# SCANNED JUL 3 1 2019

Form ,990

### **Return of Organization Exempt From Income Tax**

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

OMB No 1545-0047

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

	artment of t nal Revenu	the Treasury e Service	► Go to www.i	irs.gov/Fort	n990 for instruction	s and th	e latest in	formation.		Inspection	
Ā	For the	2018 cale	ndar year, or tax year beginn	ning		, 2018, a	nd ending		, 20		
В	Check if a	pplicable	C Name of organization Americ	an Friends			·		D Employ	yer identification number	
$\bar{\Box}$	Address		Doing business as						13-3275989		
$\Box$	Name cha									one number	
$\overline{\Box}$	Initial retu	•	32 7th Street							732-370-3413	
		 √terminated	City or town, state or province,	country, and	ZIP or foreign postal co	de				<del></del>	
$\Box$	Amended		Lakewood, NJ 08701		-			1	<b>G</b> Gross r	receipts \$ 305,27	
$\bar{\Box}$			F Name and address of principal	officer Eli	Shulman			H(a) is this a on		r subordinates? Yes Vo	
		,	address same as C above					1_		es included? Yes No	
$\overline{}$	Tax-exem	ot status	☑ 501(c)(3) ☐ 501	I(c)( )		(a)(1) or	□ 527 <b>(</b> )			a list. (see instructions)	
J	Website:					•	<u></u>	H(c) Group	exemption	number >	
K			Corporation V Trust Ass	sociation	Other ▶	L Yea	r of formation			e of legal domicile	
Р	art I	Summ	<del></del>			<u> </u>		···	1	<u> </u>	
			escribe the organization's n	nission or i	most significant ac	tivities:	The org	anization's i	purpose	is to promote religious	
æ			table needs within the comm								
auc			ding grants to institutions of								
eu			is box ▶ ☐ if the organizati					more than	25% of	its net assets	
Governance			of voting members of the g						3	1	
જ	1		of independent voting mem	_	• •	•	line 1b)		4		
ies	1		nber of individuals employe			•	•		5		
Activities &			nber of volunteers (estimate		•				6		
Act	1		elated business revenue fro		• •	12 .			7a		
			ated business taxable inco				<b>7</b>		7b		
				[4]			$\mathcal{T}$	Prior Ye		Current Year	
Revenue	8 (	Contribut	tions and grants (Part VIII, I		228075	20198					
			service revenue (Part VIII, I		MAY 2 1 20	19   0					
e e		-	nt income (Part VIII, columi	-1 1	3, 4, and 7d)	- 18	?Ⅰ. ┌		107985	10329	
ď			enue (Part VIII, column (A),			nte).	1 . 🗀				
	1		enue—add lines 8 through 1			, ,	e 12)		336060	30527	
			nd similar amounts paid (Pa						364518	25677	
			paid to or for members (Pai				.	<u> </u>	_		
ý	15 5	Salaries, d	other compensation, employ	ee benefits	(Part IX, column (A	), lines 5	i–10)				
Expenses	16a F	Professio	nal fundraising fees (Part I)	K, column (	(A), line 11e)						
ē.	Ь٦	Total fund	draising expenses (Part IX,	column (D)	), line 25) ▶						
ũ	17 (	Other exp	oenses (Part IX, column (A),	lines 11a-	-11d, 11f-24e) .	· · ·			316	21:	
	18 7	otal exp	enses. Add lines 13-17 (mi	ust equal F	Part IX, column (A),	line 25)			364834	256986	
	19 F	Revenue	less expenses. Subtract lin	e 18 from	line 12		🗆		-28774	48290	
es o							Ве	ginning of Cur	rent Year	End of Year	
Net Assets of Fund Balance		otal asse	ets (Part X, line 16)				[		1045796	1094086	
t As	21 7	otal liabi	ılıtıes (Part X, line 26)				[		180000	180000	
홍	22 1	let asset	s or fund balances. Subtra	ct line 21 f	rom line 20 .		· .		865796	914086	
Pa	irt II	Signat	ure Block								
			ry, I declare that I have examined t							my knowledge and belief, it i	
true	e, correct,	and comple	ete Declaration of preparer (other t	than officer) is	s based on all information	on of which	h preparer h	as any knowle	dge	<b>.</b>	
			Shulp-					کے	/14/	119	
Sign		Signa	ature of officer					Date	• <b>'</b>		
He	re	<b>\</b>	E. Jhulmin							- · · · · · · · · · · · · · · · · · · ·	
		Туре	or print name and title					····			
Pa	id	Print/Typ	oe preparer's name	Preparer	r's signature		Date		Check	ıf PTIN	
	eparer								self-emp		
	e Only		ame 🕨					Firm'	s EIN 🕨		
	_	Firm's ac	ddress ►					Phon	е по.		
May	the IRS	discuss	this return with the prepar	er shown a	above? (see instru	ctions)			· · ·	🗌 Yes 🗌 No	
For	Paperwo	rk Reduc	ction Act Notice, see the sep	arate instru	uctions.		Cat No	11282Y		Form 990 (2018	

Form 990					Page
Part I			e Accomplishments a response or note to any line in t	nia Dart III	
1	Briefly describe the o			iis Fait III	
•				in the community. This is done by prov	iding assistance
				tions of Jewish learning and charitable	
2	Did the organization i	ındertake anv sid	unificant program services during t	he year which were not listed on the	
	prior Form 990 or 990			· · · · · · · · · · · · · · · ·	☐ Yes ☑ No
	If "Yes," describe the				
3		cease conduct	ing, or make significant changes	in how it conducts, any program	
	services?				☐ Yes ☑ No
	If "Yes," describe the	•			
	expenses. Section 50	11(c)(3) and 501(d	service accomplishments for each c)(4) organizations are required to it, for each program service reported.	of its three largest program services, report the amount of grants and allowed.	as measured by cations to others
4a		xpenses \$	123,500 including grants of \$	123,500 ) (Revenue \$	)
	Awarded grants to Net	iv Bina, an institu	tion of religious learning in Israel, for	scholarships and support of needy stu	dents.
				·····	
				•••••	
			•••		
,		····			
4b	(Code: ) (E	xpenses \$	133,274 including grants of \$	133,274 ) (Revenue \$	
			nd other expenses for needy families	, and scholarships and tutoring for nee	dy students in
	institutions in the Unite				
				•••••	••
		·			
		·			
	•				
•	••				
•					
•					
4c	Code: ) (E:	xpenses \$	including grants of \$	) (Revenue \$	)
	***************************************				
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Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	~	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	1	
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		v
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		~
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		~
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		~
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		V
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		v
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i>	9		V
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		1
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, Part VI	11a		/
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		~
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		/
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 Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		<u> </u>
е	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 the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		<u> </u>
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		<u> </u>
	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		<u> </u>
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13 14a		<u> </u>
I4a	· · · · · · · · · · · · · · · · · · ·	14a		
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	~	
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	~	
6	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		<u> </u>
7	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 (see instructions)	17		_
8	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		<u></u>
9	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		<u> </u>
20 a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		
	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	990	(2012)
		rom	コフフリ	(∠UI8)

