Department of the Treasury

Return of Private Foundation

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

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

So to www.irs.gov/Form990PF for instructions and the latest information.

OMB No 1545-0052

2017

Open to Public Inspection

F	or calendar year 2017 or tax yea	ar beginning		11-01 , 2017,	and ending]	10-	31 , 20 18	_
_	Name of foundation					A Employer	identification number		_
	CHANCES FOR CHILDREN	INTERNATIONAL				81-3552	169		
_	Number and street (or PO box number		treet address)	R	oom/suite	B Telephone	number (see instructions)		_
	PO BOX 5					(603) 78	8-3845		ŕ
-	City or town, state or province, counti	ry, and ZIP or foreign postal α	ode				on application is pending,	check here	Γ (
	Lancaster, NH 03584					o ii exempti	on application is periang,		- /
	Check all that apply	Initial return	Initial return	of a former public char	ty	D 1. Foreign	n organizations, check her	e ▶]
		Final return	Amended re	•	•			_	
	H	Address change	Name chance				n organizations meeting the nere and attach computati]
. H	Check type of organization	X Section 501(c			11/15			_	J
	Section 4947(a)(1) nonexemp			taxable private foundati	ρU_{00}	E If private f	oundation statūs was tem 7(b)(1)(A), check here	ninated under	<u> </u>
ī	Fair market value of all assets a		nting method		Accrual				J
•			her (specify)	25 08311	, ccruui		dation is in a 60-month te tion 507(b)(1)(B), check h		1
	end of year (from Part II, col (c)			a on each basis \		unuer sec	(IOI) 507 (D)(T)(B), CHECK II	ele	J
F	line 16) ▶ \$ Part	73,660 (Part I, co	olumn (d) must be	Un cash basis)	Τ				_
			•	(a) Revenue and	(b) Net	nvestment	(a) Adjusted not	(d) Disbursements for charitable	,
		(c), and (d) may not necessari	iiy equai	expenses per books		come	(c) Adjusted net income	purposes	
_	the amounts in column (a	· · · · · · · · · · · · · · · · · · ·			#25/3#/46 to 14 13/34	North differential Stores.	Book in the State of the state	(cash basis only)	(90 4
2-		ints, etc., received (attach s		17,199) WELL			WALL OF THE STATE	# 1 T
D	, 2 Check ▶ 🔝 if the fou	undation is not required to atta	ach Sch B · ·	利斯洪斯、斯勒	HARRAGE	and and a	以關於經濟學學	AND SAME TO A	<u> </u>
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Part		Reginging of year		f year	
	Balance Sheets Attached schedules and amounts in the description column	Beginning of year			
	should be for end-or-year amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Valu	
	1 Cash - non-interest-bearing	84,352	73,6 <u>60</u>	73,6	<u> 560</u>
	2 Savings and temporary cash investments		` <u> </u>		
	3 Accounts receivable ▶ ,			arate bahas	
	Less allowance for doubtful accounts				
	4 Pledges receivable ▶	1983 Sept 27 47 17 17 17 17 17 17 17 17 17 17 17 17 17		WHERETERS	, Ville
	Less allowance for doubtful accounts	SETTING SEASON AS AT			35
	5 Grants receivable			-	
	6 Receivables due from officers, directors, trustees, and other				
	disqualified persons (attach schedule) (see instructions)	,			
	7 Other notes and loans receivable (attach schedule)				
	Less allowance for doubtful accounts				
ध	8 Inventories for sale or use · · · · · · · · · · · · · · · · · · ·	,		-	
o l	9 Prepaid expenses and deferred charges				
AB 1	Oa Investments - U.S. and state government obligations (attach schedule)			 	
۱ ا ۲					
- 1	b Investments - corporate stock (attach schedule)				
	c Investments - corporate bonds (attach schedule)				
1	1 Investments - land, buildings, and equipment basis ►	国际的现在分词的			4.
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81-	355	216	9	Page

