

Form 990-EZ

Short Form

294922 203306 1
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)

2019

Open to Public
InspectionDepartment of the Treasury
Internal Revenue Service

► Do not enter social security numbers on this form, as it may be made public.
► Go to www.irs.gov/Form990EZ for instructions and the latest information.

A For the 2019 calendar year, or tax year beginning 01 January, 2019, and ending 31 December, 2019

B Check if applicable	C Name of organization Humanity Beyond Barriers, Inc	D Employer identification number 474067812
<input type="checkbox"/> Address change	Number and street (or P O box if mail is not delivered to street address) 1803 Arena Drive	E Telephone number 530 758 0360
<input type="checkbox"/> Name change	City or town, state or province, country, and ZIP or foreign postal code Davis, CA 95618, USA	F Group Exemption Number ► 03
<input type="checkbox"/> Initial return		
<input type="checkbox"/> Final return/terminated		
<input type="checkbox"/> Amended return		
<input type="checkbox"/> Application pending		

G Accounting Method: Cash Accrual Other (specify) ►I Website: ► www.humanitybeyondbarriers.orgJ Tax-exempt status (check only one) — 501(c)(3) 501(c)() (insert no) 4947(a)(1) or 527K Form of organization: Corporation Trust Association Other

L Add lines 5b, 6c, and 7b to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if total assets (Part II, column (B)) are \$500,000 or more, file Form 990 instead of Form 990-EZ ► \$ 85,244

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (see the instructions for Part I) ►

Check if the organization used Schedule O to respond to any question in this Part I

1 Contributions, gifts, grants, and similar amounts received	1	85,154
2 Program service revenue including government fees and contracts	2	-0-
3 Membership dues and assessments	3	-0-
4 Investment income	4	90
5a Gross amount from sale of assets other than inventory	5a	
b Less: cost or other basis and sales expenses	5b	-0-
c Gain or (loss) from sale of assets other than inventory (subtract line 5b from line 5a)	5c	-0-
6 Gaming and fundraising events:		
a Gross income from gaming (attach Schedule G if greater than \$15,000)	6a	-0-
b Gross income from fundraising events (not including \$ from fundraising events reported on line 1) (attach Schedule G if the sum of such gross income and contributions exceeds \$15,000)	6b	
c Less: direct expenses from gaming and fundraising events	6c	-0-
d Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract line 6c)	6d	-0-
7a Gross sales of inventory, less returns and allowances	7a	-0-
b Less: cost of goods sold	7b	-0-
c Gross profit or (loss) from sales of inventory (subtract line 7b from line 7a)	7c	-0-
8 Other revenue (describe in Schedule O)	8	-0-
9 Total revenue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8	9	85,244
10 Grants and similar amounts paid (list in Schedule O)	10	84,375
11 Benefits paid to or for members	11	-0-
12 Salaries, other compensation, and employee benefits	12	-0-
13 Professional fees and other payments to independent contractors	13	-0-
14 Occupancy, rent, utilities, and maintenance	14	-0-
15 Printing, publications, postage, and shipping	15	-0-
16 Other expenses (describe in Schedule O)	16	8,162
17 Total expenses. Add lines 10 through 16	17	92,537
18 Excess or (deficit) for the year (subtract line 17 from line 9)	18	(-7,293)
19 Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)	19	201,205
20 Other changes in net assets or fund balances (explain in Schedule O)	20	-0-
21 Net assets or fund balances at end of year. Combine lines 18 through 20	21	193,912

For Paperwork Reduction Act Notice, see the separate instructions.

Cat No 10642I

Form 990-EZ (2019)

Part II Balance Sheets (see the instructions for Part II)Check if the organization used Schedule O to respond to any question in this Part II

		(A) Beginning of year	(B) End of year
22	Cash, savings, and investments	201,205	22 193,912
23	Land and buildings	-0-	23 -0-
24	Other assets (describe in Schedule O)	-0-	24 -0-
25	Total assets	201,205	25 193,912
26	Total liabilities (describe in Schedule O)	-0-	26 -0-
27	Net assets or fund balances (line 27 of column (B) must agree with line 21)	201,205	27 193,912

Part III Statement of Program Service Accomplishments (see the instructions for Part III)Check if the organization used Schedule O to respond to any question in this Part III What is the organization's primary exempt purpose? Public Charity

Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. In a clear and concise manner, describe the services provided, the number of persons benefited, and other relevant information for each program title.