Part	V Checklist of Required Schedules (continued)			
			Yes	No
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	~	
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		
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		,
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year		!	
d	to defease any tax-exempt bonds?	24c 24d	<del> </del>	
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	24U	-	_
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		~
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		,
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		,
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	į	v
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		~
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		V
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		~
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		~
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		~
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		_
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		_
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		~
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		~
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		~
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		~
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		~
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O.	38	v	
Part				
	Check if Schedule O contains a response or note to any line in this Part V	· ·	<u>· · · </u>	
			Yes	No
	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 0  Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	}	]	Ì
	Effet the humber of forms with a find dod in the fat. Effect of in not applicable	ļ		ļ
U	Did the organization comply with backup withholding rules for reportable paymonts to vendors and reportable gaming (gambling) winnings to prize winners?	1c		. oromana <b>s</b>
	reportable garring (garroning) withings to prize without		990	(2018)

Form **990** (2018)

Part	V Statements Regarding Other IRS Filings and Tax Compliance (continued)								
			Yes	No					
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax	المائية المائي	1	13 1 3 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1					
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 2	)[[]	運動	1165					
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b							
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	- J	11274	12/3					
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?								
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O.	3b							
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over,								
	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		~					
b	If "Yes," enter the name of the foreign country: ▶			E AS					
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			pi.					
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		1					
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b	<u>L</u>	~					
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c							
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	Ì							
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a	<u></u>	~					
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or		]						
_	gifts were not tax deductible?	6b	F2 34	1611. Y &					
7	Organizations that may receive deductible contributions under section 170(c).			\$ July 2					
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods		1000						
	and services provided to the payor?	7a		~					
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		<del> </del>					
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was								
	required to file Form 8282?	7c		91M)					
d				<b>/</b>					
e f	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?.	7e 7f		V					
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g							
g h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h	_						
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the		MA	mar.					
0	sponsoring organization have excess business holdings at any time during the year?	8		F-4587.79-					
9	Sponsoring organizations maintaining donor advised funds.	III TO	ESSE A	halisa					
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a	ATTENNESS OF						
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b							
10	Section 501(c)(7) organizations. Enter:			Fig.					
а	Initiation fees and capital contributions included on Part VIII, line 12			d tied					
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:		34.2						
а	Gross income from members or shareholders								
b	Gross income from other sources (Do not net amounts due or paid to other sources								
	against amounts due or received from them.)	100	Killi						
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a							
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12.14							
	Section 501(c)(29) qualified nonprofit health insurance issuers.		ST						
а	Is the organization licensed to issue qualified health plans in more than one state?	13a	mh.or hould d	S#1713.4					
	Note. See the instructions for additional information the organization must report on Schedule O.	Market A							
	Enter the amount of reserves the organization is required to maintain by the states in which								
	the organization is licensed to issue qualified health plans								
	Enter the amount of reserves on hand	<b>强温温</b>	77.48.48	INIT!					
	Did the organization receive any payments for indoor tanning services during the tax year?	14a							
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.	14b							
	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or								
	excess parachute payment(s) during the year?	15		<del>V</del>					
	If "Yes," see instructions and file Form 4720, Schedule N.	ALONG DAYS	1.5						
	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16	Post Carl	<del>V</del> V					
	If "Yes," complete Form 4720, Schedule O.	2 TET	性空候制	FERRE					

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Part				
	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O.		struct	ions.
	Check if Schedule O contains a response or note to any line in this Part VI	<u> </u>	<u>-:</u> -	<u>.                                    </u>
Sect	ion A. Governing Body and Management			
4	Enter the number of voting members of the governing hady at the and of the tay year	n <u>at 'sods</u>	Yes	No 2000
1a	Enter the number of voting members of the governing body at the end of the tax year	<b>1</b>		
	if the governing body delegated broad authority to an executive committee or similar			
	committee, explain in Schedule O.			1986 13 1974 13
b	Enter the number of voting members included in line 1a, above, who are independent . 1b	3		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with			
	any other officer, director, trustee, or key employee?	2	~	
3	Did the organization delegate control over management duties customarily performed by or under the direct			
	supervision of officers, directors, or trustees, or key employees to a management company or other person?	3		~
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		V
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5	<u> </u>	-
6	Did the organization have members or stockholders?	6	<del> </del> -	1
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		~
Ь	Are any governance decisions of the organization reserved to (or subject to approval by) members,	1		
•	stockholders, or persons other than the governing body?	7b	**************************************	65535
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:	The state of		
а	The governing body?	8a	1.14.12.2.7.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.	
b	Each committee with authority to act on behalf of the governing body?	8b		1
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at			
	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		~
Sect	ion B. Policies (This Section B requests information about policies not required by the Internal Rever	nue C	ode.)	
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		~
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	~	
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		~
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		-
C	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c		
13	Did the organization have a written whistleblower policy?	13		~
14	Did the organization have a written document retention and destruction policy?	14		V
15	Did the process for determining compensation of the following persons include a review and approval by	15 A. 15 A.	* / just	<b>科为</b> 市
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	45		
а	The organization's CEO, Executive Director, or top management official	15a		~
b	Other officers or key employees of the organization	15b		1
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a	255	<b>/</b>
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its	層謝		
	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b		
Secti	on C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ▶			
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable), 990, and 990-			
	(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.  Own website Another's website Upon request Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of int financial statements available to the public during the tax year.	erest p	olicy	, and
20	State the name, address, and telephone number of the person who possesses the organization's books and re	cords!	<b>&gt;</b>	
	Eli Shulman, 32 7th Street, Lakewood, NJ 08701 732-370-3413			

	(2018)	

