			Extended to May 15, 2	2018		_
	0	90	Return of Organization Exempt F	From I	ncome Tax	
Forr	n J	JU	Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue	•		^{ns)} 2016
		of the Treasury	Do not enter social security numbers on this form a	-	-	Open to Public
		enue Service	▶ Information about Form 990 and its instructions is ar year, or tax year beginning JUL 1, 2016 and e			Inspection
	heck if		f organization	inung O	1	cation number
D a	pplicab	le:	organization			ation number
	Addre	ess ONE	SIMPLE WISH, INC.			
	Name Chang	ge Doing b	usiness as		26-3	128590
	Initial return	Number	,	Room/suite		
	Final return termir	0	N. OLDEN AVENUE #292		609-	
	ated Amen	City or t	own, state or province, country, and ZIP or foreign postal code		G Gross receipts \$	
	_return]Appli		TON, NJ 08618			
	⊥tiòn pendi	ing same	nd address of principal officer:DANIELLE GLETOW as C above			
<u> </u>	-22-02	empt status:		r 527		
			ONESIMPLEWISH.ORG		1 '	
			X Corporation Trust Association Other	L Year		
	art I	Summary			· · · ·	
e	1	Briefly describ	e the organization's mission or most significant activities: One S	Simple	Wish uses	technology
anc						
ern	2	Check this bo	x 🕨 🛄 if the organization discontinued its operations or dispos			
20	3					
Activities & Governance	4		lependent voting members of the governing body (Part VI, line 1b)			
ties	5		of individuals employed in calendar year 2016 (Part V, line 2a)			-
žtivi	0					
¥			business taxable income from Form 990-T, line 34			0.
	~	The annotated			Prior Year	Current Year
Ð	8	Contributions	and grants (Part VIII, line 1h)		889,816.	1,213,435.
enu	9		ce revenue (Part VIII, line 2g)		0.	0.
Revenue			come (Part VIII, column (A), lines 3, 4, and 7d)			
-			e (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	Xempt From Income Tax mal Revenue Code (except private foundations on this form as it may be made public. Instructions is at www.irs.gov/form990. OMB No. 1545-0047 .6 and ending JUN 30, 2017 Den to Public Inspection 0 E Tolephone number 609-883-8484 Communication 609-883-8484 stal code G Gross receipts \$ 1,213,478. H(a) Is this a group return for subordinates included? Yes X No 4947(a)(1) or 527 If "No." attach a list. (see instructions) H(c) Group exemption number ▶ No H(c) Group exemption number ▶ It vio." attach a list. (see instructions) H(c) Group exemption number ▶ It vio." attach a list. (see instructions) H(c) Group exemption number ▶ It vio." attach a list. (see instructions) H(c) Group exemption number ▶ It vio." attach a list. (see instructions) H(c) Group exemption number ▶ It vio." attach a list. (see instructions) It vio." attach a list. (see instructions) It or a list. (see instructions) It vio." attach a list. (see instructions) It or a list. (see instructions) H(c) Group exemption number ▶ It or a list. (see instructions) It or a list. (see instructions) It or a list. (see instructions) It or a list. (see		
			- add lines 8 through 11 (must equal Part VIII, column (A), line 12)			
						-
	14	- · · · · ·	to or for members (Part IX, column (A), line 4)		÷ •	• •
ses	15 16a	Drofessional f	r compensation, employee benefits (Part IX, column (A), lines 5-10)			
Expenses	h h	Total fundrais	r compensation, employee benefits (Part IX, column (A), lines 5-10) undraising fees (Part IX, column (A), line 11e) ing expenses (Part IX, column (D), line 25) • <u>51</u> ,09	98.		
щ			es (Part IX, column (A), lines 11a-11d, 11f-24e)		251,882.	238,807.
	18		s. Add lines 13-17 (must equal Part IX, column (A), line 25)			
	19		expenses. Subtract line 18 from line 12		-655,471.	145,639.
Net Assets or Fund Balances						
sset: 3alar	20	Total assets (I				
et A: nd E	21		(Part X, line 26)			-
	22 art II		fund balances. Subtract line 21 from line 20		290,609.	430,248.
		5		and statem	ents and to the hest of m	knowledge and belief, it is
			Declaration of preparer (other than officer) is based on all information of whi			י הווטישוטעטט מווע טפוופו, וג וא
		,	, , , , , , , , , , , , , , , , , , , ,	1	,	