Part IV Capital Gaills at	IU LOSSES IOI TAX OII IIIVESII	Hellt Illcollie			
	the kind(s) of property sold (for example, rebuse, or common stock, 200 shs MLC Co)	eal estate,	(b) How acquired P-Purchase D-Donation	(c) Date acquired (mo , day, yr)	
1a					
b					
С				.,	
d					
е					
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or o			Gain or (loss) plus (f) minus (g))
a					
b				·	
С					
d					
e					
Complete only for assets showing	g gain in column (h) and owned by the	foundation on 12	/31/69	(I) Coins	s (Col (h) gain minus
(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess over col (col (k), bu	t not less than -0-) or es (from col (h))
а			,		
b					
С					,
d					
е					
2 Capital gain net income or (net ca	aditatioss) 1	enter in Part I, line		2	
3 Net short-term capital gain or (los	ss) as defined in sections 1222(5) and ((6)	Ì		
, •	column (c) See instructions If (loss),				
			}	3	
	der Section 4940(e) for Redu		Net Investme	nt Income	
L	foundations subject to the section 494				
(1 of optional use by domestic private	Touridations subject to the section 404	o(u) tux on not in		,	
If section 4940(d)(2) applies, leave th	ns part blank				
Was the foundation liable for the sect	tion 4942 tax on the distributable amour	nt of any year in t	he hase neriod?		Yes X No
	y under section 4940(e) Do not comple		ine base penoa		
	each column for each year, see the inst		naking any entries		
(a)		Tractions before t	· ·	·	(d)
Base period years	(b) Adjusted qualifying distributions	Net value of r	(c) nonchantable-use as		Distribution ratio (b) divided by col (c))
Calendar year (or tax year beginning ii 2016	10		_	(60)	0.291394
2015	25,566		87,7		
2013	2,022		92,5	043	0.021849
2013	· · · · ·	*-			
					
2012					
0 = 4 + 50 = 4 = 50 = 50 (4)				,	0.010040
				2	0.313242
-	5-year base period - divide the total on				
the number of years the foundate	on has been in existence if less than 5	years · · · ·		3	0.104414
4 Enter the net value of nonchanta	ble-use assets for 2017 from Part X, lin	ie 5 · · · ·		4	77,852
5 Multiply line 4 by line 3 · · · ·				5	8,129
6 Enter 1% of net investment incor	me (1% of Part I, line 27b) · · · · ·			6	
7 Add lines 5 and 6				7	8,129
					•
8 Enter qualifying distributions from	n Part XII, line 4			8	27,816
	n line 7, check the box in Part VI, line 1	b, and complete	that part using a 1	% tax rate See th	
Part VI instructions		•			

=				<u> </u>
Pa	Statements Regarding Activities (continued)	199, 369, 4		
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the	7-66-1-10-1	Yes	No
	meaning of section 512(b)(13)? If "Yes," attach schedule See instructions	11		X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified		1	
	person had advisory privileges? If "Yes," attach statement. See instructions	12		<u>X</u>
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Х	
	Website address chancesforchildreninternational.org			
14	The books are in care of ▶ JUDY M GARFINKEL Telephone no ▶ 603-	788-38	45	
	Located at ▶ PO BOX 5, Lancaster, NH ZIP+4 ▶ 03584	4		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041-check here			▶ [
	and enter the amount of tax-exempt interest received or accrued during the year			
16	At any time during calendar year 2017, did the foundation have an interest in or a signature or other authority		Yes	No
	over a bank, securities, or other financial account in a foreign country?	16		X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of	SHAR.	76	MA.
	The foreign country ▶	- 443		
Pa	t:\VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies		Yes	No
1a	During the year, did the foundation (either directly or indirectly)			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a	Mos y		
	disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes X No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for			
	the benefit or use of a disqualified person)?		, č. j	
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the			
	foundation agreed to make a grant to or to employ the official for a period after			
	termination of government service, if terminating within 90 days)			
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations			
	section 53 4941(d)-3 or in a current notice regarding disaster assistance? See instructions	1b		
	Organizations relying on a current notice regarding disaster assistance, check here	KÆ:		
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that		能制	
	were not corrected before the first day of the tax year beginning in 2017?	1c		Χ
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private	75 T	ME.	
	operating foundation defined in section 4942(j)(3) or 4942(j)(5))			
а	At the end of tax year 2017, did the foundation have any undistributed income (lines 6d and			
	6e, Part XIII) for tax year(s) beginning before 2017? Yes X No		. 3	
	If "Yes," list the years	X.		inti
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)			
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to			
	all years listed, answer "No" and attach statement - see instructions)	2b		X
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise			語物
	at any time during the year?		1.00	张彩
b	If "Yes," did it have excess business holdings in 2017 as a result of (1) any purchase by the foundation or			
	disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the	National Parties		
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of			海湖
	the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the		23	
	foundation had excess business holdings in 2017)	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its chantable purposes?	4a		X
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its		- F. 202-	\$1864 () 1500 x 1
-	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2017?	4b	i Timber 1984.	X