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

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 no	r any relate	d org	anız	zatio	on c	ompe	ensa	ated any currer	nt officer, directo	or, or trustee.	
(A) Name and Title	(B) Average hours per week (list any	and a direction tracted						(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other	
	hours for related organizations below dotted line)	Individua or direct	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations	
(1) Abraham Shulman	0					<u> </u>					
President		1	l					0	o		0
(2) Eli Shulman	1										_
Vice President		~						0	0		0
(3) Jacob Shulman	0	~						0	0		 o
(4) Rivka Shulman	2										_
Secretary		Ì						0	0		0
(5)											
(6)											_
(7)									-		
(8)											_
(9)								-			
(10)									- 1		_
(11)								-			_
(12)						-					_
(13)								_			_
(14)											_

	VII Section A. Officers, Directors, Trust  (A)  Name and title	(B) Average	(C) Position (do not check more than box, unless person is bo officer and a director/tru					one n an	(D) Reportable compensation	(E) Reportable compensation from	(F) Estimated amount of
		week (list any hours for related organizations below dotted line)	Individua or directo	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
(15)											
(16)											<u> </u>
(17)											
(18)				$\dashv$				-			
(19)			-	$\dashv$				_			
(20)			_	4		_					
						_					
(22)											
(23)				$\dashv$		1					<del></del>
(24)				1			-	_			
(25)					$\dashv$	-		_			· · · · · · · · · · · · · · · · · · ·
c 1	Sub-total .  Total from continuation sheets to Part  Total (add lines 1b and 1c)							<b>&gt;</b>	0	0	0
	Total number of individuals (including but reportable compensation from the organi		to the	ose	listi	ed a	bove	) wh	no received mo	ore than \$100,00	0 of
	Did the organization list any former off employee on line 1a? If "Yes," complete S							mpl	loyee, or high	est compensate	Yes No d
C	For any individual listed on line 1a, is the organization and related organizations on an individual of the control of the con										
	Did any person listed on line 1a receive or for services rendered to the organization?									ation or individua	5 2
	B. Independent Contractors		•								
c	Complete this table for your five highest on compensation from the organization. Represers.										
_	(A) Name and business addr	ess					_		(B) Description of se	rvices	(C) Compensation
	otal number of independent contractor	s (includin	g but	no	t lu	nite	d to	the	ose listed abo	ve) who	
	eceived more than \$100,000 of compensa								0		Form <b>990</b> (2018)

Par	t VIII	Statement of Reve					-	_
		Check if Schedule C	contains a res	ponse or note t			<u></u>	<u> </u>
	THE STATE				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
nts	1a	Federated campaigns	s, <u>1a</u>					
· <u>E</u> E	b	Membership dues .	<u>1b</u>					
s, C Am	C	Fundraising events .	1c					
ar /	d	Related organizations	s 1d					
S.E	e	Government grants (cor	ntributions) 1c					
P.S.	f	All other contributions, g	ifts, grants,					
<u> </u>		and similar amounts not inc	cluded above 1f	201984				
Contributions, Giffs, Grants and Other Similar Amounts	g	Noncash contributions includ	ted in lines 1a-1f \$					
g Co	h	Total. Add lines 1a-1	r <u>. '</u>	▶	201984			
e				Business Code	1 day beliands and based	THE WALLS OF THE SERVICE OF THE SERV	Control of the state of the sta	
Ven	2a			,				
æ	b	,						
ice /ice	С					[		
Ser	d							
Ë	e	••••						
Program Service Revenue	f	All other program ser	vice revenue .	L				
<u> </u>	g	Total. Add lines 2a-2					HE DE SWEETER	ALLEGARED TO A
	3	Investment income		_				
		and other similar amo	•		103292	103292		
-	4	Income from investmen	· ·	ond proceeds >		<u> </u>		<u> </u>
	5	Royalties	(i) Real	(ii) Personal	Zerzenelde dengeren, weden	Protebbel Sapuras 12/17 B.Ca.)	TERREPERATION CONTROL TO A PROBLEM PA	Triviv is promiss leads which is in
	_	•	(I) Neal	(II) Personal				
	6a	Gross rents	<del> </del>	<del></del>				
	b	Less: rental expenses	·-····································					
	C	Rental income or (loss)	L	L	はなってきながは歴史自作が		   大統計 大学社会社会社会社会社会社会社会社会社会社会社会社会社会社会社会社会社会社会社会	WITH A STATE OF THE STATE OF TH
	_ d	Net rental income or (	(i) Secunties	(ii) Other	i dakaran dari kilantak b	Therpreses brokers for the	ABILEAGAT TORRESPONDE AT ALL REALITY	-Bygilingan-Albanyala sayara
	7a	Gross amount from sales of	(,) 0000711100	(1) 0 (1) 01				
		assets other than inventory						
	Ь	Less cost or other basis and sales expenses .						
	c	Gain or (loss)						
	d	Net gain or (loss) .		<b></b>	passarionerrational behavioration and m	CANCEL AND CONTRACT OF STATE O	Level and and the control of the con	Zilo U DA Josef (TAISTAN SANSINI LIAM
	"	riet gain or (1055) .		· · · · · · · · · · · · · · · · · · ·				
Re	8a	Gross income from fu	indraisino			Michiga		
en (		events (not including \$						
ě		of contributions reporte	ed on line 1c).	,		46.25		
		See Part IV, line 18	a					
Other Reve	ь	Less: direct expenses	<b>b</b>					
O	С	Net income or (loss) fi		events . >		MARKET STATES		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	9a	Gross income from ga	ming activities.					BANKING AND AND
		See Part IV, line 19 .	a					
•	b	Less. direct expenses	<b>b</b>		iinidagaanilaanilaanilaanilaanilaanilaanilaan			
	С	Net income or (loss) fi	rom gaming acti	vities ►				
	10a	Gross sales of in	ventory, less			WIDTH HAR		A CHARLES OF THE LOCAL PROPERTY OF THE PARTY
		returns and allowance	95 <b>a</b>					
	b	Less: cost of goods se	old <b>b</b>					
	С	Net income or (loss) fr	rom sales of inve					
		Miscellaneous R	evenue	Business Code	39.2 等數据學系統	是是學學學學	<b>探默然理解</b>	种的形式和对对
	11a						,	
	b							
	С				_ <del></del>			
	d	All other revenue .	;	L		product holy by Julian on the said of the said.	HRO SHINES HAVE AND ASSESSED AND ASSESSED AND ASSESSED AND ASSESSED ASSESSED AND ASSESSED ASSESSEDA ASSESSED ASSESSED ASSESSED ASSESSED ASSESSED ASSESSED ASSESSEDA ASSESSED ASSESSED ASSESSED ASSESSED ASSESSED ASSESSED ASSESSEDANCE ASSESSED ASSESSED ASSESSED ASSESSED ASSESSED ASSESSED ASSESS	in figure of which when the first of the contract of the contr
	е	Total. Add lines 11a-		🟲			RESTRUCTION OF THE SECOND	活性操作并指数素制
	12	Total revenue See in	STRUCTIONS	<b>▶</b> 1	305276	103292	1	