Sign Here	Signature of officer DANIELLE GLETOW, EXECU Type or print name and title	TIVE DIRECTOR	Date
Paid	Print/Type preparer's name THOMAS MARTIN	Preparer's signature	Date Check PTIN if self-employed P00123816
Preparer	Firm's name 🕨 KLATZKIN & COMPA	- /	Firm's EIN 21-0650289
Use Only	Firm's address 1670 WHITEHORSE HAMILTON, NJ 086		Phone no. (609)890-9189
May the I	RS discuss this return with the preparer shown abo	ove? (see instructions)	X Yes No
		so, soo the congrate instructions	Earm 990 (2016)

632001 11-11-16LHA For Paperwork Reduction Act Notice, see the separate instructions.Form 990 (2016)SeeSchedule 0 for Organization Mission Statement Continuation

Pa	rt III Statement of Program Service Accomplishments
_	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission: One Simple Wish uses technology to bring awareness to the foster care
	system and brightens the lives of thousands of children by connecting
	them to people who care.
2	Did the organization undertake any significant program services during the year which were not listed on the
-	prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes X No
•	If "Yes," 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 \$ 864,482 • including grants of \$ 671,017 •) (Revenue \$
	Wish granting is One Simple Wish (OSW)'s core program and offers caring
	individuals a way to directly affect the life of a child in foster
	care. Through our website potential donors are able to browse hundreds
	of wishes posted on behalf of the children and select which wish to
	grant. The wishes typically cost from \$5 to \$500, which allows almost
	anyone to find a wish that speaks to both their heart as well as to
	their budget. Moreover, OSW recognizes that donors have a desire to
	know exactly where their contributions go and therefore offers the opportunity for them to give more efficiently and effectively. When a
	donor grants a wish, nearly 100% of that donation is directed towards
	fulfillment of that specific request. During the fiscal year, thanks
	to the generosity of thousands of people OSW granted 4,133 wishes.
4b	(Code:) (Expenses \$55,880 • including grants of \$) (Revenue \$)
10	The Ohana Project is an extension of our services designed to help
	children who are removed from their homes due to abuse and/or neglect
	experience a smoother transition into temporary foster care. Each year
	nearly 5,000 children enter the foster care system in NJ. Our goal is
	to provide 24/7 access to baby supplies, personal care items, birthday
	gifts and basic needs to children in foster care and that have aged out
	of foster care in the state of NJ.
4c	(Code:) (Expenses \$ 28,427. including grants of \$) (Revenue \$
40	Milly's Place supports young women aging out of foster care. This is
	not a group home. This is not a residential treatment facility,
	Milly's Place is a home. Two female residents will receive the
	following: rent free living for two years; a paid internship with One
	Simple Wish; five mentors to assist them in health & wellness, finance,
	career planning, leisure & advocacy; and monthly Sunday dinners.
<u>لم ۸</u>	Other program services (Describe in Schedule O.)
4d	
40	(Expenses \$ including grants of \$) (Revenue \$) Total program service expenses ► 948,789.
	Form 990 (2016
63200	2 11-11-16
	2
270	514 756348 8888 2016.05070 ONE SIMPLE WISH, INC. 8888_1

ONE SIMPLE WISH, INC.

Form 990 (2016)

26-3128590 Page 2

Form	990	(201	16)

ONE SIMPLE WISH, INC.

