A (Form 990 or 990-EZ) 2016 YOUNG HEROES	FOUNDATION	2	20-4026044 Page 7
Pai	t V Type III Non-Functionally Integrated 509	(a)(3) Supporting Org		
Sect	ion D - Distributions			Current Year
1	Amounts paid to supported organizations to accomplish exe	empt purposes		
2	Amounts paid to perform activity that directly furthers exem	pt purposes of supported		
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purpos	es of supported organization	ns	
4	Amounts paid to acquire exempt-use assets		- -	
5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in Part VI). See instructions			
7	Total annual distributions. Add lines 1 through 6			
8	Distributions to attentive supported organizations to which t	he organization is responsive	 B	
	(provide details in Part VI). See instructions			
9	Distributable amount for 2016 from Section C, line 6			
10	Line 8 amount divided by Line 9 amount			
Sect	ion E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2016	(iii) Distributable Amount for 2016
1	Distributable amount for 2016 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2016 (reason-			
	able cause required- explain in Part VI) See instructions			
3	Excess distributions carryover, if any, to 2016.			ļ
a				<u> </u>
<u> </u>	F0040			<u> </u>
	From 2013		 .	
	From 2014			
	From 2015			7.3
	Total of lines 3a through e			
	Applied to underdistributions of prior years			
	Applied to 2016 distributable amount			
<u></u>	Carryover from 2011 not applied (see instructions)			
_	Remainder. Subtract lines 3g, 3h, and 3i from 3f			
4	Distributions for 2016 from Section D, line 7 \$			
	Applied to underdistributions of prior years Applied to 2016 distributable amount			
	Remainder Subtract lines 4a and 4b from 4			7
5	Remaining underdistributions for years prior to 2016, if			
3	any. Subtract lines 3g and 4a from line 2. For result greater			
	than zero, explain in Part VI See instructions			
6	Remaining underdistributions for 2016 Subtract lines 3h			
U	and 4b from line 1. For result greater than zero, explain in			
	Part VI. See instructions			
7				
7	Excess distributions carryover to 2017. Add lines 3j and 4c			
8	Breakdown of line 7.	<u> </u>		
<u>o</u> _	DIGGREGOTTI OLIMIC I.			
	Excess from 2013			
	Excess from 2014			
	Excess from 2015			
	Excess from 2016			
-		•		•

Schedule A (Form 990 or 990-EZ) 2016

Part VI	Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a o Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines II, Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b, Part V, line 1, Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b, Part V, lines 1c, Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b, Part V, lines 1c, Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b, Part V, lines 1c, Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b, Part V, lines 1c, Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b, Part V, lines 1c, Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b, Part V, lines 1c, Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b, Part V, lines 1c, Part IV, Section E, Part IV, Sec	I and 2; Part IV, Section C,
	Section D, lines 5, 6, and 8, and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional (See instructions)	/, Section B, line 1e, Part V,
		· · · · · · · · · · · · · · · · · · ·
		
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Schedule A (Form 990 or 990-EZ) 2016

SCHEDULE F (Form 990)

Department of the Treasury Internal Revenue Service

Statement of Activities Outside the United States

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

Attach to Form 990.

▶ Information about Schedule F (Form 990) and its instructions is at www.irs.gov/form990.

2016

Open to Public Inspection

Name of the organization

Employer identification number

	ING HEROES FO				1 20-40260	
Paı			ctivities Ou	tside the United States. Comple	te if the organization answered "	'Yes" on
	Form 990, Part IV					
1	For grantmakers. Does	the organization	n maintain recor	ds to substantiate the amount of its gra	nts and other assistance,	
	the grantees' eligibility for	or the grants or a	assistance, and	the selection criteria used to award the	grants or assistance?	YesNo
2	For grantmakers. Desc	ribe in Part V the	organization's	procedures for monitoring the use of its	grants and other assistance ou	tside the
	United States.					
3	Activities per Region. (T	he following Part	I, line 3 table ca	an be duplicated if additional space is n	eeded.)	· • · · · · · · · · · · · · · · · · · ·
	(a) Region	(b) Number of	(c) Number of	T - 1	(e) If activity listed in (d)	(f) Total
		offices	`émployees, agents, and	(by type) (such as, fundraising, pro-	is a program service,	expenditures for and
		in the region	agents, and independent contractors	gram services, investments, grants to	describe specific type	investments
			in the region	recipients located in the region)	of service(s) in the region	ın the region
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	Sub-total	0	0_			0.
b	Total from continuation					1
	sheets to Part I	0	0			0.
C	Totals (add lines 3a					
	and 3b)	0	<u> </u>			0.