ional Expenses

Section	on 501(c)(3) and 501(c)(4) organizations must co	mplete all columns .	All other organızatıo	ns must complete c	olumn (A).
	Check if Schedule O contains a respon	nse or note to any I	ine in this Part IX		
	ot include amounts reported on lines 6b, 7b, b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	23524	23524		
2	Grants and other assistance to domestic individuals. See Part IV, line 22	109750	109750	A STATE OF THE PARTY OF THE PROPERTY OF THE PR	Control of the contro
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16	123500	123500		
4 5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees				
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 8	Other salaries and wages Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9 10	Other employee benefits				
11	Fees for services (non-employees):		'		
a	Management				
b	Legal				
G C	Accounting				
d e	Lobbying				
f	Investment management fees		子的分子(mint##188##271 m) 世間的	ATHELY MANY SET OF ALL CANCELS	
g	Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)				
12	Advertising and promotion				
13	Office expenses	212		212	
14	Information technology				
15	Royalties				
16	Occupancy				<u> </u>
17 18	Payments of travel or entertainment expenses				
40	for any federal, state, or local public officials				<del> </del>
19 20	Conferences, conventions, and meetings . Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization .			-	
23	Insurance				<del></del> -
24	Other expenses. Itemize expenses not covered 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 0.)				
а					
b					
C					
d					
e	All other expenses	25/00/	05/77		
25 26	Total functional expenses. Add lines 1 through 24e  Joint costs. Complete this line only if the	256986	256774	212	
26	organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here   if following SOP 98-2 (ASC 958-720)				