Form 990-PF (2017) CHANCES FOR CHILDRE				May Da	D:		81-3552		Page 6
Rart VII B Statements Regarding Activiti		Which For	n 4/20	iway Be	Requii	ea (cc	munuea	<i>)</i>	Vaa Na
5a During the year, did the foundation pay or incur any an		.1.4	40454-1	\\ 0	Г	¬ _v	₩	\$8960 \$1600	Yes No
(1) Carry on propaganda, or otherwise attempt to influ					[Yes	X No	1510	
(2) Influence the outcome of any specific public electi	on (see s	ection 4955), o	r to carry	on,	Г	٦,,	[]	A PART	
directly or indirectly, any voter registration drive?					٠ ١	Yes	X No		
(3) Provide a grant to an individual for travel, study, or					٠٠٠ ل	Yes	X No		
(4) Provide a grant to an organization other than a ch			in descri	bed in	Г	¬	₩.		
					L	Yes	X No.	37 14 K	
(5) Provide for any purpose other than religious, chan			or educa	itional	Г	7 ٧	₩.		
	poses, or for the prevention of cruelty to children or animals?								
	ny answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in								
Regulations section 53 4945 or in a current notice regulations	•			instructions				5b _#240€	それが お記念器
Organizations relying on a current notice regarding dis							. – 🗀	-628	
c If the answer is "Yes" to question 5a(4), does the found		im exemption i	rom-the i	lax	· .	Yes	∏ No	K	
because it maintained expenditure responsibility for the If "Yes," attach the statement required by Regulations	-	3 4045 5(d)			٠ ٢				
6a Did the foundation, during the year, receive any funds,			av prem	ume					
on a personal benefit contract?	-		ay piem		[Yes	X No		
b Did the foundation, during the year, pay premiums, dire			ersonal h	enefit contra	ct?			6b	X
If "Yes" to 6b, file Form 8870	cony or in	directly, on a pe	orgoniai E	CHOIR COILLA	Ot -			#FIA	Tract ATM
7a At any time during the tax year, was the foundation a p	arty to a	prohibited tax s	helter tra	ensaction?	[Yes	X No		
b If "Yes," did the foundation receive any proceeds or ha	-				-	⊣		7b	seinmidergenet Derbertitige
Rart VIII Information About Officers, Dire						, High	ly Paid	Emplo	yees,
and Contractors					4°				
List all officers, directors, trustees, and foundation r	 _	e, and their con	, '	mpensation		contributi	ons to	(1) 5	
(a) Name and address	hou	rs per week	(If n	ot paid,	emplo	oyee bene	fit plans		ense account, allowances
TIPL M CAPPINET	 	ed to position		iter -0-}	and der	errea con	pensation		
JUDY M GARFINKEL PO BOX 5, Lancaster, NH 03584	CHIEF	EXECUTIVE 15.00	Ť	0			0		0
J LARRY BROWN	PRESI								
PO BOX 5, Lancaster, NH 03584	PAESI.	15.00		0			0		0
ARIEL S BROWN-GARFINKEL	PROGR	. DIRECTOR	2						
PO BOX 5, Lancaster, NH 03584		2.00	[0			0		0
TO BOIL Of Editorio 1927 This Cook									
2 Compensation of five highest-paid employees (other	r than the	ose included o	n line 1	- see instru	ctions). I	f none,	enter		
2 Compensation of five highest-paid employees (other "NONE."	r than the	ose included o	on line 1	- see instru	ctions). I				
		(b) Title, and a hours per widevoted to po	average /eek	- see instruc		(d) Cont employed plans an	enter ributions to ee benefit d deferred ensation		ense account, allowances
"NONE."		(b) Title, and a	average /eek			(d) Cont employed plans an	ributions to se benefit d deferred		
"NONE." (a) Name and address of each employee paid more than \$50		(b) Title, and a	average /eek			(d) Cont employed plans an	ributions to se benefit d deferred		
"NONE." (a) Name and address of each employee paid more than \$50		(b) Title, and a	average /eek			(d) Cont employed plans an	ributions to se benefit d deferred		

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Form 990-PF (2017)