Page 2 -

Part II Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed YOUNG HEROES FOUNDATION Schedule F (Form 990) 2016

(I) Method of valuation (book, FMV, appraisal, other)		:				—	Schedule F (Form 990) 2016
(h) Description of noncash assistance			i				Sched
(g) Amount of noncash assistance	0					xempt by ■	
(f) Manner of cash disbursement						recognized as tax-e	
(e) Amount of cash grant	165,144,					foreign country,	
(d) Purpose of grant	SUPPORT OF CHILDREN ORPHANED AS A RESULT OF HIV/AIDS					Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter	
(c) Region	SUB-SAHARAN AFRICA - ANGOLA, BENIN, BOTSWANA, BURKINA FASO.					ins listed above that are el has provided a section	or entities
(b) IRS code section and EIN (if applicable)						recipient organizatio	other organizations
1 (a) Name of organization						2 Enter total number of the IRS, or for which t	3 Enter total number of other organizations or entities

Page 3	(h) Method of valuation (book, FMV, appraisal, other)					
V, line 16	(g) Description of noncash assistance					
20 - 4026044 s" on Form 990, Part I	(f) Amount of noncash assistance					
Form 990) 2016 YOUNG HEROES FOUNDATION Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16	(e) Manner of cash disbursement					
States. Complete if the	(d) Amount of cash grant					
FOUNDATION the the United Sta	c) Number of recipients					
YOUNG HEROES noe to Individuals Outsid	(b) Region					
Schedule F (Form 990) 2016 YOUNG HEROES F Part III Grants and Other Assistance to Individuals Outside Part III Can be displicated if additional space is peeded	(a) Type of grant or assistance					

Schedule F (Form 990) 2016

Yes

X No

Instructions for Form 5713, do not file with Form 990)

Schedule F	(Form 990) 2016 YOUNG HEROES FOUNDATION	20-4026044 Page 5								
Part V	Supplemental Information									
	Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method, amounts of									
	investments vs. expenditures per region), Part II, line 1 (accounting method), Part III (accounting method									
	(estimated number of recipients), as applicable. Also complete this part to provide any additional information	ation. See instructions								

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Schedule F (Form 990) 2016

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

Attach to Form 990 or 990-EZ.

ponses to specific questions on ny additional information.
Our 990-F7
Open to Public

► Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

2016
Open to Public Inspection

Name of the organization

YOUNG HEROES FOUNDATION

Employer identification number 20-4026044

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
YOUNG HEROES RAISES FUNDS TO SUPPORT YOUNG HEROES, A REGISTERED
NON-PROFIT IN SWAZILAND WHOSE MISSION IS TO FEED AND CLOTHE THOSE
CHILDREN UNDER THE AGE OF EIGHTEEN WHO HAVE BEEN ORPHANED BY THE DEATHS
OF THEIR PARENTS DUE TO AIDS EPIDEMIC IN THAT AFRICAN COUNTRY.
FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
YOUNG HEROES FOUNDATION RAISES FUNDS TO SUPPORT YOUNG HEROES, A
REGISTERED NON PROFIT IN SWAZILAND WHOSE MISSION IS TO FEED AND CLOTHE
THOSE CHILDREN UNDER THE AGE OF EIGHTEEN WHO HAVE BEEN ORPHANED BY THE
DEATHS OF THEIR PARENTS DUE TO THE AIDS EPIDEMIC IN THAT AFRICAN
COUNTRY.
FORM 990, PART VI, SECTION A, LINE 2:
FAMILY RELATIONSHIP OF OFFICERS - TWO DIRECTORS ON THE BOARD ARE HUSBAND
AND WIFE.
FORM 990, PART VI, SECTION A, LINE 8B:
BECAUSE OF THE SMALL SIZE OF THE ORGANIZATION BOARD, THERE ARE NO
COMMITTEES SET UP TO ACT ON BEHALF OF THE BOARD.
FORM 990, PART VI, SECTION B, LINE 11B:
PROCESS TO REVIEW FORM 990 - THE FORM 990 IS REVIEWED BY THE DIRECTOR AND
TREASURER AS AUTHORIZED BY THE BOARD OF DIRECTORS.

schedule () (Form 990 or 990-E2) (2016)	Page 2
Name of the organization YOUNG HEROES FOUNDATION	Employer identification number 20 – 4026044
DISCLOSURE OF GOVERNING DOCUMENTS - THE ORGANIZATION MAKE	S ITS GOVERNING
DOCUMENTS AVAILABLE TO THE PUBLIC UPON WRITTEN REQUEST OF	THE INTERESTED
PARTY.	
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Schedule O (Form 990 or 990-EZ) (2016)