Pa	rt IV Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?		163	
•	If "Yes," complete Schedule A	1	х	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
2	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for	2		
3	public office? If "Yes," complete Schedule C, Part I	3		x
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect	3		
-	during the tax year? If "Yes," complete Schedule C, Part II	4		x
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or	4		
5	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		x
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to	5		
0	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		x
7		0		
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	7		x
0	the environment, historic land areas, or historic structures? <i>If</i> "Yes," <i>complete Schedule D, Part II</i>	- 1		- 23
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			x
•	Schedule D, Part III	8		- 23
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			x
40	If "Yes," complete Schedule D, Part IV	9		
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent	10		x
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X			
_	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,		х	
	Part VI	11a	л	
a	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total	4.4%		x
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total	44.		x
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		
a	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			x
_	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		
т	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses		х	
10-	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	- 23	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	10-	х	
	Schedule D, Parts XI and XII	12a	л	
a	Was the organization included in consolidated, independent audited financial statements for the tax year?	10-		x
40	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	ļ	X
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		<u>^</u>
b				
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000	4.45		x
45	or more? If "Yes," complete Schedule F, Parts I and IV	14b		<u>^</u>
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any	45		x
40	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		<u>^</u>
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to	10		x
47	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		<u>^</u>
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	47		x
40	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		<u>^</u>
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	10		x
40	1c and 8a? If "Yes," complete Schedule G, Part II	18		<u> </u>
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G. Part III	19		x

Form **990** (2016)

632003 11-11-16

—	000	
FOUL	990	(2016)

ONE SIMPLE WISH, INC. Part IV Checklist of Required Schedules (continued)

			Yes	No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Х
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Х	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No", go to line 25a	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			x
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete	054		x
06	Schedule L, Part I	25b		
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? <i>If</i> "Yes,"			
		26		x
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial	20		
21	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			
	of any of these persons? If "Yes," complete Schedule L, Part III	27		x
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a	Х	
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		x
	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		x
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Х	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			37
- -	Part V, line 1	34		X
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	0.51		
00	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			x
27	If "Yes," complete Schedule R, Part V, line 2 Did the organization conduct more than 5% of its activities through an entity that is not a related organization	36		
37	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		x
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	31		<u> </u>
00	Note All Form 990 filers are required to complete Schedule O	38	x	

Form **990** (2016)

632004 11-11-16

Form	990 (2016) ONE SIMPLE WISH, INC. 26-3128	590	Р	age 5
Par	t V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 10			
	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0			
с	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
	filed for the calendar year ending with or within the year covered by this return 2a			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		Х
b	If "Yes," enter the name of the foreign country: ►			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Х
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Х
с	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			
	any contributions that were not tax deductible as charitable contributions?	6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	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?	7a		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			
	to file Form 8282?	7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		┝───
	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the	-		
	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
a	Did the sponsoring organization make any taxable distributions under section 4966?	9a		┝───
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
a h	Initiation fees and capital contributions included on Part VIII, line 12 10a Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
b 11	Section 501(c)(12) organizations. Enter:			
11	Gross income from members or shareholders 11a			
	Gross income from other sources (Do not net amounts due or paid to other sources against			
b				
120	amounts due or received from them.) [11b] Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	120		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
	Is the organization licensed to issue qualified health plans in more than one state?	13a		
u	Note. See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which the			
~	organization is licensed to issue qualified health plans 13b			
с	Enter the amount of reserves on hand 13c			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		
-		Гони	000	(2016)

Form **990** (2016)

632005 11-11-16

10270514 756348 8888

26	5-312	2859	0 р

990 (2016)		(

Form	990	(2016)
------	-----	-------	---

ONE SIMPLE WISH, INC.