Expenses

(Required for section 501(c)(3) and 501(c)(4) organizations, optional for others)

28	Ahsan family Project This program provided financial assistance on a monthly basis to a family of 5 with 3 small children for livelihood and education. Sudden demise of the only working member of the family left them helpless HBB came forward by creating a fund through community fund drive The Project successfully ended in 2019			
28a	(Grants \$ 44,897) If this amount includes foreign grants, check here ► <input type="checkbox"/>	44,897		
29	Promoting Physical and Psychological Health of children in a Slum in Dhaka This pilot project aimed for the prevention of child malnutrition and disease of the most vulnerable population of the slums Meals and health education were provided to 40 children, training were given to mothers for sustainability in this longitudinal study			
29a	(Grants \$ 9,998) If this amount includes foreign grants, check here ► <input type="checkbox"/>	9,998		
30	Environmental Health and Safety of Individuals Exposed to Medical Wastes Awareness building, safe handling, First Aid training in accidental injuries and proper management of medical wastes among health care workers in remote district of Rangpur and scavenger people from there in northern Bangladesh More than 6,000 beneficiaries			
30a	(Grants \$ 9,500) If this amount includes foreign grants, check here ► <input type="checkbox"/>	9,500		
31	Other program services (describe in Schedule O)			
31a	(Grants \$ 19,980) If this amount includes foreign grants, check here ► <input type="checkbox"/>	19,980		
32	Total program service expenses (add lines 28a through 31a)			32 84,375

Part IV List of Officers, Directors, Trustees, and Key Employees (list each one even if not compensated—see the instructions for Part IV)Check if the organization used Schedule O to respond to any question in this Part IV

?(a) Name and title	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC) (if not paid, enter -0-)	(d) Health benefits, contributions to employee benefit plans, and deferred compensation	(e) Estimated amount of other compensation
Sheikh A Selim President	5	-0-	-0-	-0-
Raymond L Rodriguez Vice President	0 5	-0-	-0-	-0-
Aqeem Kabir General Secretary	3	-0-	-0-	-0-
Mohammed M Khandaker Treasurer	3	-0-	-0-	-0-
Halima Karim Assistant Secretary	3	-0-	-0-	-0-
James S Cullor Assistant Treasurer	1	-0-	-0-	-0-
Saayma Shahid Director of Youth Programs	3	-0-	-0-	-0-
Zaodat H Rahman Director of Technology and Media	2	-0-	-0-	-0-
Sirajul Chowdhury Director of PR and Communications	2	-0-	-0-	-0-

ABD

Part V Other Information (Note the Schedule A and personal benefit contract statement requirements in the instructions for Part V.) Check if the organization used Schedule O to respond to any question in this Part V

33 Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a detailed description of each activity in Schedule O

	Yes	No
33	✓	21

34 Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the change on Schedule O. See instructions

34	✓	21
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35a Did the organization have unrelated business gross income of \$1,000 or more during the year from business activities (such as those reported on lines 2, 6a, and 7a, among others)?

35a	✓
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b If "Yes" to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule O

35b	✓
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c Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III

35c	✓
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36 Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N

36	✓	21
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37a Enter amount of political expenditures, direct or indirect, as described in the instructions ► **37a** -0-

37a	-0-
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b Did the organization file **Form 1120-POL** for this year?

37b	✓
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38a Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee; or were any such loans made in a prior year and still outstanding at the end of the tax year covered by this return?

38a	✓	21
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b If "Yes," complete Schedule L, Part II, and enter the total amount involved

38b	-0-
-----	-----

39 Section 501(c)(7) organizations. Enter:

39a	-0-
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a Initiation fees and capital contributions included on line 9

39b	-0-
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40a Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911 ► _____ ; section 4912 ► _____ ; section 4955 ► _____

40a	-0-
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b Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I

40b	✓	21
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c Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 ► _____

40c	-0-
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d Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax on line 40c reimbursed by the organization ► _____

40d	-0-
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e All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T

40e	✓
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41 List the states with which a copy of this return is filed ► **California**

42a The organization's books are in care of ► **Sheikh Selim** Telephone no. ► **530 758 0360**

42a	95618
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Located at ► **1803 Arena Drive, Davis, CA** ZIP + 4 ►

42b	✓
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b At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)?

42c	✓
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If "Yes," enter the name of the foreign country ►

See the instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).

42d	✓
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c At any time during the calendar year, did the organization maintain an office outside the United States?