All other program-related investments. See instructions

Total. Add lines 1 through 3

3

EEA

Pai	Minimum Investment Return (All domestic foundations must complete this part. Foreign see instructions.)	foundatio	ns,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.		
•	purposes		
а	Average monthly fair market value of securities	1a	0
b	Average of monthly cash balances	1b	79,038
c	Fair market value of all other assets (see instructions)	1c	0
d	Total (add lines 1a, b, and c)	1d	79,038
e	Reduction claimed for blockage or other factors reported on lines 1a and	7.7	.5,050
·	1c (attach detailed explanation) · · · · · · · · · · · · · · · · · · ·	,	
2	Acquisition indebtedness applicable to line 1 assets	2	0
3	Subtract line 2 from line 1d	3	79,038
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see		73,030
•	Instructions)	4	1,186
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	77,852
6	Minimum investment return. Enter 5% of line 5	6	
	t XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating for		3,893
	and certain foreign organizations, check here and do not complete this part)	Junualion	,
1	Minimum investment return from Part X, line 6	1	2 002
2а	Tax on investment income for 2017 from Part VI, line 5	-	3,893
za b	Income tax for 2017 (This does not include the tax from Part VI)	-	
-		2c	
C		3	2 002
3	Distributable amount before adjustments Subtract line 2c from line 1	4	3,893
4	Recoveries of amounts treated as qualifying distributions	5	2 222
5	Add lines 3 and 4		3,893
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII,	_	
	line 1	7	3,893
Pai	t XII Qualifying Distributions (see instructions)		
_		1: 1	······································
1	Amounts paid (including administrative expenses) to accomplish chantable, etc., purposes		
a	Expenses, contributions, gifts, etc - total from Part I, column (d), line 26	1a	27,816
b	Program-related investments - total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
_	purposes	2	
3	Amounts set aside for specific chantable projects that satisfy the		
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	27,816
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income		
	Enter 1% of Part I, line 27b See instructions	5	
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	27,816
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the for	oundation	
	qualifies for the section 4940(e) reduction of tax in those years		

Form	990-PF (2017) CHANCES FOR CHILDRE	N INTERNATIONAL		81-3552169	Page 9
Pai	rt XIII Undistributed Income (see instr	uctions)			
1	Distributable amount for 2017 from Part XI,	(a) Corpus	(b) Years prior to 2016	(c) 2016	(d) 2017
	line 7	ļ			3,893
2	Undistributed income, if any, as of the end of 2017				•
a	Enter amount for 2016 only		-		·
Ь	Total for prior years				<u> </u>
3	Excess distributions carryover, if any, to 2017				
a	From 2012	-			
b	From 2013	-			
C	From 2014	-			
a	From 2015	_			
e	From 2016 · · · · · · · 18,94				
t	Total of lines 3a through e	18,940	•		•
4	Qualifying distributions for 2017 from Part XII, line 4 \$ 27.816				
_	line 4 ▶ \$ 27,816 Applied to 2016, but not more than line 2a				
a b	Applied to undistributed income of prior years		· · · · · · · · · · · · · · · · · · ·		
U	(Election required - see instructions)				
С	Treated as distributions out of corpus (Election			·	
·	required - see instructions)				
d	Applied to 2017 distributable amount		•		3,893
e	Remaining amount distributed out of corpus	23,923			3,093
5	Excess distributions carryover applied to 2017 •	23,923		, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
•	(If an amount appears in column (d), the same				
	amount must be shown in column (a))				
6	Enter the net total of each column as				
	indicated below:				
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5 ·	42,863			
b	Pnor years' undistributed income Subtract				
	line 4b from line 2b · · · · · · · · · · · · · · · · · ·				
С	Enter the amount of pnor years' undistributed				
	income for which a notice of deficiency has				
	been issued, or on which the section 4942(a)				
	tax has been previously assessed				
d	Subtract line 6c from line 6b Taxable				
	amount - see instructions				
е	Undistributed income for 2016 Subtract line				
	4a from line 2a Taxable amount - see	\cdot			
	instructions				
f	Undistributed income for 2017 Subtract lines				
	4d and 5 from line 1. This amount must be				
	distributed in 2018				0
7	Amounts treated as distributions out of corpus				
	to satisfy requirements imposed by section				
	170(b)(1)(F) or 4942(g)(3) (Election may be				
	required - see instructions)				
8	Excess distributions carryover from 2012 not				
	applied on line 5 or line 7 (see instructions) · · ·				
9	Excess distributions carryover to 2018.				
	Subtract lines 7 and 8 from line 6a · · · · · · ·	42,863			
10	Analysis of line 9				
а	Excess from 2013 · · · · ·	-			
b	Excess from 2014 · · · · ·	_{			
С	Excess from 2015 · · · · ·	-			
d	Excess from 2016	7			
е	Excess from 2017 23, 92.	31			