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

1a Enter the number of voting members of the governing body at the end of the tax year 1a 12 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 0. 1a 12 b Enter the number of voting members included in line 1a, above, who are independent 1b 11 2 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? 2 3 4 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 significant diversion of the organization bace members or stockholders? 5 5 Did the organization have members or stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? 6 7a b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? 8a X b Ita enzy officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? information about polcies not required by the Internal Revenue Code. 9 Cettor B. Policies (T		Check if Schedule O contains a response or note to any line in this Part VI				X
1a Enter the number of voting members of the governing body at the end of the taxy year 1a 12 1b 1b 11 12 1b 11 2 2 1b 1b 11 1c 1c 2 2 1b 1b 11 1c 1c 3 2 1c 1c 1c 1c 1c 1c 3 1c	Sec	tion A. Governing Body and Management			·	
If there are material differences in votion jubits among members of the governing body or if the governing body. Image: Control Contenter Control Control Control Control Contro				~	Yes	N
bety delegated broad authority to an exocutive committee or similar committee, explain its Schedule 0. b chartes the number of voting members included in the 1a, above, who are independent in the standow, who are independent in the standow, who are independent in the standow, who are independent of the organization delegate control over management duties customarily performed by or under the direct supervision of offices, director, numbers, stockholders? 2 3 0 bit the organization delegate control over management duties customarily performed by or under the direct supervision of offices, directors, or tustees, or key employees to a samagement company or other person? 3 4 0 bit the organization have mombers, stockholders? 5 5 0 bit the organization have mombers, stockholders? 7 6 0 bit the organization have mombers, stockholders? 7 7 0 bit the organization of the organization reserved to (or subject to approval by) members, stockholders, or person of the than the governing body? 8 8 b can committee with authority to at on behalf of the governing body? 8 9 b theor any office, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization and escistor)? 10a 9 bit the organization have a written written actins and procedure	1a		1a	4		
b Enter the number of voltage members included in the 1a, above, who are independentb111222						
2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustees, or key employees to a management company or other person? 2 3 Did the organization delegate control over management duties customally performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person? 3 4 Did the organization delegate control over management duties customally performed by or under the direct supervision of the organization have members, stockholders? 6 7a Did the organization bave members, stockholders? 7a 7b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? 8a Xa 5 Did the organization contemporareously document the meetings held or written actions undertaken during the year by the following: 7a 7a 6 Did the organization have written policies and procedures governing body? 8a Xa 5 Each committee with authority to act on bahalf of the governing body? 8a Xa 6 Did the organization have local chapters, branches, or affiliatos? 9a 1a Xa 6 Did the organization have local chapters, branches, or affiliatos? 1a 1a Xa				-		
officer, director, trustee, or key employee? 2 3 01th enganzation delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person? 3 4 bit the organization have any significant changes to its governing documents since the prior F00m 980 was filed? 4 5 bit the organization have members or stockholders? 6 6 bit and the organization have members, stockholders? 7 7 bit and the organization have members, stockholders? 7 8 bit and governing body? 7 9 bit and governing body? 8 9 bit and governing body? 9 9 bit and governing body? 8 9 bit and governing body? 8 9 bit and	b			븨		
3 Did the organization delegate control over management duales customarily performed by or under the direct supervision of of officers, directors, or trustees, or key employees to a management company or other person? 3 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 3 5 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? 6 7 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? 7 9 Lot the organization contemporateously document the methigs had or written actions understein during the year by the following: 8 9 Lot the organization contemporateously document the methigs had or written actions understein during the year by the following: 8 9 Lot the organization notemporateously document the methigs had or written actions understein during the year by the following: 8 9 Lot the organization have written the methigs had or written actions understein during the year by the following: 8 9 Lot comparization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their oparatization have written policies and procedures governing the activities of such chapters, affiliates, and branches and strenches or subter the policy? If 'Ve's' do the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches and they ensure and the angeless in Schedule O to process, if any ucee during the f	2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship	hip with any other			