If "Yes," enter the name of the foreign country ►

42e	✓
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43 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of **Form 1041**—Check here and enter the amount of tax-exempt interest received or accrued during the tax year ► **43**

43	-0-
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44a Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ

44a	✓
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b Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ

44b	✓
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c Did the organization receive any payments for indoor tanning services during the year?

44c	✓
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d If "Yes" to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O

44d	✓
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45a Did the organization have a controlled entity within the meaning of section 512(b)(13)?

45a	✓
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b 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," Form 990 and Schedule R may need to be completed instead of Form 990-EZ. See instructions

45b	✓
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46 Did the organization engage, directly or indirectly, in political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I

Part VI Section 501(c)(3) Organizations Only

All section 501(c)(3) organizations must answer questions 47–49b and 52, and complete the tables for lines 50 and 51.

Check if the organization used Schedule O to respond to any question in this Part VI

		Yes	No
47	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	47	✓
48	Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	48	✓
49a	Did the organization make any transfers to an exempt non-charitable related organization?	49a	✓
b	If "Yes," was the related organization a section 527 organization?	49b	✓
50	Complete this table for the organization's five highest compensated employees (other than officers, directors, trustees, and key employees) who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."		

f Total number of other employees paid over \$100,000 ► None

51 Complete this table for the organization's five highest compensated independent contractors who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."

(a) Name and business address of each independent contractor	(b) Type of service	(c) Compensation

d Total number of other independent contractors each receiving over \$100,000 . . ► None

52 Did the organization complete Schedule A? **Note:** All section 501(c)(3) organizations must attach a completed Schedule A Yes No

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

Sign Here		11-11-20
	Signature of officer	Date
	Sheikh A. Selim, President	11/11/2020
	Type or print name and title	

Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed	PTIN
	Firm's name ►		Firm's EIN ►		
	Firm's address ►		Phone no. ►		

May the IRS discuss this return with the preparer shown above? See instructions Yes No

SCHEDULE A
(Form 990 or 990-EZ)**Public Charity Status and Public Support**

OMB No 1545-0047

2019**Open to Public
Inspection**Department of the Treasury
Internal Revenue Service

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

► Attach to Form 990 or Form 990-EZ.

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

Name of the organization

Humanity Beyond Barriers, Inc.

Employer identification number

47-4067812

Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 12, check only one box)

1 A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i)**. 07
2 A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E (Form 990 or 990-EZ).)
3 A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**.
4 A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii)**. Enter the hospital's name, city, and state
5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv)**. (Complete Part II.)
6 A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v)**.
7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
8 A community trust described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
9 An agricultural research organization described in **section 170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university.
10 An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2)**. (Complete Part III.)
11 An organization organized and operated exclusively to test for public safety. See **section 509(a)(4)**.
12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2)**. See **section 509(a)(3)**. Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.
a **Type I**. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B**.
b **Type II**. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C**.
c **Type III functionally integrated**. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions) **You must complete Part IV, Sections A, D, and E**.
d **Type III non-functionally integrated**. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V**.
e Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.
f Enter the number of supported organizations
g Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-10 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
(A)						
(B)						
(C)						
(D)						
(E)						
Total						

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")	10,150	119,457	161,191	107,828	85,244	483,870
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf	-0-	-0-	-0-	-0-	-0-	-0-
3 The value of services or facilities furnished by a governmental unit to the organization without charge	-0-	-0-	-0-	-0-	-0-	-0-
4 Total. Add lines 1 through 3	10,150	119,457	161,191	107,828	85,244	483,870
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						60,292
6 Public support. Subtract line 5 from line 4						423,578

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
7 Amounts from line 4	10,150	119,457	161,191	107,828	85,244	483,870
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	-0-	-0-	-0-	-0-	-0-	-0-
9 Net income from unrelated business activities, whether or not the business is regularly carried on	-0-	-0-	-0-	-0-	-0-	-0-
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	-0-	-0-	-0-	-0-	-0-	-0-
11 Total support. Add lines 7 through 10						483,870
12 Gross receipts from related activities, etc (see instructions)					12	
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, check this box and stop here						<input checked="" type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2019 (line 6, column (f) divided by line 11, column (f))	14	%
15 Public support percentage from 2018 Schedule A, Part II, line 14	15	%
16a 33½% support test—2019. If the organization did not check the box on line 13, and line 14 is 33½% or more, check this box and stop here . The organization qualifies as a publicly supported organization ► <input type="checkbox"/>		
b 33½% support test—2018. If the organization did not check a box on line 13 or 16a, and line 15 is 33½% or more, check this box and stop here . The organization qualifies as a publicly supported organization ► <input type="checkbox"/>		
17a 10%-facts-and-circumstances test—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 organization ► <input type="checkbox"/>		
b 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 supported organization ► <input type="checkbox"/>		
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions ► <input type="checkbox"/>		

