DLN: 93493220006070 OMB No 1545-0047 Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) ▶ Do not enter social security numbers on this form as it may be made public Open to Public Department of the ▶ Go to www.irs.gov/Form990 for instructions and the latest information. Treasury Inspection Internal Revenue Service For the 2019 calendar year, or tax year beginning 01-01-2019 , and ending 12-31-2019 C Name of organization FABRETTO CHILDREN'S FOUNDATION INC D Employer identification number B Check if applicable □ Address change 36-3894824 ☐ Name change Doing business as ☐ Initial return ☐ Final return/terminated E Telephone number Number and street (or P O box if mail is not delivered to street address) Room/suite 1563 SHERMAN AVENUE NO 201 ☐ Amended return ☐ Application pending (703) 525-8716 City or town, state or province, country, and ZIP or foreign postal code G Gross receipts \$ 4,494,491 Name and address of principal officer H(a) Is this a group return for KEVIN MARINACCI ☐Yes **☑**No subordinates? 1563 SHERMAN AVENUE NO 201 H(b) Are all subordinates EVANSTON, IL 60201 ☐Yes ☐No ıncluded? **✓** 501(c)(3) 4947(a)(1) or 501(c)() **◄** (insert no) If "No," attach a list (see instructions) **H(c)** Group exemption number ▶ Website: ► WWW FABRETTO ORG L Year of formation 1993 M State of legal domicile IL K Form of organization ☑ Corporation ☐ Trust ☐ Association ☐ Other ▶ Summary 1 Briefly describe the organization's mission or most significant activities TO EMPOWER UNDERSERVED CHILDREN AND THEIR FAMILIES IN NICARAGUA THROUGH EDUCATION AND NUTRITION Activities & Governance 2 Check this box ► ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets 3 Number of voting members of the governing body (Part VI, line 1a) . 14 4 4 Number of independent voting members of the governing body (Part VI, line 1b) . Total number of individuals employed in calendar year 2019 (Part V, line 2a) 5 3 **6** Total number of volunteers (estimate if necessary) 6 14 Total unrelated business revenue from Part VIII, column (C), line 12 5,811 **b** Net unrelated business taxable income from Form 990-T, line 39 2,807 Prior Year **Current Year** 4,077,961 8 Contributions and grants (Part VIII, line 1h) . 4,619,881 Ravenua 9 Program service revenue (Part VIII, line 2g) . 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) . 55,972 61,627 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) -47,147 -120,214 4,628,706 4,019,374 12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3). 3,404,475 3,317,925 **14** Benefits paid to or for members (Part IX, column (A), line 4) 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10) 270,410 433,463 Expenses 16a Professional fundraising fees (Part IX, column (A), line 11e) . b Total fundraising expenses (Part IX, column (D), line 25) ▶264,719 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) . 336,219 595,194 4,011,104 4,346,582 18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) Revenue less expenses Subtract line 18 from line 12 . 617,602 -327,208 Net Assets or Fund Balances Beginning of Current Year **End of Year** 2,186,138 2,485,616 20 Total assets (Part X, line 16) . 21 Total liabilities (Part X, line 26) . 139,616 628,388 22 Net assets or fund balances Subtract line 21 from line 20 . 2,046,522 1,857,228 Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge 2020-08-07 Signature of officer Sign Here KEVIN MARINACCI CEO Type or print name and title Print/Type preparer's name Preparer's signature Check | If 2020-08-05 P01365820 Paid self-employed Firm's name ► MARCUM LLP Firm's EIN > 11-1986323 Preparer Use Only Firm's address ► 1899 L STREET NW SUITE 850 Phone no (202) 227-4000 WASHINGTON, DC 20036 ✓ Yes □ No May the IRS discuss this return with the preparer shown above? (see instructions) . For Paperwork Reduction Act Notice, see the separate instructions. Cat No 11282Y Form 990 (2019)

Statement of Program Service Accomplishments Check if Schedule O contains a response or note to any line in this Part III	Form	990 (2	019)					Page 2
1 Berefly describe the organization is mission Co EMPOVER UNDERSERVED CHILDREN AND THEIR FAMILIES IN NICARACUA TO REACH THEIR FULL POTENTIAL, IMPROVE THEIR LIVELIHOODS AND TAKE ADVANTAGE OF ECONOMIC OPPORTUNITY THROUGH EDUCATION AND NUTRITION 2 Did the organization undertake any significant program services during the year which were not listed on the prior from 990 or 990-E2?	Pa	rt III	Statement o	f Program Servic	e Accomplis	hments		
TO EMPOWER UNDERSERVED CHILDREN AND THEIR FAMILES IN NICARAGUA TO REACH THEIR FULL POTENTIAL, IMPROVE THEIR LIVELIHOODS AND TAKE ADVANTAGE OF ECONOMIC OPPORTUNITY THROUGH EDUCATION AND NUTRITION 2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-E2?			Check If Schedu	ile O contains a respo	nse or note to a	any line in this Part III .		🗹
AND TAKE ADVANTAGE OF ECONOMIC OPPORTUNITY THROUGH EDUCATION AND NUTRITION 2	1	Briefly	describe the org	janization's mission				
the prior Form 990 or 990-E2?								THEIR LIVELIHOODS
Did the organization cease conducting, or make significant changes in how it conducts, any program services or services? 4 Press, "describe these changes on Schedule O 4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported 4a (Code) (Expenses \$ 3,752,270 including grants of \$ 3,317,925) (Revenue \$) 4b (Code) (Expenses \$ including grants of \$) (Revenue \$) 4c (Code) (Expenses \$ including grants of \$) (Revenue \$) 4d Other program services (Describe in Schedule O) (Expenses \$ including grants of \$) (Revenue \$) 4e Other program service expenses > 3,752,270 (Revenue \$))	2	the pr	or Form 990 or 9	990-EZ?		- ·		☐ Yes ☑ No
services?	-							
Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported 4a (Code) (Expenses \$ 3,752,270 including grants of \$ 3,317,925) (Revenue \$) See Additional Data 4b (Code) (Expenses \$ including grants of \$) (Revenue \$) 4c (Code) (Expenses \$ including grants of \$) (Revenue \$) 4d Other program services (Describe in Schedule 0) (Expenses \$ including grants of \$) (Revenue \$) 4d Other program services (Describe in Schedule 0) (Expenses \$ including grants of \$) (Revenue \$) 4e Total program service expenses > 3,752,270	3	service	es [?]			· · · · · ·	acts, any program	☐ Yes 🗹 No
4b (Code) (Expenses \$ including grants of \$) (Revenue \$) 4c (Code) (Expenses \$ including grants of \$) (Revenue \$) 4d Other program services (Describe in Schedule O) (Expenses \$ including grants of \$) (Revenue \$) 4d Other program services (Describe in Schedule O) (Expenses \$ including grants of \$) (Revenue \$) 4d Total program service expenses ▶ 3,752,270	4	Sectio	n 501(c)(3) and	501(c)(4) organizatio	ns are required	to report the amount o		
4c (Code) (Expenses \$ including grants of \$) (Revenue \$) 4d Other program services (Describe in Schedule O) (Expenses \$ including grants of \$) (Revenue \$) 4e Total program service expenses > 3,752,270	4a	•	ldıtıonal Data) (Expenses \$	3,752,270	including grants of \$	3,317,925) (Revenue \$)
4d Other program services (Describe in Schedule O) (Expenses \$ including grants of \$) (Revenue \$) 4e Total program service expenses ▶ 3,752,270	4b	(Code) (Expenses \$		including grants of \$) (Revenue \$)
4d Other program services (Describe in Schedule O) (Expenses \$ including grants of \$) (Revenue \$) 4e Total program service expenses > 3,752,270								
(Expenses \$ including grants of \$) (Revenue \$) 4e Total program service expenses ▶ 3,752,270	4c	(Code) (Expenses \$		including grants of \$) (Revenue \$)
(Expenses \$ including grants of \$) (Revenue \$) 4e Total program service expenses ▶ 3,752,270								
4e Total program service expenses ► 3,752,270	4d	Other	program service	•				
		· ·				*) (Revenue \$)
	4e	Total	program servic	ce expenses >	3,752,2	70		

Nο

Nο

Nο

Nο

Nο

Form **990** (2019)

Yes

19

20a

20h

21

Part IV Checklist of Required Schedules Yes Nο Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Yes 1 2 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 🕏 . . . Yes Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates No 3 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 No 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 No Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right

6

to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete No Did the organization receive or hold a conservation easement, including easements to preserve open space, 7 the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II 뉯 . . . Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," R

Nο No 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 No 9 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, 10 Yes

permanent endowments, or quasi endowments? If "Yes," complete Schedule D, Part V If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Yes 11a

11b assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 🛸 Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its 11c total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII 😼 Yes 11d

b Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total No 11e Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses

No 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 e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 🕏 Nο the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X 🥦 11f Yes 12a Nο

12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete b Was the organization included in consolidated, independent audited financial statements for the tax year? 12b Yes If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional 🥦 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E

13 14a Yes **b** Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising,

No 14a Did the organization maintain an office, employees, or agents outside of the United States? . . . business, investment, and program service activities outside the United States, or aggregate foreign investments 14b Yes valued at \$100,000 or more? *If "Yes," complete Schedule F, Parts I and IV* Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any Yes 15

foreign organization? If "Yes," complete Schedule F, Parts II and IV 🛸 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to 16 or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV 🔧

Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, 17

column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I(see instructions) Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII. 18 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"

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

b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?

20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H . . .

Form	990 (2019)			Page 4
Par	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		No
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? <i>If "Yes," complete Schedule J</i>	23		No
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		No
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 to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No
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? <i>If "Yes," complete Schedule L, Part I</i>	25b		No
26	Did the organization report any amount on Part X, line 5 or 22 for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>	27		No
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, key employee, creator or founder, or substantial contributor? <i>If "Yes," complete Schedule L, Part IV</i>	28a		No
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		No
c	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? <i>If "Yes," complete Schedule L, Part IV</i>	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 🐒	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
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		No
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		No
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	Yes	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Yes	
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	Yes	_
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		No
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		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 197 Note. All Form 990 filers are required to complete Schedule O	38	Yes	
Pa	Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V			✓

1a Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable .

b Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable

Yes

Form **990** (2019)