of officers, directors, or trustes, or key employees to a management company or other person? 3 4 Did the organization have any significant changes to its governing documents since the prior Form 990 was filed? 5 5 Did the organization have members, stockholders? 6 6 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 8 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? 7b 9 Did the organization common parateuity document the meetings held or written actions undertaken during the year by the following: 8a 8 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? 8b 9 Internation common parateuity document the meetings held or written actions undertaken during the year by the following: 8a 10 The governing body? 8b 8b 9 Internation or officer, director, trustes, or key mynolypee listed In Part VII, Section A, who cannot be reached at the organization main gadress? 10b 11 Vest 11 11 12 Section B, Policies (This Section B requests information about policies not required by the Internal Revenue Code. 10b 14 Ha was the organization navea wave weithen organiz				2		
 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 5 Did the organization have members, stockholders? 6 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? 7 Did the organization nave members, stockholders, or other persons who had the power to elect or appoint one or radius of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? 8 Did the organization contemporaneously document the mettings held or written actions undertaken during the year by the following: 8 Did the organization contemporaneously document the mettings held or written actions undertaken during the year by the following: 8 Each committee with authority to act on behalf of the governing body? 9 Each committee with authority to act on behalf of the governing body? 9 Each committee with authority to act on behalf of the governing body? 9 Each committee with authority to act on behalf of the governing body? 9 Each committee with authority to act on behalf of the governing body? 9 Each committee with authority to act on behalf of the governing body? 9 Each committee with authority to act on behalf of the governing body? 9 Each committee with authority to act on behalf of the governing body? 9 Each committee with authority to act on behalf of the governing body? 9 Each committee with authority to act on behalf of the governing body? 9 Each committee with authority to act on behalf of the governing body? 9 Each committee with authority to act on the act o	3					
5 Did the organization become aware during the year of a significant diversion of the organization's assets? 5 0 6 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 7 Developed and 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 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: 7a 8 Did the organization and the governing body? 8a X 9 Is there any officer, director, trustee, or key employee listed I persons who had the power and the governing body? 8a X 9 Is there any officer, director, trustee, or key employee listed I persons and sold provide by the internal Revenue Code. 9 90 Did the organization have written policies and proceedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's excepted at the organization new and the conflict of interest policy? If 'No,' go to line 133 1a 14 Has the organization provide by the some some distance compliance with the policy? If 'No,' go to line 133 1a 2a Did the organization provide of the some some distance compliance with the policy? If 'Yes,' describe in Schedule O theor thesis as done. 1a 3 Did the organization n		of officers, directors, or trustees, or key employees to a management company or other person? \dots				
6 Did the organization have members or stockholders? 6 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 b Are any governance decisions of the organization reserved to for subject to approval by) members, stockholders, or persons other than the governing body? 7b a Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a a The governing body? b a b Each committee with authority to act on behalf of the governing body? b b cognization insuling address? Note and the organization insuling address? Note and branches? b Each committee with authority to act on behalf of the governing body? b cognization insuling address? Note and branches? Note and branches? b In 'Yes,' idid the organization have witten policies and procodures governing the activities of such chapters, affiliates, and branches to ensure theire operations are consistent with the organization to revise withs Form 990. 12a 2 Did the organization have a written conflict of interest policy? 10b 12a 2 Did the organization have a written conflict of interest policy? 10c 12a 3 Did the organization have a written shistleblower policy? 12a 12a<	4	Did the organization make any significant changes to its governing documents since the prior Form	990 was filed?			
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 b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? 7b a Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: 7a a The governing body? 8a X b Both organization contemporaneously document the meetings held or written actions undertaken during the year by the following: 8a X a The governing body? 8a X 8b 9 9 certion B. Policies (7b is Section B requests information about policies not required by the Internal Revenue Code.) 00 10 10a	5					
b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? 7a b Ide organization contemporaneously document the meetings held or witten actions undertaken during the year by the following: 8a a Did the organization contemporaneously document the meetings held or witten actions undertaken during the year by the following: 8a a The governing body? 8b 9 9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's maining address? II 'Yes,' provide the names and addresses in Schedule O 9 Go Did the organization have local chapters, branches, or affiliates? 10a 10a and branches to ensure their operations are consistent with the organization to review unter policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization to review unter Schedule O the organization have a witten policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization to review withe Form 990. To all members of its governing body before filing the form? 10a 11a X 2a Vite organization have a witten conflict of interest policy? If 'No,' go to fine 13 2a 2b Vite organization have a witten obcument retention and destruction policy? If 'Yes,' describe in Schedule O how this was done 13a 3 Did the organization frequenty	6			6		