	90-PF (2017) XIV Private Operating Founda	tiona (aga instr	estions and Part	VII A guestion 0	<u> </u>	Page 10
	If the foundation has received a ruling)	
Ia	foundation, and the ruling is effective fo			private operating	NOT APP	LICABLE
b	Check box to indicate whether the fou	•	-	tion described in se		3) or 4942(J)(5)
_	Enter the lesser of the adjusted net	Tax year)	Prior 3 years	/	
	income from Part I or the minimum investment return from Part X for each year listed	(a) 2017	(b) 2016	(c) 2015	(d) 2014	(e) Total
b	85% of line 2a	·				
С	Qualifying distributions from Part XII, line 4 for each year listed					
d	Amounts included in line 2c not used directly for active conduct of exempt activities					
е	Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c					
3	Complete 3a, b, or c for the alternative test relied upon:					
а	"Assets" alternative test - enter			<i>X</i> 1		
	(1) Value of all assets(2) Value of assets qualifying under section 4942(j)(3)(B)(i) .					
b	"Endowment" alternative test—enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed					
С	"Support" alternative test-enter:					
	(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
	(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)					
	(3) Largest amount of support from					
	an exempt organization					
	(4) Gross investment income .	(_				
Part				he foundation h	ad \$5,000 or mo	ore in assets at
	any time during the year-		ns.)		·-··	
1	Information Regarding Foundation		.t. d thon 20	/ of the total contra	ibuitiona recoursed	by the formulation
а	List any managers of the foundation of before the close of any tax year (but of					by the loundation
u ini c		-				
	SARFINKEL AND LARRY BROWN HAVE I List any managers of the foundation					rge portion of the
D	ownership of a partnership or other ei					igo portion of the
יופ סע	CH MANAGERS	, 5				
2	Information Regarding Contribution	Grant, Gift Loa	n. Scholarship, e	etc Programs:	···	
_	Check here ▶ ☐ if the foundation unsolicited requests for funds. If the foundation	only makes contr	ributions to prese	lected charitable o		

- complete items 2a, b, c, and d. See instructions
- a The name, address, and telephone number or email address of the person to whom applications should be addressed: JUDI GARFINKEL, 131 GORE ROAD, LANCASTER, NH 03584, EMAIL judigarfinkel@gmail com
- b The form in which applications should be submitted and information and materials they should include WRITTEN PROPOSALS ONLY, WITH COMPLETE DETAILS ON USE OF FUNDS WILL REQUIRE REGULAR FUTURE REPORTS ON ONGOING **FUND USE**
 - Any submission deadlines

NONE

Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other

NO RESTRICTIONS, AS LONG AS USE IS CONSISTENT WITH CHARITABLE PURPOSE

81-3552169

Part XV Supplementary Information (continued)

3 Grants and Contributions Paid During the Year or Approved for Future Payment

3 Grants and Contributions Paid During the Year or Approved for Future Payment								
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount				
Name and address (home or business)	or substantial contributor	recipient						
a Paid during the year								
CHILDREN'S EDUCATION FOUNDATION								
C/O S JACKEL,277 BROADWAY STE 1010			CHILDREN'S					
New York, NY 10007	NONE	PC	EDUCATION	10,000				
•				·				
TANZANIAN CHILDREN'S FUND								
9 WATERHOUSE ST			EDUCATION FOR					
Cambridge, MA 02138	NONE	PC	ORPHANED CHILDREN	1,000				
Cambridge, 141 02130	NONE			_, ~~				
ALIG								
		•	CHILDREN'S					
PO AZAD NAGAR, JAMSHEDPUR	NONE	NG		2 022				
JHARKHAND India 832110	NONE	NC	EDUCATION	2,022				
REDWOOD FOREST FRIENDS MEETING			PROGRESA: GUATEMAL					
PO BOX 1831			AN YOUTH					
Santa Rosa, CA 95402	NONE	PC	SCOLARSHIPS	5,000				
		ļ						
AMIGOS DE SANTA CRUZ FOUNDATION			EDUCATE					
2226 EASTLAKE AVE E, STE 319		į	DISADVANTAGED					
Seattle, WA 98102	NONE	PC	GUATEMALAN YOUTH	3,000				
HEARING AND BEYOND			EDUCATE DEAF AND					
201 HAI MUOI TAM THANG BA			IMPAIRED					
HOI AN, QUANG NAM Vietnam	NONE	NC	CHILDREN	6,794				
nor my gormo man viconam	NO.L			-,				
		}						
		i						
Total			▶ 3a	27,816				
b Approved for future payment								
•								
	;							
		•						
Total			▶ 3b					