0

1c

1a

1b

No

2a Interest the number of employees resorted on from W-3. Transmittal of Wage and Tax Statements, field of the calcinary set ending with or with the try year covered by this refurm. 3 3 4 7 5 1 5 1 5 5 7 5 7 5 7 5 7 5 7 7	OHIII	990 (2019)			Page 5
Tax Setaments, field for the called reyer ending with or within the year covered by 2a 3 b. If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note: If the sum of lines 2 and 2a is greater than 250, you may be required to e-file (see instructions) 3a. Did the organization have unrelisted business gress income of \$2,000 or more during the year? 4a. At any time during the calendar year, du the organization have an interest in, or a signature or other authority or at 4. A yes financial account in a foreign country (such are a bank account, securing in a fine financial account)? b. If 'Yes', electer the name of the foreign country b-10. b. If 'Yes', electer the name of the foreign country b-10. b. If 'Yes', a fine	Pa	statements Regarding Other IRS Filings and Tax Compliance (continued)	_		
Note, if the sum of lines Ia and 2a is greater than 250, you may be recurred to e-the (see instructions) 3 Did the organization have unrelated business gross, norme of \$3.00 or more during the year? 3 A Yes 1 If "res," insist filed a form 590-7 for this year? If "No" fo line 3p, provide an explanation in Schedule O. 4 A At any time during the calendar year, did the organization where an interest in your a signature or other authority over, at 44 Yes 1 If "Yes," insist the name of the forms grounding your provides an explanation in Schedule O. 4 If "Yes," in the se of Sp. did the organization that it was or is a party to a prohibited at whether transaction at any time during the tax year? 5 No b. Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction at any time during the tax year? 5 No b. Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction at any time during the tax year? 5 No c. If "Yes," to line 3a or 5b, did the organization that it was or is a party to a prohibited tax shelter transaction as statement that such contributions or girts were not tax deductible as chart table contributions? 5 No 1 If "Yes," did the organization rule with every solicitation an exposes statement that such contributions or girts were not tax deductible? 7 Organization shat may receive deductible contributions under section 170(c). 8 Did the organization shall explanation shall be promised to the pages? 7 Organization shall explanation shall explanation shall explanation shall explanation shall explanation shall explanation shall be promised to shall be promised to shall be promised to shall be promised to shall be promised	2a	Tax Statements, filed for the calendar year ending with or within the year covered by			
Marker The act of time Form 990-T for this year! If "Not To me 3b, provide an explanation in Schedule O A A any time doing the calendary year did the organization in sentences in, or a signature or other authority over, a A A Yes	Ь		2b	Yes	<u> </u>
4a At any time during the calendar year, dd 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 accounts? b If "res," enter the name of the foreign country = NU See instructions for fining requirements for Fincile Form 114, Report of Foreign Bank and Financial Accounts (FBAR) 5a Was the organization a party to a prohibited tax shefter transaction at any time during the tax year? 5b ID did any taxable party northy the organization that it was or is a party to a prohibited tax shefter transaction? 6c If "res," to line Sa or 5b, did the organization that it was or is a party to a prohibited tax shefter transaction solict any contributions have annual gross receipts that are normally greater than \$100,000, and did the organization solict any contributions and the resolution and the organization solict any contributions and the resolution and party for goods and services provided to the payer? 7b If "res," indicate the organization include wheever solicitation an express statement that such contributions or gifts were not tax deductible? 8c Did the organization receive deductible contributions under section 170(c). 9c Did the organization receive deductible contributions under section 170(c). 9c Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 9c Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 9c Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 9c Did the sponsoring organization maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization remaintaining donor advised funds. 9c Did the sponsoring organization maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization has excess business heldings at any time duri	3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	Yes	
financial account in a foreign country (such as a bank account, securities account, or other financial account)? 5 ee instructions for fining requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) 5 Was the organization as any time during that it was or is a party to a prohibited tax whether transaction? 6 If "Yes," to line 5 aor 5b, did the organization file Form 8885-7? 5 Co. 6 If "Yes," to line 5 aor 5b, did the organization file Form 8885-7? 5 Co. 7 If "Yes," to line 5 aor 5b, did the organization file Form 8885-7? 5 Co. 8 Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charable contributions? 8 If "Yes," and the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 9 If "Yes," and the organization neceive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? 9 If "Yes," and the organization neceive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? 9 If "Yes," indicate the rumber of Forms 8282 filed during the year. 10 If "Yes," indicate the rumber of Forms 8282 filed during the year. 11 If the organization received a contribution of qualified intellectual property, did the organization file Form 8999 as recurred? 12 If the organization received a contribution of qualified intellectual property, did the organization file Form 8999 as recurred? 12 If the organization maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organizations make any taxable distributions under section 4968? 13 Did the sponsoring organizations make any taxable distributions under section 4968. 14 Did the sponsoring organization make any t			3 b	Yes	
see instructions for fining requirements for FinicEN Form 114, Report of Foreign Bank and financial Accounts (FBAR) b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? c If "Fes," to line 5a or 5b, did the organization file Form 8886-77 b Did any taxable party notify the organization file Form 8886-77 c If "Fes," to line 5a or 5b, did the organization file Form 8886-77 b If "Fes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? b If "Fes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? c Organization receive a payment in excess of \$75 made party as a contribution and partly for goods and services provided to the payor? c Did the organization receive a payment in excess of \$75 made party as a contribution and partly for goods and services or bid the organization receive a payment in excess of tangible personal property for which it was required to file form \$282? b If "Yes," indicate the number of Forms \$282 filed during the year. Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? To Did the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? The No Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization make any taxable distributions under section 4965 and the sponsoring organization make any taxable distributions under section 4965 and the sponsoring organization make any taxable distributions under section 4966 and the sponsoring organization make any taxable distributions under section 501(c)(7) organizations. Enter a foress income from other s	_	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	Yes	
b Dd any taxable party notify the organization that it was on is a party to a prohibited tax shelter transaction? If "Yes," to line Sa or Sb, did the organization file Form 8886-17 Sc Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as chantable contributions? If "Yes," full the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? Organizations that may receive deductible contributions under section 170(c). Dd the organization receive a payment in excess of \$75 made party as a contribution and partly for goods and service? Pb If "Yes," did the organization notify the donor of the value of the goods or services provided? To Dd the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? If "Yes," indicate the number of Forms 8282 filed during the year. Dd the organization during the year, pay premiums, directly or indirectly, to pay premiums on a personal benefit contract? To No If the organization received an contribution of qualified intellectual property, did the organization file Form 8899 as required? To No Sponsoring organization received a contribution of cars, boats, arplanes, or other vehicles, did the organization file Form 8899 as required? To No Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year? Sponsoring organization make any taxable distributions under section 4966? Dd the sponsoring organization make any taxable distributions under section 4966? Describe 504(c)(77) organizations. Enter Internation fees and capital contributions included on Part VIII, line 12. Gross income from members or shareholders Forms 504(c)(12) organizations and the sponsoring organization make any taxable distributio		See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)	5a		No.
C. If "Yes," to line Sa or Sb, did the organization file Form 8896-T? 6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit amy contributions that were not tax deductible as charactic contributions. b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 7 Organizations that may receive deductible contributions under section 170(c). a Did the organization statemay payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? 7 If "Yes," did the organization notify the donor of the value of the goods or services provided? 8 If "Yes," indicate the number of Forms \$252 filed during the year 9 Did the organization sele, exchange, or otherwise dispose of tangible personal property for which it was required to file of the property of the organization received an contribution of qualified intellectual property, did the organization file Form 899 as required? 7 If the organization received a contribution of qualified intellectual property, did the organization file Form 899 as required? 9 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organizations maintaining donor advised funds. Did a fund maintained by the sponsoring organizations maintaining donor advised funds. Did a fund for the property, included on Form 1041? 10 Section 901(c)(17) organizations. Enter 11 Intuation fees and captal contributions included on Part VIII, line 12 12 Sectio			Eb		No
6a No solit any contributions that were not tax deductible as chartable contributions? b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 7 Organizations that may receive deductible contributions under section 170(c). a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? 7b If "Yes," did the organization notify the donor of the value of the goods or services provided? 7c Did the organization receive any payment in excess of \$75 made partly as a contribution and partly for goods and services provided? 7c Did the organization notify the donor of the value of the goods or services provided? 7c Did the organization of partly the donor of the value of the goods or services provided? 7d If "Yes," indicate the number of Forms \$282 filled during the year Pittle," indicate the number of Forms \$282 filled during the year Did the organization received any funds, directly or indirectly, on a personal benefit contract? 7e No f If the organization received a contribution of qualified intellectual property, did the organization file a Form 1098-C? 7f No 8 Sponsoring organization maintaining donor advised funds, Did a donor advised fund maintained by the sponsoring organization make any taxable distributions under section 4966? 9 Sponsoring organizations maintaining donor advised funds. 10 Did the sponsoring organization make any taxable distribution to a donor, donor advisor, or related person? 9 Sponsoring organizations maintaining donor advised funds. 10 Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? 9 Section 501(c)(2) organizations. Enter 1 Intiation fees and capital contributions included on Part VIII, line 12 1 Gross income from members or shareholders 1 Fees the amount of tax-exempt interest received or accrued during the year? 1 If Yes," enter the amount of reserve					
not tax deductible? Organizations that may receive deductible contributions under section 170(c). Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? To by 1f 'Yes,' du the organization notify the donor of the value of the goods or services provided? To by 4es Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file form \$282? Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file form \$282? Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? To life the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? To life the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? To life the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1099-C? To life the organization make any taxable distributions under section 4966? Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization make any taxable distributions under section 4966? Did the sponsoring organization make any taxable distributions under section 4966? Did the sponsoring organization make any taxable distributions under section 4966? Did the sponsoring organization make any taxable distribution to a donor, donor advisor, or related person? Payout the section 501(c)(12) organizations. Enter a linitation fees and capatite contributions included on Port Vill, line 12 Section 501(c)(12) organizations. Enter a linitation fees and capatite contributions included on Port Vill, line 12 Fires, "enter the amount of reserves the organization is required to maintain by the states in which the organization is for diditional informatio		Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization			No
a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? b If Yes, "did the organization notify the donor of the value of the goods or services provided? C Did the organization sell, exchange, or otherwise dispose of trangible personal property for which it was required to file form \$282? C Did the organization sell, exchange, or otherwise dispose of trangible personal property for which it was required to file form \$282? Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7e No f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 7f No g If the organization received a contribution of qualified intellectual property, did the organization file Form 899 as required? 7g 1098-C? The organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? The No Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization make any taxable distributions under section 4966? 9 phonsoring organization make any taxable distributions under section 4966? 9 phonsoring organization make any taxable distributions under section 4966? 9 phonsoring organization make any taxable distributions under section 4966? 9 phonsoring organization make any taxable distributions under section 4966? 9 phonsoring organization make any taxable distributions under section 4966? 9 phonsoring organization make any taxable distributions under section 4966? 9 phonsoring organization is contributions included on Porm 990, Part VIII, line 12 10 phonsoring 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) 11 phonsoring from members or shareholders b Gross income from other sources (Do not net amounts due or pa	b		6b		
provided to the payor? b If "Yes," and the organization notify the donor of the value of the goods or services provided? C Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file form 8282? C Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file form 8282? E Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? F Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If the organization received a contribution of qualified intellectual property, did the organization file Form 8999 as required? If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? The No Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year? Sponsoring organization make any taxable distributions under section 4966? B Did the sponsoring organization make any taxable distributions under section 4966? B Did the sponsoring organization make any taxable distributions under section 4966? B C Section 501(c)(12) organizations. Enter Initiation fees and capital contributions included on Parl VIII, line 12 B Gross income from members or shareholders If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b If "Yes," enter the amount of reserves the organizations required to maintain by the states in which the organization is cliensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O If Tes, has it field a Form 20 to report these payments of indoor tanning services during	7	Organizations that may receive deductible contributions under section 170(c).			
c Dd the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file form \$282? d If "Yes," indicate the number of Forms \$282 filed during the year	а		7a	Yes	
Form 8282? d If "Yes," indicate the number of Forms 8282 filed during the year Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7e No f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 7f No g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? 1098-C? 1098-C? 1098-C? 1098-C? 1008 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization make any taxable distribution in the during the year? Sponsoring organization make a distribution to a donor, donor advisor, or related person? 9b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? 9ction 501(c)(7) organizations. Enter 1 Initiation fees and capital contributions included on Part VIII, line 12. 1009 11 Section 501(c)(12) organizations. Enter 2 Gross income from members or shareholders 3 Gross income from members or shareholders 4 Gross income from members or shareholders 5 Gross income from members or shareholders 11a 11b 12a Section 501(c)(29) qualified nonprofit health insurance issuers. 13 Section 501(c)(29) qualified nonprofit health insurance issuers. 13 Section 501(c)(29) qualified nonprofit health insurance issuers. 13 Is the organization ilcensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O 13 Enter the amount of reserves on hand 13 C 14 In the organization is licensed to issue qualified health plans in more than one state? 15 In the organization is licensed to issue qualified health plans in more than one state? 16 Yes, has it filed a form 720 to report these payments? If No, "provide an explanation in Schedule O 15 Is the organization and educational instructions of more than \$1,000,000 in remuneration o	b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Yes	
by Did the organization received any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7e No f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 7f No g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? 7h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? 7h No 8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year? 9 Sponsoring organizations maintaining donor advised funds. a Did the sponsoring organization make any taxable distributions under section 4966? 9 Did the sponsoring organization make any taxable distributions under section 4966? 9 Did the sponsoring organizations. Enter a Initiation fees and capital contributions included on Part VIII, line 12 10 Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 110 July 10 Ju		Form 8282?	7 c		No
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 7f No No If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? 1 If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? 7h No No S Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year? 9 Sponsoring organization make any taxable distributions under section 4966? 9 Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? 9 Did the sponsoring organization make and staribution to a donor, donor advisor, or related person? 9 Did the sponsoring organizations. Enter a Initiation fees and capital contributions included on Part VIII, line 12 b Gross income from members or shareholders 11 Section 501(c)(12) organizations. Enter a Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them) 12 Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 13 Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization incensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O 13 Did the organization in slicensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization in sreport on Schedule O 15 Is the organization or receive any payments for indoor tanning services during the tax year? 15 No If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O 15 Is the organization and ducuctional instruction subject to the section 4968 exc	d	If "Yes," indicate the number of Forms 8282 filed during the year			
If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? The organization maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year? Sponsoring organizations maintaining donor advised funds. In the sponsoring organization make any taxable distributions under section 4966? Did the sponsoring organization make any taxable distributions under section 4966? Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? Section 501(c)(7) organizations. Enter In this trial of the sponsoring organization included on Part VIII, line 12 Gross income from members or shareholders Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them) 12a Section 501(c)(12) organizations. Enter If "Yes," enter the amount of tax-exempt interest received or accrued during the year If "Yes," enter the amount of tax-exempt interest received or accrued during the year Is the organization increased to issue qualified health plans in more than one state? Center the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans in more than one state? Enter the amount of reserves any payments for indoor tanning services during the tax year? It is the organization receive any payments for indoor tanning services during the tax year? It is the organization of received any payments for indoor tanning services during the tax year? It is the organization of received or the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess paractute payment(s) during the year? If the organization is adductional information the organization i	е				No
required? If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? The No Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year? Sponsoring organization make any taxable distributions under section 4966? Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? Bid the sponsoring organizations. Enter Initiation fees and capital contributions included on Part VIII, line 12. Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities Section 501(c)(12) organizations. Enter Gross income from members or shareholders. Gross income from members or shareholders. Bif "Yes," enter the amount of tax-exempt interest received or accrued during the year Ital Section 501(c)(29) qualified nonprofit health insurance issuers. Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule 0 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 in more than one state? Note. See the instructions for additional information the organization must report on Schedule 0 Enter the amount of reserves on hand Center the amount of reserves on hand Is the organization receive any payments for indoor tanning services during the tax year? Ital No If "Yes," has it field a Form 720 to report these payments?! "No," provide an explanation in Schedule 0 Ital Is the organization in deferon 4720, Schedule N If "Yes," see instructions and file Form 4720, Schedule N Is the organization and additional information beyond the section 4968 excise tax on net investment income?	_		7f		No
Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year? Sponsoring organization maintaining donor advised funds. Did the sponsoring organization make any taxable distributions under section 4966? Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? Did the sponsoring organizations. Enter Initiation fees and capital contributions included on Part VIII, line 12 Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities Gross income from members or shareholders Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them) Las Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? If "Yes," enter the amount of tax-exempt interest received or accrued during the year Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O 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 any payments for indoor tanning services during the tax year? It is the organization receive any payments for indoor tanning services during the tax year? It is the organization is provided to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? It is the organization and educational institutions subject to the section 4968 exise tax on net investment income? In the organization and educational institutions subject to the section 4968 exise tax on net investment income?	_	required?	7g		
Sponsoring organization have excess business holdings at any time during the year? Sponsoring organizations maintaining donor advised funds. a Did the sponsoring organization make any taxable distributions under section 4966? b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? 9b Section 501(c)(7) organizations. Enter a Initiation fees and capital contributions included on Part VIII, line 12 b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 11 Section 501(c)(12) organizations. Enter a 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) 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 13 Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans c Enter the amount of reserves on hand 13b 13c 14a Did the organization receive any payments for indoor tanning services during the tax year? 15 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 No 16 Is the organization an educational institution subject to the section 4968 excise tax on net investment income? 16 No	h		7h		No
a Did the sponsoring organization make any taxable distributions under section 4966?	8		8		
b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9	Sponsoring organizations maintaining donor advised funds.			
a Initiation fees and capital contributions included on Part VIII, line 12		· · · · · · · · · · · · · · · · · · ·	-		
a Initiation fees and capital contributions included on Part VIII, line 12			9b		
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b Section 501(c)(12) organizations. Enter a Gross income from members or shareholders		1 1			
11 Section 501(c)(12) organizations. Enter a Gross income from members or shareholders					
a Gross income from members or shareholders					
against amounts due or received from them)					
b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 13 Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans c Enter the amount of reserves on hand 13c 14a Did the organization receive any payments for indoor tanning services during the tax year? 14a No b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O 15 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 No 16 Is the organization an educational institution subject to the section 4968 excise tax on net investment income? 16 No	b				
b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 13 Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans c Enter the amount of reserves on hand 13c 14a Did the organization receive any payments for indoor tanning services during the tax year? 14a No b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O 15 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 No 16 Is the organization an educational institution subject to the section 4968 excise tax on net investment income? 16 No	12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
a Is the organization licensed to issue qualified health plans in more than one state?		If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
Note. See the instructions for additional information the organization must report on Schedule O b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
which the organization is licensed to issue qualified health plans	а		13a		
14a Did the organization receive any payments for indoor tanning services during the tax year?	b	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			
b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O . 15 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?		130			
15 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?			14a		No
parachute payment(s) during the year?			14b		
16 Is the organization an educational institution subject to the section 4968 excise tax on net investment income? 16 No.	15	parachute payment(s) during the year?	15		No
Tries, complete rollin 4720, Schedule 0	16		16		No