b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? b Id the organization comemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body? b Each commutiee with authority to act on behalf of the governing body? b Each commutiee with authority to act on behalf of the governing body? b Each commutiee with authority to act on behalf of the governing body? b Each commutiee with authority to act on behalf of the governing body? b Each commutiee with authority to act on behalf of the governing body? b Each commutiee with authority to act on behalf of the governing body? b Each commutiee with authority to act on behalf of the governing body behalf of the governing address? If "Yes," did the organization have local chapters, branches, or affiliates? b If "Yes," did the organization nave written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization roview this Form 1900. 12a B Has the organization provided a complete copy of this Form 900 to all members of its governing body before filing the form? 14 B Has the organization novide a written conflict of interest policy? If "No," go to line 13 12a Were officers, directors, on trustees, and key employees required to dasdee annually interests that could give rise to conflicts? 12 bescribe in Schedule O how the was done 12a bid the organization novide a written onsistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done 12b Were officers, directors, on trustees, and key employees required to dasdee annually interest that could give rise to conflicts? 12 bid the organization nove a written document reterion and destruction policy? If "Yes,	7a	Did the organization have members, stockholders, or other persons who had the power to elect or	appoint one or			
b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? b Id the organization comemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body? b Each commutiee with authority to act on behalf of the governing body? b Each commutiee with authority to act on behalf of the governing body? b Each commutiee with authority to act on behalf of the governing body? b Each commutiee with authority to act on behalf of the governing body? b Each commutiee with authority to act on behalf of the governing body? b Each commutiee with authority to act on behalf of the governing body? b Each commutiee with authority to act on behalf of the governing body behalf of the governing address? If "Yes," did the organization have local chapters, branches, or affiliates? b If "Yes," did the organization nave written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization roview this Form 1900. 12a B Has the organization provided a complete copy of this Form 900 to all members of its governing body before filing the form? 14 B Has the organization novide a written conflict of interest policy? If "No," go to line 13 12a Were officers, directors, on trustees, and key employees required to dasdee annually interests that could give rise to conflicts? 12 bescribe in Schedule O how the was done 12a bid the organization novide a written onsistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done 12b Were officers, directors, on trustees, and key employees required to dasdee annually interest that could give rise to conflicts? 12 bid the organization nove a written document reterion and destruction policy? If "Yes,		more members of the governing body?		7a		
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:	b					
a The governing body? Ba X b Each committee with authority to act on behalf of the governing body? Bb Bb 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? II "Yes," provide the names and addresses in Schedule O 9 Ge Did the organization have local chapters, branches, or affiliates? 10a 10a B If Yes, "did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization 's exempt purposes? 10b 11a 2a Did the organization provided a complete copy of this Form 900 to all members of its governing body before filing the form? 12a X 12a Exercise in Schedule O the process, if any, used by the organization or eview this Form 900. 12a X 2b Oid the organization regulary and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done 12c X 3 Did the organization regulary and consistently monitor and enforce compliance with the organization regulary and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done 12e X 3 Did the organization regulary and consistently monitor and enforce compliance with the policy? If "Yes," describe in schedule O how this was done 12a X		persons other than the governing body?		7b		
b Each committee with authority to act on behalf of the governing body? B	8	Did the organization contemporaneously document the meetings held or written actions undertaken during the y	ear by the following:			
b Each committee with authority to act on behalf of the governing body? 9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If 'Yes,' provide the names and addresses in Schedule O U ection B. Policies (<i>This Section B requests information about policies not required by the Internal Revenue Code.</i>) 0 Did the organization have local chapters, branches, or affiliates? 1 Has the organization nave local chapters, branches, or affiliates? 1 Has the organization nave written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization is exempt purposes? 1 Has the organization provided a complete copy of this Form 990 to <i>line</i> 13 1 Did the organization nave a written conflict of interest policy? If 'No,' go to <i>line</i> 13 2 Did the organization regularly and consistently monitor and enforce compliance with the policy? If ''Yes,' describe 1 Schedule O how this was done 3 Did the organization have a written whistlebiower policy? 4 Did the organization have a written whistlebiower policy? 4 Did the organization have a written whistlebiower policy? 4 Did the organization have a written whistlebiower policy? 4 Did the organization have a written whistlebiower policy? 4 Did the organization have a written whistlebiower policy? 4 Did the organization have a written whistlebiower policy? 4 Did the organization have a written whistlebiower policy? 4 Did the organization have a written whistlebiower policy? 4 Did the organization have a written whistlebiower policy? 5 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? 5 Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? 5 Did the o	а	The governing body?		8a	X	