Program service revenue	(a) Business code				
	COUC	(b) Amount	(c) Exclusion code	(d) Amount	Related or exemp function income (See instructions
		-			, -
	-				· · · · · · · · · · · · · · · · · · ·
	-				
	-				
	-				
Fees and contracts from government agencies · ·		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			
Membership dues and assessments					
nterest on savings and temporary cash investments					
Dividends and interest from secunties					
Net rental income or (loss) from real estate					
Debt-financed property					
Not debt-financed property					
Net rental income or (loss) from personal property \cdots					
Other investment income	•			***************************************	
Gain or (loss) from sales of assets other than inventory					
Net income or (loss) from special events					ļ · · · · ·
Gross profit or (loss) from sales of inventory	•				
Other revenue a					
	_				
i	_				
9	_				
Subtotal Add columns (b), (d), and (e) · · · · · · · · · · · · · · · · · · ·	·				
worksheet in line 13 instructions to verify calculations) rt XVI-B Relationship of Activities to the Explain below how each activity for which in					
accomplishment of the foundation's exempt					ons)
				 	
				 -	

Forn	1 990-PF (2017) CHANCES FOR CHILDREN INTERNATIONAL	81-3552169	9	Pa	ige 1:
Pa	rt XVII Information Regarding Transfers to and Transactions and Relationships With No	oncharitable Ex	empt		
	Organizations				
1	Did the organization directly or indirectly engage in any of the following with any other organization described			Yes	No
	in section 501(c) (other than section 501(c)(3) organizations) or in section 527, relating to political				
	organizations?				1
а	Transfers from the reporting foundation to a noncharitable exempt organization of				l
			4 (4)		177

	ın section	501(c) (other th	nan section 501(c)(3) org	janizations) or in section 527	, relating to p	oolitical					
	organizati	ons?									
а				haritable exempt organization							
										1a(1)	X
	(2) Other	assets · · ·								1a(2)	X
b	Other tran	sactions									
	(1) Sales	of assets to a	noncharitable exempt or	ganization						1b(1)	X
	(2) Purch	ases of assets	from a noncharitable ex	empt organization · · ·						1b(2)	X
	(3) Renta	l of facilities, ed	quipment, or other asset	s						1b(3)	X
										1b(4)	X
										1b(5)	X
		_	ces or membership or fi							1b(6)	X
С	Sharing of	f facilities, equip	ment, mailing lists, othe	r assets, or paid employees						1c	X
d	•		· •	ete the following schedule C	olumn (b) s	hould always :	show the	e fair m	arket		
		•		n by the reporting foundation							
		-		show in column (d) the valu						ď	
(a) Lır		mount involved		aritable exempt organization		scription of trans					ements
<u> </u>	(3/1		(0)								-
									-		
						· -			-		
						 					
	_										
					-						
					+						
					+						
					-						
			. 		 						
				78.7	+						
2a	described	in section 501(c) (other than section 50	n, or related to, one or more t 11(c)(3)) or in section 527?	•	organizations				Yes	X No
b	If "Yes," co	omplete the foll	owing schedule								-
		a) Name of organ	nization	(b) Type of organization	n	ļ	(c) De	scription	n of relati	ionship	
	····					<u> </u>					-
			-			 					
			-			<u> </u>					
						 					