Department of the Treasury
Internal Revenue Service

Name of the organization
Humanity Beyond Barriers, Inc

Employer identification number
47-4067812

Form 990EZ Part I, Line 10 Seven project-grants were disbursed in 2019

1 Ahsan family project (\$44 9k, grantee, family of 5, 625 Buchan Way, Folsom CA 95630) A community fund-drive project, involved livelihood

support, education and training of the helpless family members due to unexpected sudden tragedy of the family bread earner. Continued

for little over 3 years, this project not only provided basic livelihood needs but financial and emotional support through HBB opened doors of hope

and brighter days ahead HBB is committed to uplift underprivileged individuals, families and communities to ensure health and education

2 Promoting physical and Psychological Health of Children in a Dhaka, Bangladesh slum (\$10 998k, Grantee -Institute of Allergy and Clinical

Immunology, Bangladesh (IACIB), Zinzira Road, Savar, Dhaka-1341, Bangladesh) This project services includes providing lunch, education and

personal hygiene of small children (n=40) of a day-care center in the Karail slum in Dhaka city Impacts of nutritious meal on malnutrition, hygiene

material distribution, primary health care training At the conclusion of this 6 months pilot project, the findings indicate that the intervention improved

nutritional status, basic health education and hygiene practice among these poor children of the day-care center

3 Environmental Health Safety of individuals Exposed to Medical Wastes (\$9 5k, Grantee - PRISM, Bangladesh Foundation, Flt 3, H41, Rd 6/C

Banani, Dhaka-1213, Bangladesh) Arrange and provides awareness among people due to exposure to medical wastes and their management

This program also conducts effective training sessions on safe handling of medical wastes and provide First Aid training to reduce accidental health

injury risks Target beneficiaries 6,167

4 Drinking water project in coastal Bangladesh for school children and local community (\$7 5k, Grantee - Promoting Sustainable Livelihood

Foundation, H4, Road 6, Banani, Dhaka-1213, Bangladesh) Water purification system to provide drinking water in Dacope, Khulna, Bangaldesh

Through Reverse Osmosis, purified drinking is provided to the students & staffs of Moukhali govt Primary school, members of adjacent local

community and market place Due to high salinity in this coastal region, access to clean drinking water is difficult and often causes waterborne

diseases and health problems Sixty-day implementation of the project and then 2,4 and 6 months observations of impacts of clean water

supply to the community Thousands of people are beneficiaries Efforts are underway by the grantee to make it sustainable

5 Sponsoring poor students with JAAGO (\$6 48k, Grantee - JAAGO Foundation, Rd 20, H28/K, Banani, Dhaka-1213, Bangladesh) Humanity Beyond

Barriers sponsoring 10 poor students, includes minority community, for their education to break the barrier of poverty & health From

elementary level enrollment through their High School education is current commitment to continue this project

6 2019 Bangladesh Flood victims relief grant (\$5k, Grantee - PRISM, Bangladesh Foundation, Flt 3, H41, Rd 6/C, Banani, Dhaka, Bangladesh)

(continued on page 2)

Name of the organization Humanity Beyond Barriers, Inc	Employer identification number 47-4067812
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(continued from page 1)

The devastating flood of 2019 in the northern part of Bangladesh caused enormous damage to the life and livelihood of the people, especially the

for the poor people. Homes, schools and other basic infrastructures were damaged. In collaboration with HBB partner organization, this project

provided relief and helped to built public facilities for the disadvantaged community. Thousands of people got direct or indirect help through

volunteer network efforts by the grantee

7 Homeless winter shelter and help, Davis, CA (\$1k, Grantee - Interfaith Rotating Winter Shelter (IRWS), 412 C street, Davis, CA 95616, USA)

Collaborative program with IRWS to help local homeless people in Davis in the winter season 2019 - clothings, shelter, wellness

990EZ Part I, Line 16 Expenses includes fundraising costs 2019, Winter drive project to help 50 homeless people in Sacramento (with

local Loaves and Fishes organization), HBB's annual winter drive help for seriously ill kids at Shriners Hospital for children, bank and

other financial institution (PayPal) fees

990EZ Part III, lines 28-30 Program/Projects described above, page 1, Schedule O