orm	990 (2019)			Page 6
Par	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O See instructions Check if Schedule O contains a response or note to any line in this Part VI	" respo	onse to	lines 🗹
Se	ction A. Governing Body and Management			
	Established with a second seco		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing	-		
	body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O			
b	Enter the number of voting members included in line 1a, above, who are independent 1b 14			
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	Yes	
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		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? .	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No
6	Did the organization have members or stockholders?	6		No
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		No
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7 b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
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? <i>If "Yes," provide the names and addresses in Schedule O</i>	9		No
Se	ction B. Policies (This Section B requests information about policies not required by the Internal Revenu	e Code	•	I
			Yes	No
	Did the organization have local chapters, branches, or affiliates?	10a 10b		No
112	and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the	100		
LIA	form?	11a	Yes	
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	Yes	
Ь	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
C	Did the organization regularly and consistently monitor and enforce compliance with the policy? <i>If "Yes," describe in Schedule O how this was done</i>	12c	Yes	
13	Did the organization have a written whistleblower policy?	13	Yes	
14	Did the organization have a written document retention and destruction policy?	14	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
	The organization's CEO, Executive Director, or top management official	15a	Yes	
b	Other officers or key employees of the organization	15b	Yes	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			
	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		No
Ь	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its 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?			
C -	<u> </u>	16b		
<u>Se</u> 17	ction C. Disclosure List the states with which a copy of this Form 990 is required to be filed▶			
_,	IL , VA			
18	Section 6104 requires an organization to make its Form 1023 (or 1024-A if applicable), 990, and 990-T (501(c)(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 interest policy, and financial statements available to the public during the tax year			
20	State the name, address, and telephone number of the person who possesses the organization's books and records ►KEVIN MARINACCI 1563 SHERMAN AVENUE SUITE 201 EVANSTON, IL 60201 (703) 525-8716			

(14) CARLOS MAYORGA

(16) JOHN JEFFREY MULLEN

(17) FRANCIS RIENZO

(15) CHRISTOPHER MATTHEW MITCHELL

DIRECTOR

DIRECTOR

DIRECTOR

DIRECTOR

Part VII

Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees,

and Independent Contractors

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

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees 1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax

- 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, or 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

See instructions for the order in which to list the persons above

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee

— check this box if fictation the organization ho	Tany relaced of	94					, `	tarrent officer, and	etor, or trustee		
(A) Name and title	(B) Average hours per week (list any hours	perso	an one on is a dir	e bo both ecto	t che ox, u h an or/tru	nless office ustee)	ır.	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation from the organization and	
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	(W-2/1099- MISC)	(W-2/1099- MISC)	related organizations	
(1) KEVIN MARINACCI CEO	40 00			х				94,000	0	2,400	
(2) RODRIGO HORVILEUR PRESIDENT	40 00			х				83,736	0	2,400	
(3) ANINA HEWEY PROGRAM DIRECTOR - AS OF 01/2019	40 00			х				38,400	0	0	
(4) DANIEL BLANDON FINANCE DIRECTOR	40 00			x				12,000	0	0	
(5) WILLIAM GLASTRIS CHAIRMAN	2 00	х		x				0	0	0	
(6) CARL MARINACCI CHAIRMAN, EMERITUS	2 00	х		х				0	0	0	
(7) IAN KNOX TREASURER	2 00	х		х				0	0	0	
(8) NICK LO BUE DIRECTOR	2 00	х						0	0	0	
(9) MARY BURKE DIRECTOR	2 00	х						0	0	0	
(10) MICHAEL MCGUIRE CALLAHAN DIRECTOR	2 00	х						0	0	0	
(11) SAMANTHA CHADWICK DIRECTOR	2 00	x						0	0	0	
(12) DEANNA FORD DIRECTOR	2 00	х						0	0	0	
(13) THOMAS MICHAEL GLEASON DIRECTOR	2 00	х						0	0	0	

2 00

2 00

2 00

2 00

Х

0

0

0

0

0

compensation from the organization ▶ 0

Part VII

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

Page 8

1 4	tevil Section At Officers, Directors	3, 11 astees, 10		p.o,		, a	u9	,	ot compensated	Linployees		macay	
	(A) Name and title	(B) Average hours per week (list any hours for related	-	ne b	ox, ι in of tor/t	t che unles ficer rust	ss pers and a ee)	son	(D) Reportable compensation from the organization (W-2/1099-	(E) Reportable compensatio from related organization (W-2/1099-	n d s	Estima amount of compen from organizat	ated of other sation the
		organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	MISC)	MISC)		relat organiz	ed
(18)	DARRIN ROWELL	2.00											
DIRE	CTOR	2 00	×						0		0		0
c T	Sub-Total	VII, Section A				•							
d	Total (add lines 1b and 1c) Total number of individuals (including but	t not limited to				/e) w	-1	ceive	228,136 ed more than \$100	,000	9		4,800
	of reportable compensation from the orga	anization ► U										Yes	No
3	Did the organization list any former offic line 1a? <i>If "Yes," complete Schedule J for</i>			key e				nighe •	est compensated en	mployee on	3		No
4	For any individual listed on line 1a, is the organization and related organizations gr	eater than \$150	1 7,000	f "Ye						he			
5	Did any person listed on line 1a receive of services rendered to the organization? If	or accrue compe	nsation							dual for	5		No No
											3		140
1	cction B. Independent Contractors Complete this table for your five highest from the organization Report compensat	compensated in									pen	sation	
	· · · · · · · · · · · · · · · · · · ·	(A) business address	, -							(B) tion of services		(C Compen	
-													

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of

		(2019)								Page 9
Part	VIII									
		Check if Sched	dule	O contains a	respo	onse or note to any	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
(6	1a	Federated campa	ııgns	·	1a			Tevenue		312 - 314
nts Ints	Ь	• Membership dues	5.		1 b					
ons, Gifts, Grants Similar Amounts	c	: Fundraising even	ts .		1c	921,552				
_, \ <u>\</u>	d	Related organizat	tions	, L	1d					
ila Ila	e	Government grants	(con	tributions)	1e	69,151				
ns, Sir	f	All other contributio								
utio er		and similar amounts above		L	1 f	3,087,258				
tributio Other	g	Noncash contributio lines 1a - 1f \$	ns in	cluded in	1g	1,213,943				
Contributions, Gifts, Grants and Other Similar Amounts	١,	h Total. Add lines :	1a-1	f	-9					
						Business Code	4,077,961		I	
	2a					Business date				
пe										
Ven	b									
ıπ G <u>ş</u>										
r vi C	С									
ઝ	d									
Program Service Revenue	_									
Pro	е									
	f	All other program	serv	ice revenue						
		Total. Add lines 2						_		
		investment income imilar amounts) .		ludıng dıvıde • • •		nterest, and other	34,412	2		34,412
		income from invest								
	5 F	Royalties				>				
				(ı) Rea		(II) Personal	_			
	6a	Gross rents	6a		16,569					
	_	Less rental expenses	6b		16,827	,]			
		Rental income	0.0		10,027		-			
		or (loss)	6 c		-258	3				
	d	Net rental income	or			<u> </u>	-258	3		-258
	7-	Gross amount		(ı) Securit	ties	(II) Other	1			
		from sales of assets other	7a	2	83,340					
		than inventory					-			
	_	Less cost or other basis and	7b	2	56,125	5				
		sales expenses					-			
		Gain or (loss)	7c		27,215	5				
		Net gain or (loss) Gross income from fu					27,215			27,215
ne		(not including \$		921,552 of						
ven		contributions reported See Part IV, line 18		line 1c)	8a	30,855				
Re	b	Less direct expen	ses		8b	201,868	1			
Other Revenue	c	Net income or (los	s) fr	om fundraisi	ng ev	ents	-171,013	3		-171,013
	9 =	Gross income from	gam	ing activities						
		See Part IV, line 19			9a					
	b	Less direct expen	ses		9b]			
	С	Net income or (los	s) fr	om gaming a	ctivit	les >	1			
	10a	Gross sales of inve	entoi	ry, less						
		returns and allowa			10a	6,108]			
	b	Less cost of good	s so	ld	10 b	297			5.011	
	С	Net income or (los Miscellaneo			nvent	ory ► Business Code	5,811	L	5,811	
	11:	aOTHER INCOME	us K	evenue		900099	41,418	3		41,418
	b	FOREIGN EXCHAN	IGE (GAIN		900099	3,642	2	1	3,642
				•						
	c	REIMBURSEMENTS	S/RE	FUNDS		900099	186	5		186
	d	All other revenue	•							
	е	Total. Add lines 1	1a-1	11d		>	45,246	5		
	12	Total revenue. S	ee ır	nstructions .			4,019,374		0 5,811	-64,398
							7,019,3/2	.1	3,011	Form 990 (2019)

c DUES & SUBSCRIPTIONS

25 Total functional expenses. Add lines 1 through 24e 26 Joint costs. Complete this line only if the 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)

e All other expenses

ď

Form 990 (2019)				Page 10
Part IX Statement of Functional Expenses				
Section 501(c)(3) and 501(c)(4) organizations must c	omplete all columns	All other organization	ns must complete colu	ımn (A)
Check if Schedule O contains a response or note to an	y line in this Part IX			<u> U</u>
Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21				
2 Grants and other assistance to domestic individuals. See Part IV, line 22				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, lines 15 and 16	3,317,925	3,317,925		
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	232,936	116,454	35,308	81,174
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 Other salaries and wages	154,485	120,475	1,226	32,784
8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)				
9 Other employee benefits				
10 Payroll taxes	46,042	34,775	2,083	9,184
11 Fees for services (non-employees)				
a Management				
b Legal				
c Accounting	68,787		68,787	
d Lobbying				
e Professional fundraising services See Part IV, line 17				
f Investment management fees	9,871		9,871	
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	67,230	26,489	441	40,300
12 Advertising and promotion	40,108		3,041	37,067
13 Office expenses	130,956	81,845	33,957	15,154
14 Information technology	1,044		1,044	
15 Royalties				
16 Occupancy	21,360	6,789		14,571
17 Travel	17,905	1,077	4,379	12,449
18 Payments of travel or entertainment expenses for any federal, state, or local public officials .				
19 Conferences, conventions, and meetings				
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	3,593		3,593	
23 Insurance	9,565	1,516	5,793	2,256
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 O)				
a EQUITY LOSSES IN SUB	147,062		147,062	
b MISCELLANEOUS	49,164	39,709	7,337	2,118

28,549

4,346,582

5,216

3,752,270

17,662

264,719

Form **990** (2019)

5,671

329,593

Form	1 990	(2019)					Page 11
P	art X	Balance Sheet					
		Check if Schedule O contains a response or not	te to ar	ny line in this Part IX			🗆
					(A) Beginning of year		(B) End of year
	1	Cash-non-interest-bearing			207,994	1	155,918
	2	Savings and temporary cash investments .		[31,189	2	18,805
	3	Pledges and grants receivable, net			297,905	3	185,006
	4	Accounts receivable, net	[159,821	4	46,121	
	5 6	Loans and other payables to any current or form key employee, creator or founder, substantial centity or family member of any of these person Loans and other receivables from other disquals section 4958(f)(1)), and persons described in significant control of the section 4958(f)(1).	utor, or 35% controlled ersons (as defined under		5		
ş	7	Notes and loans receivable, net	` ` ` ` `		6 7		
set	8	Inventories for sale or use	[8		
Assets	9	Prepaid expenses and deferred charges			16,333	9	0
_	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a	698,645			
	ь	Less accumulated depreciation	10 b	101,592	193,917	10 c	597,053
	11	Investments—publicly traded securities .			1,216,948	11	1,037,713
	12	Investments—other securities See Part IV, line	11 .	[49,121	12	0
	13	Investments—program-related See Part IV, line			13		
	14	Intangible assets	[14		
	15	Other assets See Part IV, line 11	[12,910	15	445,000	
	16	Total assets. Add lines 1 through 15 (must eq	ual line	≘ 34)	2,186,138	16	2,485,616

		investments publicly traded securities .	1,210,010		1,007,710
	12	Investments—other securities See Part IV, line 11	49,121	12	0
	13	Investments—program-related See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets See Part IV, line 11	12,910	15	445,000
	16	Total assets. Add lines 1 through 15 (must equal line 34)	2,186,138	16	2,485,616
	17	Accounts payable and accrued expenses	65,560	17	170,500
	18	Grants payable		18	
	19	Deferred revenue	72,668	19	198,044
	20	Tax-exempt bond liabilities		20	
Š	21	Escrow or custodial account liability Complete Part IV of Schedule D		21	
Liabilities	22	Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons			
<u>.i.</u>		of failing member of any of these persons		22	
1	23	Secured mortgages and notes payable to unrelated third parties	0	23	259,844
	24	Unsecured notes and loans payable to unrelated third parties		24	
	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	1,388	25	0
	l		100.010		600,000

					l .
	18	Grants payable		18	
	19	Deferred revenue	72,668	19	198,044
	20	Tax-exempt bond liabilities		20	
Ç.	21	Escrow or custodial account liability Complete Part IV of Schedule D		21	
iabilities	22	Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		22	
<u>.e</u>					
_	23	Secured mortgages and notes payable to unrelated third parties	0	23	259,844
	24	Unsecured notes and loans payable to unrelated third parties		24	
	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	1,388	25	0
	26	Total liabilities. Add lines 17 through 25	139,616	26	628,388

iabi		or family member of any of these persons		22	
Ξ	23	Secured mortgages and notes payable to unrelated third parties	0	23	259,844
	24	Unsecured notes and loans payable to unrelated third parties		24	
	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	1,388	25	(
	26	Total liabilities. Add lines 17 through 25	139,616	26	628,388
Balances		Organizations that follow FASB ASC 958, check here ► ☑ and complete lines 27, 28, 32, and 33.	4 570 520		4 200 045
픙	27	Net assets without donor restrictions	1,578,522	27	1,399,913
<u> </u>	28	Net assets with donor restrictions	468,000	28	457,315
Fund		Organizations that do not follow FASB ASC 958, check here ▶ □ and complete lines 29 through 33.			
ō	29	Capital stock or trust principal, or current funds		29	
sets	30	Paid-in or capital surplus, or land, building or equipment fund		30	
Ass	31	Retained earnings, endowment, accumulated income, or other funds		31	
	32	Total net assets or fund balances	2,046,522	32	1,857,228
Net	33	Total liabilities and net assets/fund balances	2,186,138	33	2,485,616