Part X	Balance	Sheet
--------	---------	-------

2 Savings and temporary cash investments 97315 2 988726 3 Pledges and grants receivable, net 4 4 Accounts receivable, net 4 5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L 6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(f)(3)(B), and contributing employees and sponsoring organizations of section 501(c)(g) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L 7 Notes and loans receivable, net 7 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10 Less: accumulated depreciation 10b 10c 11 Investments—publicly traded securities 11 Investments—bublicly traded securities 12 Investments—other securities. See Part IV, line 11 12 Investments—bublicly traded securities 11 12 Investments—program-related. See Part IV, line 11 13 Investments—program-related. See Part IV, line 11 15 15 15 16 104 16 16 Total assets. Add lines 1 through 15 (must equal line 34) 1045796 16 1094086 17 Accounts payable and accrued expenses 118 19 1045796 16 1094086 18 19 1045796 16 1094086 18 1045796 16 1094086 18 1094086 19 1045796 16 1094086 19 1045796 10			Check if Schedule O contains a response or note to any line in this Pa	art X		
2   Savings and temporary cash investments   927315   2   988721   3   Pedegos and grants receivable, net   4   Accounts receivable from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L   5   Complete Part II of Schedule L   5   Complete Part II of Schedule L   5   Complete Part II of Schedule L   7   7   Notes and loans receivable, net   10a					,	
a Pledges and grants receivable, net  4 Accounts receivables from current and former officers, directors, trustees, key employees, and highest compensated employees.  Complete Part II of Schedule L  6 Loans and other receivables from other disqualified persons (as defined under section 4958(g)(I)), persons described in section 4958(g)(I)), encounted part of Schedule L  7 Notes and loans receivable, net inventories for sale or use Preparations (se instructions). Complete Part II of Schedule L  8 Inventories for sale or use Preparations of section 5016(g) voluntary employees' beneficiary organizations for sale or use Preparations (se instructions). Complete Part II of Schedule L  8 Inventories for sale or use Preparations of section 5016(g) voluntary employees' beneficiary organizations for sale or use Preparations (se instructions). Complete Part II of Schedule D  10a		1	——————————————————————————————————————	118481	1	105357
4 Accounts receivables from current and former officers, directors, trustees, key employees and highest compensated employees. Complete Part II of Schedule L  6 Loans and other receivables from current and former officers, directors, trustees, key employees and highest compensated employees. Complete Part II of Schedule L  7 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(II), persons described in section 4958(g)(III), persons described in section		1		927315	2	988729
tustess, key employees, and highest compensated employees. Complete Part II of Schedule L  6 Loans and other receivables from other disqualified persons (as defined under section 4959(II)), person described in section 4959(II)), person described in section 4959(II) person described in 4959(II) person described in 4959(II) person described in 4959(III) person described in 4959(IIII) person described in 4959(IIIII) person described in 4959(IIIII) person described in 4959(IIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIII		3			3	
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organizations (see instructions), Complete Part II of Schedule L		5	trustees, key employees, and highest compensated employees.		5	
7   Notes and loans receivable, net   7   8   Inventories for sale or use   8   9   Prepaid expenses and deferred charges   9   10a   10c   1	S	6	4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary	Control of the Contro		
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Prepad expenses and deferred charges   9	As	1	Inventories for sale or use		<u> </u>	
10a		-				
b Less: accumulated depreciation			Land, buildings, and equipment: cost or			
11   Investments — publicly traded securities   11   12   10   12   10   13   13   13   14   15   14   15   15   15   15   15		ь		00-00-02-10-00-00-00-00-00-00-00-00-00-00-00-00-	100	
12   Investments — other securities. See Part IV, line 11   12   13   Investments — program-related. See Part IV, line 11   13   14   Intangble assets   14   15   15   15   15   15   16   1094086   17   Accounts payable and accrued expenses   17   17   18   Grants payable   18   18   19   20   18   20   20   21   22   23   24   24   25   23   24   25   25   26   26   26   27   28   29   27   28   27   28   27   28   27   28   27   28   27   28   29   27   28   27   28   29   27   28   27   28   29   27   28   27   28   29   27   28   29   27   28   29   27   28   29   27   28   29   27   28   29   28   29   27   28   29   28   29   28   29   29   29			· · · · · · · · · · · · · · · · · · ·			
13		1				
14 Intangible assets		13				
15 Other assets. See Part IV, line 11 16 Total assets. Add lines 1 through 15 (must equal line 34) 17 Accounts payable and accrued expenses 18 Grants payable 19 Deferred revenue 20 Tax-exempt bond liabilities 21 Escrow or custodial account liability. Complete Part IV of Schedule D 22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 23 Secured mortgages and notes payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17–24). Complete Part X of Schedule D 26 Total liabilities. Add lines 17 through 25 27 Unrestricted net assets 28 Temporarily restricted net assets 29 Permanently restricted net assets 30 Capital stock or trust principal, or current funds 31 Paid-in or capital surplus, or land, building, or equipment fund 31 Paid-in or capital surplus, or land, building, or equipment fund 31 Paid-in or capital surplus, or land, building, or equipment fund 31 Paid-in or capital surplus, or land, building, or equipment fund 32 Retained earnings, endowment, accumulated income, or other funds 33 Total liabilities and net assets/fund balances 34 Total liabilities and net assets/fund balances 36 Total liabilities and net assets/fund balances 37 Total liabilities and net assets/fund balances 38 Total liabilities and net assets/fund balances 39 Total liabilities and net assets/fund balances 30 Total liabilities and net assets/fund balances		14			-	
16 Total assets. Add lines 1 through 15 (must equal line 34)		15				
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19 Deferred revenue 20 Tax-exempt bond liabilities 21 Escrow or custodial account liability. Complete Part IV of Schedule D 22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 23 Secured mortgages and notes payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D 25 Organizations that follow SFAS 117 (ASC 958), check here ▶ □ and complete lines 27 through 29, and lines 33 and 34.  27 Unrestricted net assets		17				
19 Deferred revenue 20 Tax-exempt bond liabilities 21 Escrow or custodial account liability. Complete Part IV of Schedule D 22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 23 Secured mortgages and notes payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D 25 Organizations that follow SFAS 117 (ASC 958), check here ▶ □ and complete lines 27 through 29, and lines 33 and 34.  27 Unrestricted net assets		18	Grants payable		18	
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22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		20			20	
trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L  23 Secured mortgages and notes payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D  26 Total liabilities. Add lines 17 through 25  Corganizations that follow SFAS 117 (ASC 958), check here  and complete lines 27 through 29, and lines 33 and 34.  27 Unrestricted net assets 28 Temporarily restricted net assets 29 Permanently restricted net assets 29 Permanently restricted net assets. 29 Permanently restricted net assets. 29 Permanently restricted net assets. 29 Criganizations that do not follow SFAS 117 (ASC 958), check here  and complete lines 30 through 34.  30 Capital stock or trust principal, or current funds. 31 Paid-in or capital surplus, or land, building, or equipment fund. 32 Retained earnings, endowment, accumulated income, or other funds 33 Total net assets or fund balances 34 Total liabilities and net assets/fund balances 36 1045796 37 1045796 38 1094086		21	Escrow or custodial account liability. Complete Part IV of Schedule D .		21	
23 Section finitegies and notes payable to unrelated third parties	es	22		STSPLINE TERM	<b>弹弹</b>	
23 Section finitegies and notes payable to unrelated third parties	≣	,				
23 Section finitegies and notes payable to unrelated third parties	iab				22	
Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17–24). Complete Part X of Schedule D  25  26 Total liabilities. Add lines 17 through 25  Organizations that follow SFAS 117 (ASC 958), check here ▶ □ and complete lines 27 through 29, and lines 33 and 34.  27 Unrestricted net assets	-				23	
parties, and other liabilities not included on lines 17–24). Complete Part X of Schedule D  26 Total liabilities. Add lines 17 through 25				180000	24	180000
Total liabilities. Add lines 17 through 25  Organizations that follow SFAS 117 (ASC 958), check here □ and complete lines 27 through 29, and lines 33 and 34.  Unrestricted net assets		25	parties, and other liabilities not included on lines 17-24). Complete Part X		25	
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34 Total liabilities and net assets/fund balances	ses		Organizations that follow SFAS 117 (ASC 958), check here ▶ □ and			
34 Total liabilities and net assets/fund balances	ğ	27		865796	27	914086
34 Total liabilities and net assets/fund balances	<u>ਛ</u>	28				
34 Total liabilities and net assets/fund balances	ᅙᅵ	29				
34 Total liabilities and net assets/fund balances	or Fur		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ □ and			
34 Total liabilities and net assets/fund balances	į	30	Capital stock or trust principal, or current funds	A STATE OF THE STA	30	Company of the College of the Colleg
34 Total liabilities and net assets/fund balances	SSe	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
34 Total liabilities and net assets/fund balances	ا≱				32	
	S S	33		865796	33	914086
		34	Total liabilities and net assets/fund balances	1045796	34	

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Page	ı	4

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Par	t 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		30	5276
2	Total expenses (must equal Part IX, column (A), line 25)	2		25	6986
3	Revenue less expenses. Subtract line 2 from line 1	3		4	8290
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		86	5796
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line				
	33, column (B))	10		91	4086
Part	XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII			• •	
_			1 Mar Marrier 1	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," exp	olain in		MA	
_	Schedule O.		1177		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? .		2a	arritan, and m	<b>√</b>
	If "Yes," check a box below to indicate whether the financial statements for the year were comp	iled or			
	reviewed on a separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis			المنتشنة المنتشقة	
b	Were the organization's financial statements audited by an independent accountant?		2b	7(" , 7/6	<b>√</b>
	If "Yes," check a box below to indicate whether the financial statements for the year were audited	d on a			
	separate basis, consolidated basis, or both.				
	Separate basis Consolidated basis Both consolidated and separate basis			N 12 2	
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for over of the audit, review, or compilation of its financial statements and selection of an independent account				
	If the organization changed either its oversight process or selection process during the tax year, exp		2c	F	
	Schedule O	nain in			
20			-	ir sor   E	\$455.II
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set f the Single Audit Act and OMB Circular A-133?	ortn in	1 1		.,
ь	If "Yes," did the organization undergo the required audit or audits? If the organization did not under	 طاء هـ	3a		<u></u>
D	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such au		3ь	- 1	
	required addit of addits, explain why in ochedule o and describe any steps taken to undergo such ad	uito.		990 (	(2018)
			rom	330 (	(2010)

## SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service **Public Charity Status and Public Support** 

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

► Attach to Form 990 or Form 990-EZ.