						<u> </u>					
	Under pe	enaties of perjury, I and complete Decla	declare hat I have examined the traffon of preparer (other than to	is return, including accompanying scl expayer) is based on all information o	nedules and sta f which prepare	tements, and to th r has any knowled	e best of m ge	ıy knowle	dge and b	oelief, it is true,	
Sig	n	1 L	1/2	1 1				ſ	May the I	IRS discuss this	s return
Her	e	1 reins	Volher	12/3/18	PRESID	<u>E</u> NT				oreparer shown uctions X Ye	
		ture of officer of tru		Date /	Title	,		<u>_</u> _	1 1		<u> </u>
D	٧ ما	Print/Type prepar	er's name	Preparer's signature		Date		Check	X if	PTIN	
Pai		RICHARD B	OWE	Justan Work	100R	11-26-20	18	self-em	ployed	P001424	15
Pre	parer	Firm's name	► RICHARD BOWE	CPA PC			Firm's Ell	N >			
	Only	Firm's address	► 185 ADAMS ST				Phone no	,			
	· · · y	1	Milton MA 02	186				617	-698-	-0573	

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

Or 990-PF)
Department of the Treasury
Internal Revenue Service

Name of the organization

Schedule of Contributors

▶ Attach to Form 990, Form 990-EZ, or Form 990-PF.

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

OMB No 1545-0047

2017

Employer identification number

CHANC	ES FOR CHILDREN	INTERNATIONA	L	81-3552169
Organi	zation type (check one)			
Filers o	of:	Section:		
Form 9	90 or 990-EZ	501(c)() (enter number) organization	
		4947(a)(1) n	onexempt charitable trust not treated as a private foundation	
		527 political	organization	
Form 9	90-PF	501(c)(3) exc	empt private foundation	
		4947(a)(1) n	onexempt chantable trust treated as a private foundation	
		501(c)(3) tax	able private foundation	
Check	of your organization is cover	red by the Genera	Rule or a Special Rule.	
Note: C), or (10) organizat	ion can check boxes for both the General Rule and a Special	Rule See
Genera	ıl Rule			
		perty) from any one	or 990-PF that received, during the year, contributions totaling contributor. Complete Parts I and II. See instructions for determined to the contributor of the parts I and II.	
Specia	l Rules			
	For an organization descri regulations under sections 13, 16a, or 16b, and that it	s 509(a)(1) and 170 received from any	(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support to D(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), one contributor, during the year, total contributions of the greating of the greating Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete Part VIII, line 1h, or (iii) Form 990-EZ, line 1 Complete Part VIII, line 1h, or (iiii) Form 990-EZ, line 1 Complete Part VIII, line 1h, or (iiiii) Form 990-EZ, line 1 Complete Part VIIII (line 1h, or (iiiiiii) Form 990-EZ, line 1 Complete Part VIII (line 1h, or (iiiiiiiiiiii) Form 990-EZ, line 1 Complete Part VIII (line 1h, or (iiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiii	Part II, line ter of (1)
	contributor, during the year	ar, total contribution	(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from as of more than \$1,000 exclusively for religious, charitable, so revention of cruelty to children or animals. Complete Parts I, II,	ientific,
	contributor, during the year contributions totaled more during the year for an exc General Rule applies to the	ar, contributions ex than \$1,000 If the clusively religious, on this organization be	(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from clusively for religious, charitable, etc., purposes, but no such s box is checked, enter here the total contributions that were recharitable, etc., purpose Don't complete any of the parts unless cause it received nonexclusively religious, charitable, etc., contributions	ceived as the ntributions
990-EZ	, or 990-PF), but it must a	nswer "No" on Par	eneral Rule and/or the Special Rules doesn't file Schedule B (t IV, line 2, of its Form 990, or check the box on line H of its Fo eet the filing requirements of Schedule B (Form 990, 990-EZ, o	orm 990-EZ or on its

Name of organization
CHANCES FOR CHILDREN INTERNATIONAL

Employer identification number

81-3552169

Part I.	Contributors (see instructions) Use duplicate copi	es of Part I if additional space is	needed
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	ED & LORETTA MERROW 9409 LAGOVISTA CT Great Falls, VA 22066	\$ <u>10,000</u>	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	~ (c) Total contributions	(d) Type of contribution
		\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u></u>			Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person

		Federal Su	Federal Supporting Statements	nents	2017 PG01	
Name(s) as shown on return CHANCES FOR CHILDREN INTERNATIONAL					Your Social Security Number 81-3552169	<u> </u>
-	Form 990PF	- Part I	- Line 23 - Other Expenses Schedule	chedule	Statement #103~	
Description	Revenue and expenses	Net investment	Adjusted net income	Charitable purpose		
NH FILING FEE	75	0	75	0		<u></u>
Totals	75	0	75	0		
						-
					•	
]