1,399,913

1,857,228

2,485,616

Form **990** (2019)

457,315

Total liabilities and net assets/fund balances

33

Form	990 (2019)				Page 12
Pa	Reconcilliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI			<u> </u>	
1	Total revenue (must equal Part VIII, column (A), line 12)	1		4	.019,374
2	Total expenses (must equal Part IX, column (A), line 25)	2			,346,582
3	Revenue less expenses Subtract line 2 from line 1	3			-327,208
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4			,046,522
5	Net unrealized gains (losses) on investments	5			137,914
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 0)	9			0
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10		1	,857,228
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				П
	Check it believate a contains a response of note to any line in this ranzation.		· · ·	Yes	No
1	Accounting method used to prepare the Form 990				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a	ĺ	No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed separate basis, consolidated basis, or both	on a			
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2ь	Yes	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate consolidated basis, or both	basis,			
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis				
C	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?		2c	Yes	li
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch	edule O			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the S	ngle			

Audit Act and OMB Circular A-133? 3a Nο **b** If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits 3b

Form **990** (2019)

Additional Data

Software ID:

FABRETTO OFFERS AN INTEGRAL. OUALITY EDUCATION TO MORE THAN 40.000 CHILDREN AND YOUTH IN NICARAGUA. PROMOTING THE PARTICIPATION OF PARENTS.

Software Version:

EIN: 36-3894824

Name: FABRETTO CHILDREN'S FOUNDATION INC

Form 990 (2019)

Form 990, Part III, Line 4a:

TEACHERS, AND COMMUNITY LEADERS, WHO COLLABORATE TOWARDS CREATING AN ENVIRONMENT IN WHICH CHILDREN CAN THRIVE IN ORDER TO EMBRACE THE THREE MAIN STAGES OF LIFE IN HUMAN DEVELOPMENT (INFANCY, CHILDHOOD, ADOLESCENCE), FABRETTO IMPLEMENTS THREE STRATEGIC EDUCATIONAL PROGRAMS EARLY EDUCATION, PRIMARY EDUCATION, AND TECHNICAL VOCATIONAL EDUCATION THESE PROGRAMS HAVE BEEN RECOGNIZED INTERNATIONALLY BY ENTITIES LIKE LEGO FOUNDATION, ASHOKA, AND WORLD INNOVATION SUMMIT FOR EDUCATION (WISE) IN ADDITION, FABRETTO IMPLEMENTS CROSS-CUTTING INITIATIVES FOCUSED ON HEALTH AND FOOD SECURITY, GENDER EQUALITY, VIOLENCE PREVENTION, COMMUNITY DEVELOPMENT, CONSERVATION OF THE ENVIRONMENT, AS WELL AS UNIVERSAL AND CHRISTIAN VALUES 1 EARLY EDUCATION PROGRAMTHE EARLY EDUCATION PROGRAM'S OBJECTIVE IS TO PROVIDE CHILDREN AGES 0-6 WITH THE ATTENTION, STIMULATION, AND NUTRITION THEY NEED TO SUCCEED AT THE PRIMARY LEVEL AND BEYOND. THE PROGRAM SUPPORTS CHILDREN'S HOLISTIC DEVELOPMENT AND EARLY LEARNING, HELPING CHILDREN TO MEET KEY MILESTONES IN ACCORDANCE WITH THEIR DEVELOPMENTAL STAGE THROUGH THE PROGRAM, CHILDREN FROM 0 TO 6 YEARS OF AGE DEVELOP SKILLS IN AREAS OF PERSONAL AND SOCIAL FORMATION IN ORDER TO GRADUALLY BUILD AWARENESS OF THEIR EXISTENCE AS INDEPENDENT PERSONS BELONGING TO A FAMILY. A COMMUNITY, AND TO ONE WORLD COMMUNICATION IS ALSO DEVELOPED TO EXCHANGE IDEAS FEELINGS, AND EMOTIONS WITH OTHERS AND TO ENCOURAGE THE DEVELOPMENT OF COGNITIVE PROCESSES THAT FAVOR LEARNING FABRETTO AIMS TO PROMOTE THE TRANSITION TO THE NEXT EDUCATIONAL STAGES FOR CHILDREN IN VULNERABLE SITUATIONS, HIGHLIGHTING THE EDUCATIONAL ROLE OF THE FAMILY, THE COMMUNITY, AND THE TEAM OF TEACHERS WHO GUARANTEE OUALITY EDUCATION BY PARTICIPATING IN EXTENSIVE TRAINING AND WORKSHOPS PROGRAM INITIATIVES - PARENT TRAINING ON EARLY STIMULATION, AS WELL AS HEALTH AND NUTRITION EDUCATION, HELD IN HOMES AND COMMUNITY CENTERS - TEACHER TRAINING ON EARLY LITERACY METHODOLOGIES - SUPPORT WITH SCHOOL SUPPLIES FOR RURAL PUBLIC PRESCHOOLS - CHILD NUTRITION SUPPORT THROUGH SCHOOL MEALS, FOOD SUPPLEMENTS, VITAMINS, AND MORE 2 PRIMARY EDUCATIONPRIMARY EDUCATION IS A FUNDAMENTAL HUMAN RIGHT, CONTRIBUTING TO THE MITIGATION OF CHILD LABOR, AS WELL AS ALLOWING INDIVIDUALS TO PLAY AN ACTIVE ROLE IN SOCIETY THE GOAL OF THE PROGRAM IS TO HELP PRIMARY STUDENTS FROM UNDERSERVED COMMUNITIES DEVELOP THEIR FULL POTENTIAL THROUGH PERSONALIZED, AGE-APPROPRIATE TEACHING METHODOLOGIES IT AIMS TO CONTRIBUTE TO THE REDUCTION OF EDUCATIONAL GAPS BY PROMOTING THE DEVELOPMENT OF LIFE SKILLS SUCH AS LITERACY, LOGICAL-MATHEMATICAL REASONING, AS WELL AS CRITICAL AND CREATIVE THINKING THROUGH PLAY-BASED METHODOLOGIES. FABRETTO TEACHERS STIMULATE THE LEARNING PROCESS FOR SUCCESSFULLY ACHIEVING THE NEXT STAGE OF EDUCATION PROGRAM INITIATIVES - AFTER-SCHOOL ENRICHMENT ACTIVITIES THAT FOCUS ON READING. MATH. WRITING, AND SOCIO-EMOTIONAL DEVELOPMENT - TEACHER TRAINING ON PLAY-BASED, INNOVATIVE METHODOLOGIES SUCH AS OPEN LEARNING - PARENT TRAINING ON STRATEGIES TO SUPPORT CHILDREN'S EDUCATION. NUTRITION. AND FOOD SECURITY - SUPPORT WITH SCHOOL SUPPLIES FOR PUBLIC PRIMARY SCHOOLS - CHILD NUTRITION SUPPORT THROUGH SCHOOL MEALS, FOOD SUPPLEMENTS, VITAMINS, AND MORE - LITERACY PROMOTION THROUGH READING CLUBS, FAIRS, MOBILE LIBRARIES, AMONG OTHERS - ONGOING EVALUATION OF STUDENT READING, WRITING, AND MATHEMATICAL SKILLS 3 TECHNICAL VOCATIONAL EDUCATION FABRETTO RECOGNIZES THE NEED TO CONNECT VOCATIONAL TECHNICAL TRAINING TO THE WORLD OF LABOR, TECHNOLOGICAL PROGRESS, AND COMMUNITY DEVELOPMENT PROCESSES IN GENERAL FOR THIS REASON. THROUGH THE TECHNICAL EDUCATION PROGRAM, FABRETTO EMPOWERS YOUTH AND THEIR FAMILIES WITH THE NECESSARY SKILLS TO DEVELOP AND SUSTAIN THEIR LIVELIHOODS THAT, IN TURN, ALLOW THEM TO BREAK THE CYCLE OF POVERTY IN ORDER TO MAKE THE MOST OF ITS POTENTIAL, VOCATIONAL-TECHNICAL TRAINING AT FABRETTO IS CLOSELY LINKED TO THE STUDY AND ADOPTION OF TECHNOLOGIES. AS WELL AS TO THE ACOUISITION OF PRACTICAL KNOWLEDGE, THEORY, AND SKILLS RELATED TO ECONOMIC AND SOCIAL TRENDS, RECOGNIZING WORK EXPERIENCE IN ITSELF AS A PART OF LEARNING IN ADDITION, FABRETTO HAS TAKEN A STEP TOWARDS "LEARNING BY EARNING," LINKING STUDENTS AND SMALL PRODUCERS IN RURAL AREAS TO VALUE CHAINS, THROUGH ITS OFFER OF TRAINING IN ENTREPRENEURSHIP, ACCESS TO A REVOLVING CREDIT FUND, AND THE FORMATION OF STRATEGIC ALLIANCES WITH BUYERS AND OTHER FACTORS IN VALUE CHAINS SUCH AS COFFEE, CHIA, AND HONEY PROGRAM INITIATIVES - IMPLEMENTATION OF SAT AND SATEC. AN ALTERNATIVE PROGRAM OF SECONDARY EDUCATION AND TECHNICAL TRAINING WITH A FOCUS ON LEARNING BY DOING AND LEARNING BY EARNING FOR RURAL YOUTH WITH LIMITED ACCESS TO EDUCATION THE PROGRAM IS BASED ON THE INTERNATIONALLY RENOWNED METHODOLOGY CALLED TUTORIAL LEARNING SYSTEM (SAT IN SPANISH) -TECHNICAL AND VOCATIONAL COURSES THAT ALLOW YOUTH TO GENERATE INCOME AND CONTRIBUTE TO THEIR FAMILY'S ECONOMY, INCLUDING COURSES IN BEEKEEPING. ENTREPRENEURSHIP. COMPUTING. GRAPHIC DESIGN. ARTISANAL AGROINDUSTRY. JEWELRY-MAKING. AND MORE - FORMATION OF 4-H CLUBS -PROMOTION OF ENTREPRENEURSHIP INITIATIVES WITH SPECIAL SUPPORT FOR RURAL AND/OR LOW-INCOME WOMEN - ENGLISH COURSES, INCLUDING THE IMPLEMENTATION OF THE ACCESS MICROSCHOLARSHIP PROGRAM, AN INTENSIVE ENGLISH COURSE - CREATION OF COMMUNITY BANKS AND DIVERSIFIED PRODUCTIVE INITIATIVES IN BENEFICIARY COMMUNITIES - LINKING YOUTH AND THEIR FAMILIES TO MARKETS AND VALUE CHAINS TO IMPROVE THEIR LIVELIHOODS AND CONTRIBUTE TO THE ECONOMIC DEVELOPMENT OF THEIR COMMUNITIES - MANAGEMENT OF A REVOLVING CREDIT FUND FOR SMALL PRODUCERS AND ENTREPRENEURS -INTERNSHIPS IN ORDER TO FACILITATE ACCESS TO WORK EXPERIENCE AND EMPLOYMENT OPPORTUNITIES FOR YOUTH

efile GRAPHIC print - DO NOT PR			nt - DO NOT PROCESS	OT PROCESS As Filed Data -				
SCI		ULE A	- Bublio 4	Charity Statu	c and Dul	olic Supp	ort	OMB No 1545-0047
(For	m 99			Charity Statu	ion 501(c)(3)	organization or	I	2019
990I	EZ)			4947(a)(1) nonexe ▶ Attach to Form				
•		the Treasury	► Go to <u>www.irs</u>	.gov/Form990 for i			ormation.	Open to Public Inspection
Nam	e of th	he organiza HILDREN'S FOU					Employer identific	ation number
ADIRE	110 61	ILDREN 5 TOC	MUATION INC				36-3894824	
	rt I		for Public Charity State				See instructions.	
	rganiz		a private foundation because	•	•		/ A \ / ' \	
1	Ц	•	onvention of churches, or as					
2	Ш		scribed in section 170(b)(,			
3		·	or a cooperative hospital serv	_			•	
4		A medical r name, city,	esearch organization operate and state	ed in conjunction with	a hospital descri	bed in section :	170(b)(1)(A)(iii). E	nter the hospital's
5			ation operated for the benefi (iv). (Complete Part II)	t of a college or unive	rsity owned or op	perated by a gov	ernmental unit descri	bed in section 170
6		A federal, s	tate, or local government or	governmental unit de	scribed in sectio	on 170(b)(1)(A	\)(v).	
7	✓		ation that normally receives are at the state of the stat		s support from a	governmental u	ınıt or from the gener	al public described in
8		A communi	ty trust described in sectior	170(b)(1)(A)(vi)	(Complete Part I	I)		
9			ural research organization de rant college of agriculture S					ege or university or a
10		from activit	ation that normally receives ties related to its exempt fun income and unrelated busin See section 509(a)(2). (Co	ctions—subject to cer ess taxable income (le	tain exceptions,	and (2) no more	than 331/3% of its si	apport from gross
11			ation organized and operated	•	r public safety S	ee section 509	(a)(4).	
12		more public	ation organized and operated by supported organizations of through 12d that describes	described in section 5	09(a)(1) or sec	ction 509(a)(2). See section 509(a	
a		Type I. A so	supporting organization oper n(s) the power to regularly a Part IV, Sections A and B.	ated, supervised, or co	ontrolled by its s	upported organiz	zation(s), typically by	
b		Type II. A manageme	supporting organization sup nt of the supporting organiza plete Part IV, Sections A	ervised or controlled i ation vested in the sar				
c		Type III f	unctionally integrated. A sorganization(s) (see instruction	supporting organizatio				ited with, its
d		Type III n	on-functionally integrated integrated The organization (a) You must complete Par	d. A supporting organi n generally must satis	ization operated fy a distribution	in connection wi requirement and	th its supported orgai	
e		Check this	box if the organization receiv or Type III non-functionally	ved a written determir	nation from the I		pe I, Type II, Type II	I functionally
f	Enter		of supported organizations		-		_	
g	Provi	de the follow	ing information about the su	pported organization(s)			1
(i) Name of suppo organization				(iii) Type of organization (described on lines 1- 10 above (see instructions))	(iv) Is the org in your govern	anization listed ing document?	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
					Yes	No		
Tota			tion Act Notice, see the Ir		Cat No 11285			 90 or 990-EZ) 2019