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

OMB No 1545-0047

Open to Public Inspection

Name of the organization Employer identification number American Friends of Yad Layeled 13-3275989 Reason for Public Charity Status (All organizations must complete this part.) See instructions. Part I 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). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).) 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, 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 An organization that normally receives: (1) more than 331/3% 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 331/3% 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). 12 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. Enter the number of supported organizations . Provide the following information about the supported organization(s). (iv) is the organization (i) Name of supported organization (a) EIN (III) Type of organization (v) Amount of monetary (vi) Amount of listed in your governing (described on lines 1-10 support (see other support (see document? above (see instructions)) instructions) instructions) Yes No (A) (B) (C) (D) (E)

Total

Part	Support Schedule for Organiz	ations Descr	ibed in Sect	ions 170(b)(1	)(A)(iv) and	170(b)(1)(A)(v	j)
	(Complete only if you checked t						alify under
	Part III. If the organization fails to	o qualify unde	er the tests lis	ted below, p	lease comple	ete Párt III.)	
	on A. Public Support						
	dar year (or fiscal year beginning in)	(a) 2014	<b>(b)</b> 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")			,			
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3		1	1			
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						•
6	Public support. Subtract line 5 from line 4		MAZINE NE				
Secti	on B. Total Support	Translatence miracuse corr	/	4-9 cur cum are made discission into	ARCHITECTURE	COMPLET AND REGION WOODS, MALE	<u> </u>
Calen	dar year (or fiscal year beginning in) 🕨	(a) 2014	<b>(b)</b> 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
7	Amounts from line 4						
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources		,				
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI)	,					
11	Total support. Add lines 7 through 10	<b>禁护行规则</b>			STATE OF THE PARTY	THE REPORT OF THE PARTY OF THE	
12	Gross receipts from related activities, etc					12	
13	First five years. If the Form 990 is for the organization, check this box/and stop he				# .	ear as a section	
Sacti	on C. Computation of Public Suppor			<del></del>		· · · · ·	<u> </u>
14	Public support percentage for 2018 (line			1 column (fl)		14	
15	Public support percentage from 2017 Sch		•	1, 001011111 (1))		15	<del></del>
16a	331/3% support test 2018. If the organi			on line 13. ar	nd line 14 is 33		
	box and stop here. The organization qua						▶ □
b	331/3% support test—2017. If the organithis box and stop here. The organization	zation did not	check a box o	n line 13 or 16		or mo %در 33 <sup>1</sup> 33 is	ore, check ► □
17a	10%-facts-and-circumstances test—20 10% or more, and if the organization me Part VI how the organization meets the " organization	eets the "facts-	and-circumsta	ances" test, ch	eck this box a	ind stop here.	Explain in
b	10%-facts-and-circumstances test—20 15 is 10% or more, and if the organiza Explain in Part VI how the organization in supported organization	ation meets the	e "facts-and-c	ircumstances"	test, check t	his box and s	top here.
18	Private foundation. If the organization di instructions	d not check a t	oox on line 13,	16a, 16b, 17a	, or 17b, checl	k this box and s	see
	mod double	· · · · ·		<u> </u>	Sch	edule A (Form 990	or 990-EZ) 2018
						1	

#### 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.)

Secti	ion A. Public Support	y diladi tilo tol	sto notou bon	ow, pioaso oc	mpiete i art		
Caler	idar year (or fiscal year beginning in)	(a) 2014	<b>(b)</b> 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1	Gifts, grants, contributions, and membership fees			,			
	received. (Do not include any "unusual grants")	116101	127850	194160	228075	201984	868170
2	Gross receipts from admissions, merchandise					_	
	sold or services performed, or facilities furnished in any activity that is related to the	1					
	organization's tax-exempt purpose						
3	Gross receipts from activities that are not an						
	unrelated trade or business under section 513					į	
4	Tax revenues levied for the						
	organization's benefit and either paid to						
	or expended on its behalf			L			
5	The value of services or facilities					,	
	furnished by a governmental unit to the						
	organization without charge	ļ					
6	Total. Add lines 1 through 5	116101	127850	194160	228075	201984	868170
7a	Amounts included on lines 1, 2, and 3	1				ŀ	
	received from disqualified persons .						<del></del>
b	Amounts included on lines 2 and 3						
	received from other than disqualified					'	,
	persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
_	·			<del></del>			
С 8	Add lines 7a and 7b	がた。 株式では、 またした。	era communication	reighten i sielswille	to the wholl bear	15/95/3#1 ELSCS#816/C	
•	line 6.)						868170
Secti	on B. Total Support	And at Fifthern Co.	en acceptable - en aceptable	She - he becare	(2年) まった。(4年) (1年) (1年) (1年) (1年) (1年) (1年) (1年) (1	Charles Stars States	
Calen	dar year (or fiscal year beginning in)	(a) 2014	<b>(b)</b> 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
9	Amounts from line 6	116101	127850	194160	228075	201984	868170
10a	Gross income from interest, dividends,						
	payments received on securities loans, rents,					į	
	royalties, and income from similar sources .	63284	43957	50955	107985	103292	369473
b	Unrelated business taxable income (less	[			-		
	section 511 taxes) from businesses				i		
	acquired after June 30, 1975						
С	Add lines 10a and 10b	63284	43957	50955	107985	103292	369473
11	Net income from unrelated business						
	activities not included in line 10b, whether	1					
40	or not the business is regularly carried on	<u> </u>	<del></del>				<del></del>
12	Other income. Do not include gain or loss from the sale of capital assets	ļ (			ļ		
	(Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11,	<del></del>					
	and 12.)	179385	171807	245115	336060	305276	1237643
14	First five years. If the Form 990 is for the	ne organization					
	organization, check this box and stop he	-			•		
Section	on C. Computation of Public Suppor				<del>- 4.</del>		
15	Public support percentage for 2018 (line 8	3, column (f), di	vided by line 1	3, column (f))		15	70.15 %
16	Public support percentage from 2017 Sch	nedule A, Part II	I, line 15 .	<u></u>	<u> </u>	16	72.52 %
Section	on D. Computation of Investment In						
17	Investment income percentage for 2018 (					17	29.85 %
18	Investment income percentage from 2017					18	27.48 %
19a	331/3% support tests—2018. If the organ						
	17 is not more than 331/3%, check this box		<del>-</del>			-	_
b	331/3% support tests—2017. If the organiz						•
	line 18 is not more than 331/2%, check this l		•	•		• •	
20	Private foundation. If the organization di	u not check a b	ox on line 14,	19a, or 19b, c	NECK THIS DOX 8	ana see instruc	tions 🕨 🗌

#### 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 (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more 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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	10b		