Net income from unrelated business 20,228 business is regularly carried on

activities, whether or not the

10 Other income Do not include gain or loss from the sale of capital

Total support. Add lines 7 through

12 Gross receipts from related activities, etc. (see instructions)

and stop here. The organization qualifies as a publicly supported organization

box and stop here. The organization qualifies as a publicly supported organization

assets (Explain in Part VI)

11

organization

instructions

supported organization

2,406 17,600

13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization,

h 33 1/3% support test-2018. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this

5,636 13,548 4,754

59,128

6,108

41,418

Schedule A (Form 990 or 990-EZ) 2019

12

14

15

39,132

131,694

21,591,691

623,500

89 470 %

95 100 %

▶ 🗹

Section C. Computation of Public Support Percentage Public support percentage for 2019 (line 6, column (f) divided by line 11, column (f)) 15 Public support percentage for 2018 Schedule A, Part II, line 14 16a 33 1/3% support test—2019. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box

17a 10%-facts-and-circumstances test-2019. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported

18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see

h 10%-facts-and-circumstances test—2018. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly

P		upport Schedule for						
		Complete only if you cl						der Part II. If
		ne organization fails to	qualify under t	ne tests listed i	pelow, please co	omplete Part II.)	
56	ection A. Pub	ndar year			1			T
		r beginning in)	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1		contributions, and						
		ees received (Do not						
_		nusual grants ")						
2		from admissions, sold or services						
		facilities furnished in						
		at is related to the						
	organization's	tax-exempt purpose						
3		from activities that are						
		ed trade or business						
4	under section Tax revenues	F						
-		benefit and either paid						
		d on its behalf						
5		ervices or facilities						
		governmental unit to						
		on without charge						
6	Total. Add line	-						
/a		ded on lines 1, 2, and m disqualified persons						
b		ded on lines 2 and 3						
_		other than disqualified						
		exceed the greater of						
		of the amount on line						
_	13 for the yea Add lines 7a a							
8		rt. (Subtract line 7c						
0	from line 6)	it. (Subtract line / c						
Se	ection B. Tota	al Support				•		
		ıdar year	(-) 201E	(h) 2016	(=) 2017	(4) 2010	(-) 2010	(f) Tatal
		r beginning in) 🕨	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
9	Amounts fron	n line 6						
L0a		from interest,						
		yments received on						
		ns, rents, royalties and similar sources						
b		siness taxable income						
_		511 taxes) from						
		equired after June 30,						
	1975							
_	Add lines 10a							
11		rom unrelated business						
		included in line 10b, ot the business is						
	regularly carr							
12		Do not include gain or						
		sale of capital assets						
	(Explain in Pa							+
13	11, and 12)	rt. (Add lines 9, 10c,						
14	First five yea	a rs. If the Form 990 is foi	r the organization	's fırst, second, th	nird, fourth, or fift	th tax year as a se	ction 501(c)(3)	organization,
•		and stop here		, ,	, ,	•	()()	▶ □
Se		nputation of Public S	Support Perce	ntage				
15		percentage for 2019 (lin			column (f))		15	
16	• •	: percentage from 2018 S		•	(//		16	
		nputation of Investr					1 -0	
17		come percentage for 201			line 13. column (f	f))	17	
		come percentage from 20	,		25, 201411111 (1	• / /		
18				·	on line 14	aa 1 E ja waana 41	18 22 1/20/ and l	na 17 ia
		ort tests—2019. If the						_
		/3%, check this box and s	-					▶□
b	33 1/3% sup	pport tests—2018. If the	e organization did	not check a box	on line 14 or line	19a, and line 16 is	more than 33 i	_
	not more than	n 33 1/3%, check this box	and stop here.	The organization (qualifies as a publ	licly supported org	anızatıon	▶□
20	Private found	dation. If the organization	n did not check a	box on line 14, 1	19a, or 19b, check	this box and see	instructions	ightharpoons

Schedule A (Form 990 or 990-EZ) 2019

6

7

8

10a

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

			Yes	No
2	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	1		
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			
	ın section 509(a)(1) or (2)	2		

	describe the designation If historic and continuing relationship, explain	1	Γ
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		
	ın section 509(a)(1) or (2)	2	
la	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c)		Γ
	below	3a	Γ
1.	Did the appropriate and the cook appropriate appropriate and propriate and appropriate and app		Т

		_	
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		
	ın section 509(a)(1) or (2)	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	3a	
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		
ı	determination		

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				

	the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the			
	determination	3b	1	
С	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	3с		
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	4b		
С	Did the organization support any foreign supported organization that does not have an IRS determination under sections			

	Checked 12a or 12b in Part 1, 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			
С	Did the organization support any foreign supported organization that does not have an IRS determination under section: $501(c)(3)$ and $509(a)(1)$ or (2) ? If "Yes," explain in Part VI what controls the organization used to ensure that all supports			
	to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes	4c		
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		<u> </u>	
	organization's organizing document?	5b	1	

Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other

Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a

Was the organization controlled directly or indirectly at any time during the tax year by one or more disgualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes,"

Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting

Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in

Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding

Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether

certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes,"

Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes,"

than (1) its supported organizations. (11) 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

Substitutions only. Was the substitution the result of an event beyond the organization's control?

organization's supported organizations? If "Yes," provide detail in Part VI.

complete Part I of Schedule L (Form 990 or 990-EZ)

the organization had excess business holdings)

organization had an interest? If "Yes," provide detail in Part VI.

provide detail in Part VI.

answer line 10b below

substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)

which the supporting organization also had an interest? If "Yes," provide detail in Part VI.

5c

6

7

8

9a

9b

9с

10a

10b

Schedule A (Form 990 or 990-EZ) 2019

	dule A (Form 990 of 990-E2) 2019		۲	age :
Pai	t IV Supporting Organizations (continued)			
_			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11b		
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI	11c		
	ection B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year	1		
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 Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting	_		
	organization	2		
S	ection C. Type II Supporting Organizations		1	
	., 11 2 2		Yes	No
	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors 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		
S	ection D. All Type III Supporting Organizations			
			Yes	No
•	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing			
	documents in effect on the date of notification, to the extent not previously provided? Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization (s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s)			
2				
	D	2		
	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard	3		
<u> </u>	ection E. Type III Functionally-Integrated Supporting Organizations			
	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instruct	ions)		
	The organization satisfied the Activities Test Complete line 2 below	,		
	The organization is the parent of each of its supported organizations. Complete line 3 below			
	_		_L \	
(instru	ctions)	
	Activities Test Answer (a) and (b) below.		Yes	No
ā	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted			
	substantially all of its activities	2a		
ŀ	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement	2 h		
}	Parent of Supported Organizations Answer (a) and (b) below.	2b		
	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? <i>Provide details in Part VI</i> .	3a		
ŀ	Did the organizations? Provide details in Part VI. Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? If "Yes," describe in Part VI. the role played by the organization in this regard	3h		

3b

Page 6

1	Check here if the organization satisfied the Integral Part Test as a qualifying truinstructions. All other Type III non-functionally integrated supporting organizations.			
	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)	1		
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1 b		
С	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other 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		
2	Enter 85% of line 1	2		
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4	Enter greater of line 2 or line 3	4		
5	Income tax imposed in prior year	5		

Distributable Amount. Subtract line 5 from line 4, unless subject to emergency

7	Total annual distributions. Add lines 1 through 6			
8	Distributions to attentive supported organizations to wh details in Part VI) See instructions			
9	Distributable amount for 2019 from Section C, line 6			
10	Line 8 amount divided by Line 9 amount			
	Section E - Distribution Allocations	(i)	(ii) Underdistributions	(iii) Distributable

8	Distributions to attentive supported organizations to who	sive (provide						
9 Distributable amount for 2019 from Section C, line 6								
10	Line 8 amount divided by Line 9 amount							
	Section E - Distribution Allocations (see instructions)	(iii) Distributable Amount for 2019						
1	1 Distributable amount for 2019 from Section C, line 6							
2	2 Underdistributions, if any, for years prior to 2019							

details in Part VI) See instructions	sive (provide								
9 Distributable amount for 2019 from Section C, line 6									
10 Line 8 amount divided by Line 9 amount									
Section E - Distribution Allocations (see instructions)	(iii) Distributable Amount for 2019								
1 Distributable amount for 2019 from Section C, line 6	1 Distributable amount for 2019 from Section C, line 6								
2 Underdistributions, if any, for years prior to 2019 (reasonable cause required explain in Part VI) See instructions									

Schedule A (Form 990 or 990-EZ) (2019)

3 Excess distributions carryover, if any, to 2019

q Applied to underdistributions of prior years h Applied to 2019 distributable amount i Carryover from 2014 not applied (see

j Remainder Subtract lines 3g, 3h, and 3i from 3f 4 Distributions for 2019 from Section D, line 7

a Applied to underdistributions of prior years b Applied to 2019 distributable amount c Remainder Subtract lines 4a and 4b from 4 5 Remaining underdistributions for years prior to 2019, if any Subtract lines 3g and 4a from line 2 If the amount is greater than zero, explain in Part VI

6 Remaining underdistributions for 2019 Subtract lines 3h and 4b from line 1 If the amount is greater than zero, explain in Part VI See instructions 7 Excess distributions carryover to 2020. Add lines

a Excess from 2015. **b** Excess from 2016. c Excess from 2017. d Excess from 2018. e Excess from 2019.

a From 2014. **b** From 2015. **c** From 2016. e From 2018. f Total of lines 3a through e

instructions)

See instructions

31 and 4c 8 Breakdown of line 7

\$

cnedule A (Form 990 or 990-EZ) 2	Page 8					
Supplemental Information. Provide the explanations required by Part II, line 10, Part II, line 17a or 17b, Part III, line 12, Part I 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 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)							
		Facts And Circumstances Test					
990 Sched	lule A, Supplemen	tal Information					
Ret	urn Reference	Explanation					
SCHEDULE .	A, PART II, LINE 10,	OTHER INCOME - 2016 AMOUNT \$ 17,600 2017 AMOUNT \$ 9,448 2018 AMOUNT \$ 10,975 2019 AM					

OUNT \$ 41,418 EQUITY EARNINGS IN SUB - 2017 AMOUNT \$ 4,100 2018 AMOUNT \$ 48,153 EXPLANATION OF OTHER INCOME

SCHEDULE D

DLN: 93493220006070

Cat No 52283D Schedule D (Form 990) 2019

OMB No 1545-0047

Supplemental Financial Statements

► Complete if the organization answered "Yes," on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.
► Attach to Form 990.