Part	Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?	學与[44] 第150章		
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	144	門物
ь	A family member of a person described in (a) above?	11b	-	
С	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		
Sect	ion B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to	13月 日本大学 14月 日本民央2	が作品	THE ST
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the		湖區	
	tax year? If "No," describe in <b>Part VI</b> how the supported organization(s) effectively operated, supervised, or	がない当	K	
	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.		基础	
		<b>1</b>	er-ist ii	misabi
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 <b>Part VI</b> how providing such benefit carried out the purposes of the supported organization(s) that operated,		<b>377</b>	
	supervised, or controlled the supporting organization.	2	il.EF	
Secti	ion C. Type II Supporting Organizations	1 2		
-	ion or type in outper ining organizations		Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			J. E.
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		
Secti	ion D. All Type III Supporting Organizations			
		86 87 - 4 S-	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			77
	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	E-150 S	RATS	Districts
_	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2	reasil'	Linguis
3	By reason of the relationship described in (2), did the organization's supported organizations have a	绿枫	NEE N	WAR I
	significant voice in the organization's investment policies and in directing the use of the organization's	<b>Big</b>		
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		
Secti	on 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 year (see	instruc	ctions	s).
a	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.	/ !		· \
C	The organization supported a governmental entity. Describe in Part VI how you supported a government entity			
2	Activities Test Answer (a) and (b) below.	A.A.J.	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 <b>Part VI identify</b>		排變	频期
	those supported organizations and explain how these activities directly furthered their exempt purposes,	Tine.	思羅	
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a	Proposition.	E-P-L135(1), E-15
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more		P AND	<u> </u>
	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	語門		選組
	activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer (a) and (b) below.		图刷	阿爾
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
	trustees of each of the supported organizations? Provide details in Part VI.	3a		Data granes
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each		Diff.	
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Org	gan	izations	
1 Check here if the organization satisfied the Integral Part Test as a qualifying instructions. All other Type III non-functionally integrated supporting organ			
Section 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		
Section 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>b</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		
e Discount claimed for blockage or other factors (explain in detail in Part VI):			
2 Acquisition indebtedness applicable to non-exempt-use assets	2		
3 Subtract line 2 from line 1d.	3		
4 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).	4		-
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6 Multiply line 5 by .035.	6		
7 Recoveries of prior-year distributions	7	_	
8 Minimum Asset Amount (add line 7 to line 6)	8		
Section C—Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1	<b>注题的记录到了经验的特殊的</b>	
2 Enter 85% of line 1.	2	KINAK SENECEKWEKTOTEK	
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3	类型。这种是特别的原则	
4 Enter greater of line 2 or line 3.	4		
5 Income tax imposed in prior year	5	<b>"我是一种的心理的是我</b> "	
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 instructions)			organization (see

Part	1 Type III Non-Functionally Integrated 509(a)(3	3) Supporting Organ	izations (continued)	
Sect	ion D-Distributions		<del></del>	Current Year
1	Amounts paid to supported organizations to accomplish	exempt purposes		
2	Amounts paid to perform activity that directly furthers exe organizations, in excess of income from activity	empt purposes of suppo	orted	
3	Administrative expenses paid to accomplish exempt purp	oses of supported orga	anizations	
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.			
 	Distributions to attentive supported organizations to whic (provide details in <b>Part VI</b> ). See instructions.	th the organization is res	sponsive	
9	Distributable amount for 2018 from Section C, line 6			<u> </u>
10	Line 8 amount divided by line 9 amount			
Secti	ion E—Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2018	(iii) Distributable Amount for 2018
1	Distributable amount for 2018 from Section C, line 6	計劃時至短頭的結構開於	<b>克克斯斯斯斯斯斯斯斯斯斯斯斯斯斯斯斯斯斯斯斯斯斯斯斯斯斯斯斯斯斯斯斯斯斯斯</b>	
2	Underdistributions, if any, for years prior to 2018 (reasonable cause required—explain in <b>Part VI</b> ). See instructions.			
3	Excess distributions carryover, if any, to 2018	AS THE WAY TO SEE THE TOP TO SEE THE	Parting the same	能视的经验科学经验
а	From 2013	ATTENDED TO MINISTER FOR		
b	From 2014	TARREST TO THE		DENTE TRANSPORTED TO
c	From 2015	<b>你还是是这里们的</b> 我还是	GREET BURNESSEE	PACESTE SIMPLES
d	From 2016	<b>医疗探查</b> 了。1955年195	The Control of the Co	PRESIDENT CONTROL
e	From 2017			
f	Total of lines 3a through e		<b>为不是我们是不过这个话</b>	ar markaring
	Applied to underdistributions of prior years	<b>医对邻非常证常和的</b>		
h	Applied to 2018 distributable amount	不是認識的學習情報的影響時	<b>建筑是2016年新年</b> 2016年	
<u>i_</u>	Carryover from 2013 not applied (see instructions)		TO THE PROPERTY OF THE PARTY OF	awing kanalang kanal
_ <u>j</u>	Remainder. Subtract lines 3g, 3h, and 3i from 3f.		REPRESENTATION OF THE PROPERTY	的影響。如此學科學的學科學
4	Distributions for 2018 from			
	Section D, line 7:			TALKE SAID OF SAID
	Applied to underdistributions of prior years		The second of the Landstone of	
b	Applied to 2018 distributable amount		CONTRACTOR OF THE PARTY OF THE	which the transfer of the party
<u>c</u>	Remainder Subtract lines 4a and 4b from 4.	the second start, and he includes the many property of		
5	Remaining underdistributions for years prior to 2018, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in <b>Part VI.</b> See instructions.			
6	Remaining underdistributions for 2018. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.			
7	Excess distributions carryover to 2019. Add lines 3j and 4c.			
8	Breakdown of line 7.	<b>医腹部部外外侧部</b>	Activity of the factor of the	
a	Excess from 2014			
b	Excess from 2015			
С	Excess from 2016			
d	Excess from 2017	特認為對於政治學	<b>直接投資的企業的</b>	
e	Excess from 2018			

Page	8

Part VI	Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)
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#### **SCHEDULE F** (Form 990)

#### Statement of Activities Outside the United States

OMB No 1545-0047 2018

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

▶ Go to www.irs.gov/Form990 for instructions and the latest information. Name of the organization