(Form 990)

	tment of the Treasury		Attach to Form						n to Public
	al Revenue Service	► Go to <u>www.irs.gov/Form</u>	<u>990</u> for instruction	ons a	nd the latest info				spection
	me of the organiz RETTO CHILDREN'S FO					Empl	oyer id	entification	number
							394824		
Pa		ations Maintaining Donor Advis of the organization answered "Ye				or Acco	unts.		
	Complete	in the organization answered Te	(a) Donoi			(b) Func	ls and other	accounts
1	Total number at en	nd of year				`			
2	Aggregate value of	f contributions to (during year)							
3	Aggregate value of	grants from (during year)							
4	Aggregate value at	end of year							
5		on inform all donors and donor advisor perty, subject to the organization's ex-			ets held in donor ac	lvised fu	ınds are		Yes 🗌 No
6		on inform all grantees, donors, and do es and not for the benefit of the donor						rmissible	Yes □ No
Pa		ation Easements. If the organization answered "Ye:	s" on Form 990,	Part	IV, line 7.				
1	Purpose(s) of cons	servation easements held by the orgar	nization (check all t	hat ap	oply)				
	☐ Preservation	of land for public use (e g , recreation	or education)		Preservation of an	historic	ally imp	ortant land	area
	☐ Protection of	natural habitat			Preservation of a	certified	historic	structure	
	Preservation	of open space							
2		through 2d if the organization held a	qualified conservati	on co	ntribution in the foi	rm of a	conserva	ation	
		ast day of the tax year					Held a	at the End o	of the Year
a		onservation easements ricted by conservation easements				2a			
b c	_	vation easements on a certified historic	structure included	lın (a	١	2b 2c			
d		vation easements included in (c) acqui		•	•	2d			
u		the National Register				Zu			
3	Number of consertax year ►	vation easements modified, transferre	d, released, extingi	uished	i, or terminated by	the orga	anızatıor	n during the	
4	Number of states	where property subject to conservatio	n easement is locat	ed 🕨					
5	Does the organiza and enforcement o	ition have a written policy regarding th of the conservation easements it holds	e periodic monitori ?	ng, ın	spection, handling	of violat	ions,	☐ Yes	□ No
6	Staff and voluntee	er hours devoted to monitoring, inspec	ting, handling of vi	olatio	ns, and enforcing co	onservat	tion eas	ements durır	ng the year
	>								
7	Amount of expens ▶ \$	ses incurred in monitoring, inspecting,	handling of violatio	ns, ar	nd enforcing conser	vation e	asemen	ts during the	e year
8	Does each conservand section 170(h	vation easement reported on line 2(d)	above satisfy the r	equire	ements of section 1	70(h)(4)(B)(ı)		
•	`							Yes	□ No
9	balance sheet, and	ribe how the organization reports consi d include, if applicable, the text of the accounting for conservation easement	footnote to the org						
Par		ations Maintaining Collections of the organization answered "Ye				er Sim	iilar As	ssets.	
1a	art, historical trea	n elected, as permitted under SFAS 11 sures, or other similar assets held for III, the text of the footnote to its finan	public exhibition, e	ducat	ion, or research in f				
b	historical treasure	n elected, as permitted under SFAS 11 s, or other similar assets held for publ s relating to these items							
((i) Revenue included	d on Form 990, Part VIII, line 1					▶ \$		
(i	ii)Assets ıncluded ın	n Form 990, Part X					▶ \$		
2	If the organization	received or held works of art, historic required to be reported under SFAS 1				ncıal ga	· —		
а	Revenue included	on Form 990, Part VIII, line 1					> \$ _		
b	Assets included in	Form 990 Part X					▶ \$		<u></u>

d Equipment .

Sche	dule D	(Form 990) 2019									I	Page 2
Par	t III	Organizations M	aintaining Col	lections of Art,	Histori	cal Tre	asure	s, or Other	Similar As	sets (conti	nued)	
3		the organization's acq (check all that apply)	juisition, accession	n, and other records	, check a	any of th	e follov	ving that are a	significant u	se of its coll	ection	
а		Public exhibition			d		oan or	exchange prog	rams			
b		Scholarly research			е		ther					
c		Preservation for future	e generations									
4	Provid Part X	le a description of the	organization's col	lections and explain	how the	y furthe	r the or	ganization's ex	empt purpos	ie in		
5		g the year, did the org s to be sold to raise fui							ılar	☐ Yes	□ No	
Pa	rt IV	Escrow and Cust Complete if the or X, line 21.			rm 990	, Part I\	/, line	9, or reporte	d an amou	nt on Form	n 990, Pa	art
1a		organization an agent ed on Form 990, Part		an or other intermed	diary for	contribu	tions o	r other assets r	not	Yes	□ No	
b	If "Ye	s," explain the arrange	ement in Part XIII	and complete the f	ollowina	table			Ar	nount		
c		ning balance		aa cop.c.c ac .				1c				
d	_	ons during the year						1d				
е		outions during the yea	r					1e				
f	Ending	g balance						1f				
2a	Did th	e organization include	an amount on Fo	rm 990, Part X, line	21, for	escrow o	r custo	dial account lia	bility?	Yes	 □ No	
Ь		s," explain the arrange							·			
	rt V	Endowment Fun										
		Complete of the or	ganization answ	vered "Yes" on Fo								
	_			(a) Current year	(b) P	rior year		Two years back	(d) Three yea		Four years	
	-	ing of year balance .		494,960		591,6	46	446,049	3	399,857	43	7,236
		utions		178,006		-65,8	38	170,666		70,330	-1	6,446
		estment earnings, gair	•	178,000		-03,6	36	170,000		70,330	-1	
		or scholarships					_					
	and pro	expenditures for faciliting and series and series are series and series are series are series and series are series are series and series are s	es	34,405		30,8	48	25,069		24,138	2	.0,933
		strative expenses .					_					
g	End of	year balance		638,561		494,9	60	591,646	4	146,049	39	9,857
2 a		le the estimated perce designated or quasi-e	-	ent year end balance 81 210 %	e (line 1g	g, columi	n (a)) h	eld as				
Ь	Perma	anent endowment ►	18 790 %									
С	Temp	orarily restricted endo	wment >									
За	Are th	ercentages on lines 2a iere endowment funds ization by			tion that	are held	d and a	dmınıstered foı	the		Yes	No No
	-	related organizations								3a(i)		No
	(ii) re	elated organizations .								3a(ii)		No
b	If "Ye	s" on 3a(11), are the re	lated organization	is listed as required	on Sche	dule R?				3b		
4	Descr	ibe in Part XIII the inte			wment f	unds						
Pa	rt VI	Land, Buildings,			000	D		44 - 6 - 5	000 0		•	
	Descri	Complete If the or ption of property	ganization answ (a) Cost or oth			, Part I\ basıs (oth		11a. See For			0. ook value	
	Descri	paiding property	(investme		corourer	Dasis (UIII	(c) Accumulated u	CPICCIALIOIT	(u) D	ook value	
12	Land					128,	328				1	.28,328
	Building					385,			8,710			377,048
		old improvements				303,			3,710			
_			1	ı								

184,559

Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c)).

91,677

597,053

92,882

Part VII	Investments—Other Securities. Complete if the organization answered "Yes" on Form 990) Part IV I	ine 11l	See Form 990 F	Part X line 1	2
	(a) Description of security or category (including name of security)	(b) Book value			d of valuation	
(1) Financia	ıl derivatives	74.55				
	held equity interests					
(A)						
(B)						
(C)						
(D)						
(E)						
(F)						
(G)						
(H)						
Total. (Colum	n (b) must equal Form 990, Part X, col (B) line 12)	•				
Part VIII	Investments—Program Related. Complete if the organization answered 'Yes' on Form 990 (a) Description of investment), Part IV, l	ine 11d	(b) Book value	(c) Metho Cost or end	13. d of valuation -of-year market value
(1)						
(2)						
(3)						
(4)						
(5)						
(6)						
(7)						
(8)						
(9)						
Total. (Colum	n (b) must equal Form 990, Part X, col (B) line 13)		•			
Part IX	Other Assets. Complete if the organization answered 'Yes' on Form 990,	. Part IV, lıı	ne 11d	. See Form 990, Par		ook value
(1)DUE FRO	(a) Description				(0)	445,000
(3)						
(4)						
(5)						
(6)						
(7)						
(8)						
(9)						
Total. (Colu	mn (b) must equal Form 990, Part X, col (B) line 15) Other Liabilities.					445,000
	Complete if the organization answered 'Yes' on Form 990, (a) Description of liabi		ne 11e	or 11f.See Form	990, Part X,	line 25. (b) Book value
1. (1) Federal	income taxes	ncy				(b) Book value
(2)						
(3)						
(4)						
(5)						
(6)						
(7)						
(8)						
(9)						
	n (b) must equal Form 990, Part X, col (B) line 25)			<u>.</u>		
	or uncertain tax positions In Part XIII, provide the text of the footr	note to the o	rganıza	tion's financial stater	L nents that re	
organization	's liability for uncertain tax positions under FIN 48 (ASC 740) Chec	k here if the	text of	the footnote has be	en provided i	n Part XIII 🗹

Schedule D (Form 990) 2019

	Complete if the organi	zation answered 'Yes' on Form 990, Pari	IV, I	ine 12a.		
1	Total revenue, gains, and other s	upport per audited financial statements .			1	
2	Amounts included on line 1 but no	ot on Form 990, Part VIII, line 12				
а	Net unrealized gains (losses) on i	nvestments	2a			
b	Donated services and use of facili	ties	2b			
c	Recoveries of prior year grants		2c			
d	Other (Describe in Part XIII) .		2d			
е	Add lines 2a through 2d				2e	
3	Subtract line 2e from line 1 .				3	
4	Amounts included on Form 990, F	Part VIII, line 12, but not on line 1				
а	Investment expenses not include	d on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII) .		4b			
c	Add lines 4a and 4b		٠		4c	
5	Total revenue Add lines 3 and 4	c. (This must equal Form 990, Part I, line 12)			5	
Par		penses per Audited Financial Statem zation answered 'Yes' on Form 990, Pari			Returr	1.
1	Total expenses and losses per au-		. IV, I	ille 12a.	1	
2	Amounts included on line 1 but no		•			
a		ties	2a	I		
b			2b		-	
c	Other losses		2c		-	
d	Other (Describe in Part XIII)		2d		\dashv \mid	
e	` ,					
3	•				3	
3 4	Amounts included on Form 990, F				3	
	·	, , ,	4a	I		
a	•	d on Form 990, Part VIII, line 7b	4a 4b		-	
b	,				- <u>.</u>	
_ C					4c	
5	t XIII Supplemental Info	4c. (This must equal Form 990, Part I, line 18) •		5	
		art II, lines 3, 5, and 9, Part III, lines 1a and	4 D==	+ IV lines 1 nud 2 Do		4. David V. Juna 2. David
XI,	lines 2d and 4b, and Part XII, lines	art II, lines 3, 5, and 9, Part III, lines Ia and s 2d and 4b Also complete this part to provide	any a	idditional information	rt v, iine	4, Part X, line 2, Part
	Return Reference		Ex	planation		
See A	Additional Data Table					

Page 4

Page 5		chedule D (Form 990) 2019	Schedule D (F
	ormation (continued)	Part XIII Supplemental Info	
	Explanation	Return Reference	Re

Schedule D (Form 990) 2019

Additional Data

Software ID: Software Version:

EIN: 36-3894824

Name: FABRETTO CHILDREN'S FOUNDATION INC

Supplemental Information

Return Reference Explanation LINE 4 THE FOUNDATION'S ENDOWMENT HAS BEEN FUNDED BY DONOR-RESTRICTED CONTRIBUTIONS TO BE HELD IN

TED ENDOWMENT FUND FOR SCHOLARSHIPS AND SUSTAINABILITY OF THE FOUNDATION

PART V, LINE 4

THE FOUNDATION'S ENDOWMENT HAS BEEN FUNDED BY DONOR-RESTRICTED CONTRIBUTIONS TO BE HELD IN
PERPETUITY, THE EARNINGS OF WHICH ARE TO BE USED TO PROVIDE SCHOLARSHIPS TO LA FAMILIA PA
DRE FABRETTO PARTICIPANTS OR ALUMNI IN ADDITION, THE FOUNDATION MAINTAINS A BOARD-DESIGNA

Supplemental Information									
Return Reference	Explanation								
PART X, LINE 2	THE ORGANIZATION EVALUATED ITS UNCERTAINTY IN INCOME TAXES FOR THE YEAR ENDED DECEMBER 31, 2019, AND DETERMINED THAT THERE WERE NO MATTERS THAT WOULD REQUIRE RECOGNITION IN THE FIN ANCIAL STATEMENTS OR THAT MAY HAVE ANY EFFECT ON ITS TAX-EXEMPT STATUS								

_ _ _

efile	efile GRAPHIC print - DO NOT PROCESS			As Filed Data	-		DLN:	93493220006070
	EDULE F n 990)	State	ement of	Activities (Outside the Un	ited S	tates	OMB No 1545-0047
(1 011		► Comp	lete if the organ	iization answered " ► Attach t	5, or 16.	2019		
•	nent of the Treasury Revenue Service	•	► Go to www.irs	gov/Form990 for ı	nstructions and the latest i	nformation	•	Open to Public Inspection
Vame	of the organization						Employer ider	ntification number
FABRE	TTO CHILDREN'S FO	DUNDATION II	NC				36-3894824	
Par		nformation Part IV, line		s Outside the l	Jnited States. Comple	ete If the	organization a	nswered "Yes" on
1	For grantmakers	. Does the or	rganızatıon ma	aintain records to	substantiate the amoun	t of its gra	ants and	
	other assistance, t	he grantees'	eligibility for t	the grants or assis	stance, and the selection	r criteria u	ısed	
	to award the grant	s or assistan	ce?					☑ Yes 🗌 No
2	For grantmakers outside the United		Part V the org	ganization's proce	dures for monitoring the	use of its	s grants and ot	her assistance
3	Activites per Region	(The following	ng Part I, line 3	table can be dupli	cated if additional space is	s needed)		
	(a) Region		(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in the region	(d) Activities conducted in region (by type) (such as, fundraising, program services, investments, grants to recipients located in the region)	program spe	ity listed in (d) is a service, describe cific type of s) in the region	(f) Total expenditures for and investments in the region
	See Add'l Data				-			
3a 9	Sub-total			1 8				3,575,980
Ь	otal from continuati	on sheets to						
-	Part I	and 2h)		0 0				0 3,575,980
C	Totals (add lines 3a	and ob)		1 0				3,575,960

	IN NICARAGUA AND FOR SUPPORTING EDUCATION AND FOOD SECURITY PROGRAMS			
				_

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as taxexempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter

Schedule F (Form 990) 2019

Schedule F (Form 990) 2019							Page 3
Part IIII Grants and Ot				ed States. Complete i	f the organization ar	swered "Yes" on Form	990, Part IV, line 16.
	duplicated if addit			1	1	T	
(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of noncash assistance	(g) Description of noncash assistance	(h) Method of valuation (book, FMV, appraisal, other)
						Saha	dula E (Form 990) 2019

Sche	dule F (Form 990) 2019		Page 4
Par	rt IV 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

ichedule F (Form 990) 2019 Page						
Part V Supplemental Information Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting manual 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 part any additional information. See instructions.						
Return	Le F, Supplemental Information Explanation					
Reference						

THIS MEANS THAT SOMETIMES REPORTS ARE SENT QUARTERLY, EVERY SIX MONTH OR ANNUALLY REPORTS CONTAIN NOT ONLY THE RESULTS OF THE PROJECT BUT ALSO INCLUDE A FINANCIAL DESCRIPTION HOW THE MONEY

WAS INVESTED THESE REPORTS ARE APPROVED BY THE PROGRAM DIRECTOR AND THE CFO

990 Schedule F, Supplemental Information

ACCRUAL BASIS OF ACCOUNTING

Reference		Explanation
1	PART I, LINE 3	THE ACTIVITIES ARE GROUPED BASED ON CLASS OF EXPENSES AND THE AMOUNT IS DETERMINED USING THE

990 Schedule F, Supplemental Information					
Return Reference	Explanation				

PART III ACCOUNTING METHOD

Additional Data

CENTRAL AMERICA AND THE

CARIBBEAN

Software ID: Software Version:

EIN: 36-3894824

3,317,925

Name: FABRETTO CHILDREN'S FOUNDATION INC

Form 990 Schedule F Part I - Activities Outside The United States							
(a) Region	(b) Number of	(c) Number of	(d) Activities conducted	(e) If activity listed in (d)	(f) Total expenditures		

	offices in the region	employees or agents in region	in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	is a program service, describe specific type of service(s) in region	for region
CENTRAL AMERICA AND THE CARIBBEAN	1		IMPLEMENTATION (EDUCATION, FOOD	PROGRAM ADMINISTRATION, OPERATIONS, FIELD EXECUTION	258,055

0 IGRANTS TO RECIPIENTS

LOCATED IN REGION

36-3894824 Part I Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part. Indicate whether the organization raised funds through any of the following activities. Check all that apply Mail solicitations e Solicitation of non-government grants Internet and email solicitations Solicitation of government grants Phone solicitations ☐ Special fundraising events ☐ In-person solicitations Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? ☐ Yes ☐ No If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization (i) Name and address of individual (ii) Activity (iii) Did (iv) Gross receipts (v) Amount paid to (vi) Amount paid to or entity (fundraiser) fundraiser have from activity (or retained by) (or retained by) custody or fundraiser listed in organization control of col (i) contributions? Yes No Total 3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Cat No 50083H Schedule G (Form 990 or 990-EZ) 2019

Supplemental Information Regarding

Fundraising or Gaming Activities

Complete if the organization answered "Yes" on Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a

Attach to Form 990 or Form 990-EZ.

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

DLN: 93493220006070 OMB No 1545-0047

Open to Public

Inspection

Employer identification number

SCHEDULE G

(Form 990 or 990-EZ)

Department of the Treasury

Name of the organization

FABRETTO CHILDREN'S FOUNDATION INC

Internal Revenue Service

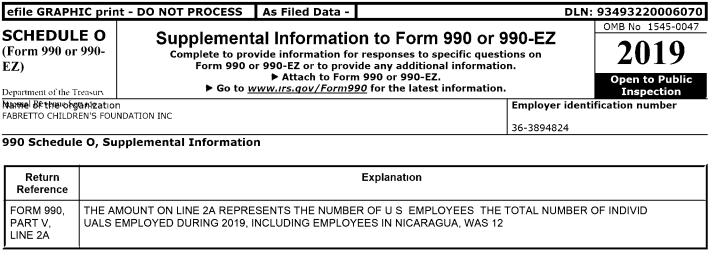
Pa	rt II Fundraising Events. Comple				
	than \$15,000 of fundraising e gross receipts greater than \$5		gross income on Form	i 990-EZ, lines I and b	D. LIST EVENTS WITH
		(a)Event #1	(b) Event #2	(c)Other events	(d) Total events (add col (a) through
		NY NIGHT FOR NINOS	D.C. NIGHT FOR NINOS		col (c))
		(event type)	(event type)	(total number)	
<u>e</u>					
ē					
Revenue					
	1 Gross receipts	480,762	235,574	236,071	952,407
	2 Less Contributions	468,582	226,064	226,906	921,552
	3 Gross income (line 1 minus line 2)	12,180	9,510	9,165	30,855
	4 Cash prizes	2,380	400	6,925	9,705
w	5 Noncash prizes	11,879	7,856	22,758	42,493
nse	6 Rent/facility costs		7,000	9,398	16,398
χρο	7 Food and beverages	43,754	34,124	16,169	94,047
Direct Expenses	8 Entertainment	3,700	3,700	4,155	11,555
Ē	9 Other direct expenses	20,539	993	6,138	27,670
_	10 Direct expense summary Add lines 4 t	:hrough 9 ın column (d)		•	201,868
	11 Net income summary Subtract line 10	from line 3, column (d)		•	-171,013
Par	t III Gaming. Complete if the orga		s" on Form 990, Part I	V, line 19, or reported	· · · · · · · · · · · · · · · · · · ·
	on Form 990-EZ, line 6a.		·		
Revenue		(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))
eve					
<u>~</u>	1 Gross revenue				
ses	2 Cash prizes				
Expense	3 Noncash prizes				
மி #					
Direct	4 Rent/facility costs				
	5 Other direct expenses	_	_		
		Yes%	Yes%	Yes%	
	6 Volunteer labor	☐ No	☐ No	☐ No	
	7 Direct expense summary Add lines 2 t	through 5 in column (d)			
	8 Net gaming income summary Subtrac	t line 7 from line 1. colum	n (d)		
_					
9 a	Enter the state(s) in which the organization licensed to conduct ga				☐ Yes ☐ No
b	If "No," explain	-			
10a	Were any of the organization's gaming lic				
b	If "Yes," explain			. ,	∐ Yes

che	edule G (Form 990 or 990-EZ) 2019				F	age 3
.1	Does the organization conduct gaming activities with nonmembers?			□Yes	Пис	
2	Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or oth formed to administer charitable gaming?	ner entity		□Yes		
3	Indicate the percentage of gaming activity conducted in					
а	The organization's facility		13a			%
b	An outside facility		13b			%
4	Enter the name and address of the person who prepares the organization's gaming/special events	books and rec	ords			
	Name •					
	Address ▶					
5a	Does the organization have a contract with a third party from whom the organization receives gar revenue?	ning		□Yes	□No	
b	If "Yes," enter the amount of gaming revenue received by the organization ▶ \$amount of gaming revenue retained by the third party ▶ \$	and the				
c	If "Yes," enter name and address of the third party					
	Name ►					
	Address ▶					
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					
.6						
0	Gaming manager information					
	Name 🕨					
	Gaming manager compensation ▶ \$					
	Description of services provided ▶					
	☐ Director/officer ☐ Employee ☐ Independent con	tractor				
7	Mandatory distributions					
а	Is the organization required under state law to make charitable distributions from the gaming pro retain the state gaming license?	ceeds to		□Yes	Пио	
b	Enter the amount of distributions required under state law distributed to other exempt organization	ons or spent		_ ,63	,	
	in the organization's own exempt activities during the tax year $lacktriangle$ \$					
Par	Supplemental Information. Provide the explanations required by Part I, line III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any add					5.
_	Return Reference Explanation					

Schedule G (Form 990 or 990-EZ) 2019

efile GRAPHIC print - DO NOT PROCESS As Filed Data -DLN: 93493220006070 SCHEDULE M OMB No 1545-0047 **Noncash Contributions** (Form 990) ▶ Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30. ▶ Attach to Form 990. ▶Go to www.irs.gov/Form990 for the latest information. Open to Public Department of the Treasury Internal Revenue Service Inspection Name of the organization **Employer identification number** FABRETTO CHILDREN'S FOUNDATION INC 36-3894824 Part I **Types of Property** (a) (b) (c) (d) Check If Number of contributions or Noncash contribution Method of determining applicable items contributed amounts reported on noncash contribution amounts Form 990, Part VIII, line 1g Art—Works of art . . Art-Historical treasures Art—Fractional interests Books and publications Clothing and household goods Cars and other vehicles Χ 15,767 FMV Boats and planes . . Intellectual property . . Securities—Publicly traded . 10 Securities—Closely held stock . Securities—Partnership, LLC, or trust interests . . . Securities—Miscellaneous . Qualified conservation contribution—Historic structures 14 Oualified conservation contribution—Other . Real estate—Residential . Real estate—Commercial . Χ 398,032 FMV Real estate—Other . 17 Collectibles . . . 18 536,015 FMV 19 Food inventory . . . Χ 20 Drugs and medical supplies . 21 Taxidermy Historical artifacts . . 22 23 Scientific specimens . . Archeological artifacts . **BEAUTY** Χ 118,534 FMV Other ▶ (SUPPLIES Χ 95,994 FMV **SCHOOL** Other ► (SUPPL AUCTION Χ 42,493 FMV Other ► (ITEMS 27 Other ▶ (HOTEL STAY) 7,108 FMV 28 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement Yes No 30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period? 30a Nο **b** If "Yes," describe the arrangement in Part II 31 Yes Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions? 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash Nο b If "Yes," describe in Part II If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule M (Form 990) (2019) Cat No 51227J

Schedule M (Form 990) (2019)	Page 2					
is reporting in Part I, co	ation. Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization lumn (b), the number of contributions, the number of items received, or a combination of both. Also my additional information					
Return Reference	Explanation					
PART I, COLUMN (B)	THE NUMBER REPORTED IN COLUMN (B) IS THE NUMBER OF CONTRIBUTIONS OF EACH TYPE OF PROPERT					
	Schedule M (Form 990) (2019)					



Return Explanation

FORM 990, PART V, IVIDUALS AND COULD NOT CLAIM A U.S. TAX DEDUCTION ON THE DONATION
LINE 7H

Return Explanation
Reference

LINE 2

FORM 990, CARL MARINACCI, BOARD MEMBER, IS FATHER OF KEVIN MARINACCI, PRESIDENT AND CEO
PART VI,
SECTION A,

Return Explanation

FORM 990, THE FORM 990 IS PREPARED BY AN INDEPENDENT ACCOUNTING FIRM AND PROVIDED TO THE TREASURER A PART VI, ND THE FINANCE COMMITTEE FOR REVIEW AN ELECTRONIC COPY OF THE DRAFT 990 IS PROVIDED TO TH SECTION B, E FULL BOARD OF DIRECTORS PRIOR TO FILING

LINE 11B

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 12C	UPON BEING HIRED AND EACH YEAR THEREAFTER, ALL BOARD MEMBERS, OFFICERS AND STAFF ARE REQUI RED TO SIGN A STATEMENT THAT AFFIRMS THEY RECEIVED A COPY OF THE CONFLICTS OF INTEREST POL ICY, HAVE READ AND UNDERSTAND THE POLICY, AGREE TO COMPLY WITH THE POLICY, AND DISCLOSE AN Y CONFLICTS OF INTEREST OR POTENTIAL CONFLICTS OF INTEREST THAT HAVE ARISEN IN THE PREVIOU S YEAR (AND WERE NOT ALREADY DISCLOSED) OR ARE EXPECTED IN THE COMING YEAR ALL FABRETTO B OARD MEMBERS, OFFICERS, AND STAFF RETURN THESE SIGNED STATEMENTS TO THE BOARD SECRETARY, W HO KEEPS THEM ON FILE FOR AT LEAST SEVEN YEARS IF A BOARD MEMBER OR OFFICER BELIEVES HE O R SHE HAS A CONFLICT OF INTEREST OR PERCEIVED CONFLICT OF INTEREST, HE OR SHE MUCH INFORM THE CHAIRPERSON OF THE BOARD IN WRITING, DISCLOSING THE NATURE OF THE CONFLICT OF INTEREST THE CHAIRPERSON THEN BRINGS THE MATTER TO THE FULL BOARD FOR REVIEW

Return Explanation
Reference

FORM 990,	CEO COMPENSATION FOR OTHER NON-PROFITS OF SIMILAR MISSION AND INCOME ARE SURVEYED AND COMP
PART VI,	ARED TO THE FOUNDATION CEO'S SALARY (USING PUBLIC INFORMATION ON CEO COMPENSATION GATHERED
SECTION B,	FROM IRS 990S) THIS INFORMATION IS PROVIDED TO THE COMPENSATION COMMITTEE THE COMPENSAT
LINE 15	ION COMMITTEE REVIEWS THE SALARY INFORMATION AND DETERMINES COMPENSATION LEVELS FOR THE CE
	O OTHER OFFICERS AND KEY EMPLOYEE SALARIES ARE ALSO REVIEWED AND APPROVED BY THE COMPENSA
	TION COMMITTEE ON AN ANNUAL BASIS

Explanation Return Reference

FORM 990. THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS. CONFLICT OF INTEREST POLICY. AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC UPON REQUEST ADDITIONALLY. THE ORGANIZATION'S FINANCI AL STATEMENTS AND FORM 990 ARE AVAILABLE TO THE PUBLIC ON ITS WEBSITE

PART VI. SECTION C. LINE 19

990 Schedule O, Supplemental Information

efile GRAPHIC print - DO NOT PROCESS As Filed Data -DLN: 93493220006070 OMB No 1545-0047 **SCHEDULE R Related Organizations and Unrelated Partnerships** 2019 (Form 990) ► Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37. ▶ Attach to Form 990. Open to Public ▶ Go to www.irs.gov/Form990 for instructions and the latest information. Department of the Treasury Inspection Internal Revenue Service Name of the organization **Employer identification number** FABRETTO CHILDREN'S FOUNDATION INC 36-3894824 Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33. Part I (e) Legal domicile (state Direct controlling Name, address, and EIN (if applicable) of disregarded entity Primary activity Total income End-of-year assets or foreign country) entity

Part II Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year. (c) (d) Exempt Code section (e) (g) Name, address, and EIN of related organization Primary activity Legal domicile (state Public charity status Direct controlling Section 512(b) or foreign country) (if section 501(c)(3)) (13) controlled entity? Yes No (1) FABRETTO CHILDREN'S FOUNDATION INC-NICARAGUA AID FOR NICARAGUAN NU FCF-US Yes 500 MTS ABAJO YOUTH MANAGUA For Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat No 50135Y Schedule R (Form 990) 2019