Employer Identification number 13-3275989

American Friends of Yad Layeled General Information on Activities Outside the United States. Complete if the organization answered "Yes" on Part I Form 990, Part IV, line 14b. For grantmakers. Does the organization maintain records to substantiate the amount of its grants and 1 other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ✓ Yes 
☐ No For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States. Activities per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.) (c) Number of (b) Number (d) Activities conducted in the (e) If activity listed in (d) is (f) Total (a) Region employees. a program service, describe specific type of of offices in region (by type) (such as, expenditures for agents, and independent the region fundraising, program services, and investments service(s) in the region in the region investments, grants to recipients contractors in the region located in the region) student scholarships (1) Middle East 0 0 Grants to recipients 123500 (2) (3) (4) (5) (6) (7) (8) (9) (10)(11)(12)(13)(14)(15) (16)(17)123500 За Subtotal . . . . . . Total from continuation sheets to Part I . . . . 123500 rethanguerrendikteri

c Totals (add lines 3a and 3b)

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. Part II

٠ (																	
(i) Method of valuation (book, FMV, appraisal, other)														-		-	
(h) Description of noncash assistance																ax-exempt ▶	<b>A</b>
(g) Amount of noncash assistance																that are recognized as charities by the foreign country, recognized as tax-exempt ed a section 501(c)(3) equivalency letter	
(f) Manner of cash disbursement	123,500 wire transfers	-				-										s by the foreign cour ncy letter	
(e) Amount or cash grant	123,500															that are recognized as charities by the fed a section 501(c)(3) equivalency letter	
(d) Purpose of grant	student scholarships	,													-	ted above that are recc has provided a section	ities
(c) Region	Middle East														:	Enter total number of recipient organizations listed above by the IRS, or for which the grantee or counsel has provid	Enter total number of other organizations or entities
(b) IRS code section and EIN (if applicable)																mber of recipie for which the c	mber of other c
(a) Name of organization						$\frac{1}{2}\left \frac{1}{2}\frac{1}{2}\frac{1}{2}\frac{1}{2}\right  = \frac{1}{2}\left(\frac{1}{2}\right)$					(42)					Enter total nur by the IRS, or	Enter total nul
-	(i)	(2)	(0)	9.	(2)	(9)	(6)	<u>(</u>	(6)	((10)	(12)	(03)	((14)	((15)	(46)	0 0	က

Page 3

Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16. Part III can be duplicated if additional space is needed. Schedule F (Form 990) 2018

Part III Grants ar

(h) Method of valuation (book, FMV, appraisal, other)																		
(h) (bo														-				
(g) Description of noncash assistance																		
(f) Amount of noncash assistance																		
(e) Manner of cash disbursement																		
(d) Amount of cash grant								:										
(c) Number of recipients																		
of grant or assistance (b) Region (c) Number of recipients																		
(a) Type of grant or assistance	(1)	(2)	(3)	(4)	(5)	(9)	(2)	(8)	(6)	(10)	(11)	(12)	(13)	(14)	(15)	(16)	(17)	(18)

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Parţ	V Foreign Forms		
1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	☐ Yes	☑ No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to separately file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; don't file with Form 990)	☐ Yes	☑ No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect To Certain Foreign Corporations (see Instructions for Form 5471)	☐ Yes	☑ No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)	☐ Yes	✓ No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships (see Instructions for Form 8865)	☐ Yes	☑ No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713; don't file with Form 990)	☐ Yes	☑ No

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Dart	V		٥.	

#### **Supplemental Information**

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

Part 1, line 2: A trustee reviews the list of recipients annually. Individual recipients are researched to ascertain their needs and expenses.
The trustee is in contact with the organizations in the foreign country to determine their use of the grants.
<del></del>

# SCHEDULE (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

American Friends of Yad Layeled

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22. Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

2018

OMB No. 1545-0047

Ópen to Public Inspection Employer identification number

► Go to www.irs.gov/Form990 for the latest information. ► Attach to Form 990.

13-3275989

General Information on Grants and Assistance	n on Grants and	Accietance					100000
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the selection criteria incodes contacts	itain records to sub	stantiate the amou	int of the grants or	assistance, the g	rantees' eligibility foi	the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and	
use selection criteria used to award the grants or assistance?  2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United Section	o award tne grants anization's procedur	or assistance? es for monitoring (	the use of orant fun				. · · · Ves · · No
		בי ואו ווייווו ווייוו ווייוו	חוב חשב סו לומוור וח	nus ill tille Officed	states.		
Part II. Strants and Other Assistance to Domestic (Part IV, line 21, for any recipient that received	Assistance to Do	mestic Organiza received more th	<b>ations and Dom</b> Ian \$5,000. Part I	lestic Governm	Organizations and Domestic Governments. Complete if the organization more than \$5,000. Part II can be duplicated if additional space is needed.	the organization answered	Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, more than \$5,000. Part II can be duplicated if additional space is needed.
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal,	(g) Description of	(h) Purpose of grant
(1) BMG Student Aid Fund					Oulei)		מיניינייניינייניינייניינייניינייניינייני
17 Sixth Street, Lakewood, NJ 08701	1 22-3612558	501(c)(3)	8429				needy students exnenses
(2)	-						cocupation company face.
(3)							
(4)	-						
(5)							
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(9)							
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169							
(a)	-						
(6)							
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(1)							
[2]							
					_		
2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table	on 501(c)(3) and gov	ernment organizat	ions listed in the lir	ne 1 table			_
Į	organizations listed	in the line 1 table			,		4

Schedule I (Form 990) (2018)

Cat No. 50055P

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

Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed. Part III

ייי כשלה ומתמנונים וו מתמנונים וויי בייי כייי		•			
(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
1 Food,clothing,etc. expenses for needy families	80	17189			
2 Student scholarships	7	22450			
3 Therapy expenses for needy individuals	2	1200			
4 Medical expenses for needy families	1	7500			
5 Wedding expenses for needy families	2	6886			
9					
7					
Part IV Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.	the information re	equired in Part I, line	2; Part III, column	(b); and any other additi	onal information.

Part 1, line 2 A trustee reviews the list of recipients anually and meets with recipients to ascertain their needs and expenses When possible, grants are used to pay expenses directly

Schedule I (Form 990) (2018)

#### SCHEDULE O (Form 990'or 990-EZ)

#### 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.

20**18** 

Open to Public Inspection

Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization ► Attach to Form 990 or 990-EZ.

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

American Friends of Yad Layeled 13-3275989 Part VI: Section A 2 - There is a family relationship between the officers Part VI Section B 11b - A copy of this form 990 is provided to all trustees of the organization for their review. Part VI<sup>-</sup> Section C. 19 - The organization's documents and financial statements are available to the public upon request