IV Identification of Related Organizations Taxable as a Corporation or Trust. Complete if the organization answered "Yes" on Form 990, Part IV, line because it had one or more related organizations treated as a corporation or trust during the tax year. (a) Name, address, and ERI of related organizations treated as a corporation or trust during the tax year. (b) (c) (d) (d) (d) (r) (controlled or freeling comparation or trust) (d) (d) (d) (r) (controlled or freeling controlled organization answered "Yes" on Form 990, Part IV, line because it had one or more related organizations treated as a corporation or trust. during the tax year. (a) (b) (c) (c) (d) (d) (d) (controlled or freeling controlled organization answered "Yes" on Form 990, Part IV, line because it had one or more related organizations treated as a corporation or trust. during the tax year. (f) (s) (r) (s) (r) (r) (s) (r) (r	alor Per ging ow er?	(j) Gener mana partn	(i) Code V-UBI nount in box 20 of chedule K-1 Form 1065)	tionate ions?	(h Dispropi allocat	(g) Share of end-of-year assets	(f) Share of total income	(e) dominant me(related, nrelated, uded from ex under tions 512- 514)	controlling inc entity ex	(c) Legal domicile (state or foreign country)	(b) Primary activity		(a) Name, address, and EIN of related organization
because it had one or more related organizations treated as a corporation or trust during the tax year. (a) Name, address, and EIN of related organization Primary activity Legal domicile (state or foreign country) ETTO COMPANIA COMERCIAL SOCIEDAD ANONIMA ABAJO (b) Primary activity Legal domicile (state or foreign country) NU FABRETTO CHILDREN'S FOUNDATION INC C -147,062 500,632 98 000 %	No	Yes		No	Yes								
because it had one or more related organizations treated as a corporation or trust during the tax year. (a) Name, address, and EIN of related organization Name, address, and EIN of related organization Name, address, and EIN of related organization Nu FABRETTO COMPANIA COMERCIAL SOCIEDAD ANONIMA ABAJO (b) Primary activity Legal domicile (state or foreign country) Nu FABRETTO CHILDREN'S FOUNDATION INC (c) Type of entity (C corp, S corp, or trust) Share of end-of-year assets Nu FABRETTO CHILDREN'S FOUNDATION INC													
because it had one or more related organizations treated as a corporation or trust during the tax year. (a) Name, address, and EIN of related organization (b) Primary activity Legal domicile (state or foreign country) ETTO COMPANIA COMERCIAL SOCIEDAD ANONIMA ABAJO (b) Primary activity Legal domicile (state or foreign country) NU FABRETTO CHILDREN'S FOUNDATION INC (d) Type of entity (C corp, S corp, or trust) Share of end-of-year assets Percentage ownership Ownership (h) Percentage ownership C -147,062 500,632 98 000 %													
because it had one or more related organizations treated as a corporation or trust during the tax year. (a) Name, address, and EIN of related organization Name, address, and EIN of related organization Name, address, and EIN of related organization Share of end-of-year assets ETTO COMPANIA COMERCIAL SOCIEDAD ANONIMA ABAJO ABAJO (b) Primary activity Legal domicile (state or foreign country) NU FABRETTO CHILDREN'S FOUNDATION INC (c) Type of entity (C corp, S corp, or trust) Share of end-of-year assets Percentage ownership C -147,062 500,632 98 000 %	+												
because it had one or more related organizations treated as a corporation or trust during the tax year. (a) Name, address, and EIN of related organization Name, address, and EIN of related organization Name, address, and EIN of related organization Nu FABRETTO COMPANIA COMERCIAL SOCIEDAD ANONIMA ABAJO (b) Primary activity Legal domicile (state or foreign country) Nu FABRETTO CHILDREN'S FOUNDATION INC (c) Type of entity (C corp, S corp, or trust) Share of end-of-year assets Nu FABRETTO CHILDREN'S FOUNDATION INC													
because it had one or more related organizations treated as a corporation or trust during the tax year. (a) Name, address, and EIN of related organization Name, address, and EIN of related organization Name, address, and EIN of related organization Nu FABRETTO COMPANIA COMERCIAL SOCIEDAD ANONIMA ABAJO (b) Primary activity Legal domicile (state or foreign country) Nu FABRETTO CHILDREN'S FOUNDATION INC (c) Type of entity (C corp, S corp, or trust) Share of end-of-year assets Nu FABRETTO CHILDREN'S FOUNDATION INC													
because it had one or more related organizations treated as a corporation or trust during the tax year. (a) Name, address, and EIN of related organization Name, address, and EIN of related organization Name, address, and EIN of related organization Nu FABRETTO COMPANIA COMERCIAL SOCIEDAD ANONIMA SALE OF MERCHANDISE NU FABRETTO CHILDREN'S FOUNDATION INC Nu FABRETTO CHILDREN'S FOUNDATION INC SALE OF MERCHANDISE Nu FABRETTO CHILDREN'S FOUNDATION INC Nu FABRETTO CHILDREN'S FOUNDATION INC	+												
because it had one or more related organizations treated as a corporation or trust during the tax year. (a) Name, address, and EIN of related organization Name, address, and EIN of related organization Name, address, and EIN of related organization Nu FABRETTO COMPANIA COMERCIAL SOCIEDAD ANONIMA ABAJO (b) Primary activity Legal domicile (state or foreign country) Nu FABRETTO CHILDREN'S FOUNDATION INC (c) Type of entity (C corp, S corp, or trust) Share of end-of-year assets Nu FABRETTO CHILDREN'S FOUNDATION INC													
because it had one or more related organizations treated as a corporation or trust during the tax year. (a) Name, address, and EIN of related organization Name, address, and EIN of related organization Name, address, and EIN of related organization Share of end-of-year assets ETTO COMPANIA COMERCIAL SOCIEDAD ANONIMA ABAJO ABAJO (b) Primary activity Legal domicile (state or foreign country) NU FABRETTO CHILDREN'S FOUNDATION INC (c) Type of entity (C corp, S corp, or trust) Share of end-of-year assets Percentage ownership C -147,062 500,632 98 000 %													
TTO COMPANIA COMERCIAL SOCIEDAD ANONIMA SALE OF MERCHANDISE NU FABRETTO CHILDREN'S FOUNDATION INC 500,632 98 000 %	34	. lıne), Part IV	orm 9	s" on F	wered "Ye	zation ansv						
ABAJO FOUNDATION INC	Section (13) of en) ntage	(I Perce	(g) of end-o	Share	(f) Share of total	(e) s of entity rp, S corp,	year. Illing Type (C co	during the ta	c) gal nicile foreign	a corporatio	rganizations treated as	because it had one or more related (a) Name, address, and EIN of
	Section (13)) ntage rship	(I Perce owne	(g) of end-o year ssets	Share	(f) Share of total Income	(e) s of entity rp, S corp,	year. Illing Type (C co	Direct contentity FABRETTO	on or trus c) gal nicile or foreign ntry)	a corporatio (Le don (state o cou	rganizations treated as (b) Primary activity	because it had one or more related (a) Name, address, and EIN of related organization
	Section (13) of er) ntage rship	(I Perce owne	(g) of end-o year ssets	Share	(f) Share of total Income	(e) s of entity rp, S corp,	year. Type (C co	during the ta (d) Direct cont entity FABRETTO CHILDREN'S	on or trus c) gal nicile or foreign ntry)	a corporatio (Le don (state o cou	rganizations treated as (b) Primary activity	because it had one or more related (a) Name, address, and EIN of related organization O COMPANIA COMERCIAL SOCIEDAD ANONIMA
	Section (13) of er) ntage rship	(I Perce owne	(g) of end-o year ssets	Share	(f) Share of total Income	(e) s of entity rp, S corp,	year. Type (C co	during the ta (d) Direct cont entity FABRETTO CHILDREN'S	on or trus c) gal nicile or foreign ntry)	a corporatio (Le don (state o cou	rganizations treated as (b) Primary activity	because it had one or more related (a) Name, address, and EIN of related organization O COMPANIA COMERCIAL SOCIEDAD ANONIMA
	Section (13) of er) ntage rship	(I Perce owne	(g) of end-o year ssets	Share	(f) Share of total Income	(e) s of entity rp, S corp,	year. Type (C co	during the ta (d) Direct cont entity FABRETTO CHILDREN'S	on or trus c) gal nicile or foreign ntry)	a corporatio (Le don (state o cou	rganizations treated as (b) Primary activity	because it had one or more related (a) Name, address, and EIN of related organization O COMPANIA COMERCIAL SOCIEDAD ANONIMA
	Section (13) of er) ntage rship	(I Perce owne	(g) of end-o year ssets	Share	(f) Share of total Income	(e) s of entity rp, S corp,	year. Type (C co	during the ta (d) Direct cont entity FABRETTO CHILDREN'S	on or trus c) gal nicile or foreign ntry)	a corporatio (Le don (state o cou	rganizations treated as (b) Primary activity	because it had one or more related (a) Name, address, and EIN of related organization O COMPANIA COMERCIAL SOCIEDAD ANONIMA
	Section (13) of er) ntage rship	(I Perce owne	(g) of end-o year ssets	Share	(f) Share of total Income	(e) s of entity rp, S corp,	year. Type (C co	during the ta (d) Direct cont entity FABRETTO CHILDREN'S	on or trus c) gal nicile or foreign ntry)	a corporatio (Le don (state o cou	rganizations treated as (b) Primary activity	because it had one or more related (a) Name, address, and EIN of related organization O COMPANIA COMERCIAL SOCIEDAD ANONIMA
	Section (13) of er) ntage rship	(I Perce owne	(g) of end-o year ssets	Share	(f) Share of total Income	(e) s of entity rp, S corp,	year. Type (C co	during the ta (d) Direct cont entity FABRETTO CHILDREN'S	on or trus c) gal nicile or foreign ntry)	a corporatio (Le don (state o cou	rganizations treated as (b) Primary activity	because it had one or more related (a) Name, address, and EIN of related organization O COMPANIA COMERCIAL SOCIEDAD ANONIMA

Name of related organization

Reimbursement paid to related organization(s) for expenses . . .

Reimbursement paid by related organization(s) for expenses . . .

(1)FABRETTO COMPANIA COMERCIAL SOCIEDAD ANONIMA

(2)FABRETTO COMPANIA COMERCIAL SOCIEDAD ANONIMA

10

1q

1r

1s Yes

Schedule R (Form 990) 2019

(d)

Method of determining amount involved

No

No No

No

Pa	Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.			
	Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule		Yes	No
1 D	ouring the tax year, did the orgranization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			
а	Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	1a		No
b	Gift, grant, or capital contribution to related organization(s)	1 b		No
c	Gift, grant, or capital contribution from related organization(s)	1c		No
d	Loans or loan guarantees to or for related organization(s)	1d	Yes	
e	Loans or loan guarantees by related organization(s)	1e		No
f	Dividends from related organization(s)	1f		No
п	Sale of assets to related organization(s).	1a	\vdash	No

·	Girl, grant, or capital contribution from related organization(5).	-~		1
d	Loans or loan guarantees to or for related organization(s)	1 d	Yes	
е	Loans or loan guarantees by related organization(s)	1e		No
f	Dividends from related organization(s)	1f		No
g	Sale of assets to related organization(s)	1 g		No
h	Purchase of assets from related organization(s)	1h		No

	one, grane, or capital contribution from related organization(3)	11	I	
d	Loans or loan guarantees to or for related organization(s)	1d	Yes	
e	Loans or loan guarantees by related organization(s)	1e		No
f	Dividends from related organization(s)	1f		No
g	Sale of assets to related organization(s)	1 g		No
h	Purchase of assets from related organization(s)	1h		No
i	Exchange of assets with related organization(s)	1i		No
j	Lease of facilities, equipment, or other assets to related organization(s)	1j		No
k	Lease of facilities, equipment, or other assets from related organization(s)	1k		No
	Performance of services or membership or fundraising solicitations for related organization(s)	11		No
m	Performance of services or membership or fundraising solicitations by related organization(s)	1m		No
	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n		No

(b)

Transaction

type (a-s)

D

(c)

Amount involved

600,000

169,920

FMV

FMV

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds

Part VI Unrelated Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partner was not a related organization. See instructions regarding exclusion	rship through w n for certain inv	hich the o estment p	rganization co partnerships	nduc	ted more thar	five perc	ent of its acti	vities (measui	red b	oy total assets	or gross r	rever	nue) that
(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512- 514)		(e) re all partners section 501(c)(3) rganizations?	(f) Share of total Income	(g) Share of end-of-year assets	(h) Disproprtiona allocations?	(h) Disproprtionate allocations?		(1) General d managin partner	g	(k) Percentage ownership
			514)	Yes	No			Yes	No		Yes	No	
-													
												П	
										Schedul	e R (Form	1 99	0) 2019

Schedule R (Form 990) 2019 Page **5** Part VII Supplemental Information Provide additional information for responses to questions on Schedule R (see instructions) Return Reference Explanation SCHEDULE R, PART II FABRETTO CHILDREN'S FOUNDATION, INC. NICARAGUA (FCF NU) IS LISTED ON SCHEDULE R, PART II AS A RELATED ORGANIZATION, BUT IS ACTUALLY A FOREIGN OFFICE OF FABRETTO CHILDREN'S FOUNDATION, INC. THE OFFICE WAS REQUIRED TO BE REGISTERED SEPARATELY UNDER NICARAGUA'S REGULATIONS AND IS DISCLOSED AS SUCH IN FABRETTO'S CONSOLIDATED FINANCIAL STATEMENTS HOWEVER, SINCE FCF NU IS NOT A SEPARATE LEGAL ENTITY, ALL OF ITS ACTIVITIES HAVE BEEN INCLUDED IN THIS ANNUAL RETURN WITH FABRETTO CHILDREN'S FOUNDATION, INC AND REPORTED AS ONE

IENTITY