organization's mailing address? // "Yes," provide the names and addresses in Schedule 0 9 ection B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) 10 Oa Did the organization have local chapters, branches, or affiliates? 10a 0a Did the organization have virtlen policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10a 1a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 12a 2 Did the organization have a written conflict of interest policy? // f. No; got loin F13 12a 2 Did the organization have a written conflict of interest policy? // f. No; got loin F13 12a 3 Did the organization have a written onlower sequence with the policy? // f. No; got loin F13 12c 4 Did the organization have a written document retention and destruction policy? 13i 5 Did the organization have a written document retention and destruction policy? 14i 4 Did the organization have a written organization of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? 14i 5 Did the organization have a written policy or procedure requiring the organization is cervity during the yea? 15a </td <td>b</td> <td>Each committee with authority to act on behalf of the governing body?</td> <td></td> <td>8b</td> <td></td> <td></td>	b	Each committee with authority to act on behalf of the governing body?		8b		
organization's mailing address? // "Yes," provide the names and addresses in Schedule 0 9 ection B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) 10 Oa Did the organization have local chapters, branches, or affiliates? 10a 0a Did the organization have virtlen policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10a 1a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 12a 2 Did the organization have a written conflict of interest policy? // f. No; got loin F13 12a 2 Did the organization have a written conflict of interest policy? // f. No; got loin F13 12a 3 Did the organization have a written onlower sequence with the policy? // f. No; got loin F13 12c 4 Did the organization have a written document retention and destruction policy? 13i 5 Did the organization have a written document retention and destruction policy? 14i 4 Did the organization have a written organization of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? 14i 5 Did the organization have a written policy or procedure requiring the organization is cervity during the yea? 15a </td <td>9</td> <td></td> <td></td> <td></td> <td></td> <td>Γ</td>	9					Γ
0a Did the organization have local chapters, branches, or affiliates? ves 0a Did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10a 1a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a X 2a Did the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a X 2b Did the organization guidaty and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done in Schedule O how this was done. 12a X 3 Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done. 14d X 3 Did the organization have a written whistleblower policy? 14d X 4 Did the organization SCEO, Executive Director, or top management official 15a X 5 Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? 15a X 6 Did the organization on weat management? 16b 16a 16a <t< td=""><td></td><td>organization's mailing address? If "Yes," provide the names and addresses in Schedule O</td><td></td><td>9</td><td></td><td></td></t<>		organization's mailing address? If "Yes," provide the names and addresses in Schedule O		9		
0a Did the organization have local chapters, branches, or affiliates? 10a b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10b 1a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 2a Did the organization have a written conflict of interest policy? If "No," go to line 13 12a 2a Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done 12c X 3 Did the organization have a written document retention and destruction policy? 14 X 4 Did the organization have a written the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? 14 X 5 Did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture anongeneents of celeral tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? 15b 16a 6 Did the organization follow a written policy or procedure requiring the organization's books and records: <a activities="" affiliates,<br="" and="" chapters,="" did="" governing="" have="" href="https://www.modefibe/be/be/bib/bw/bib/bw/bib/bib/bib/bib/bib/bib/b</td><td>ec</td><td>tion B. Policies (This Section B requests information about policies not required by the Internal</td><td>Revenue Code.)</td><td></td><td>-</td><td></td></tr><tr><td>b If " of="" organization="" policies="" procedures="" such="" the="" written="" yes,"="">and branches to ensure their operations are consistent with the organization's exempt purposes? 1a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 1b Describe in Schedule O the process, if any, used by the organization to review this Form 990. 2c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "No," go to line 13 b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12a X 2b Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done 2 Did the organization ave a written whistlebiower policy? 4 Did the organization have a written document retention and destruction policy? 4 Did the organization ave a written document retention and destruction policy? 5 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? a The organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? 5 Did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements? exempt status with respect to such arrangements? exempt status with respect to use filed NJ 8 Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made					Yes	
and branches to ensure their operations are consistent with the organization's exempt purposes? 10b 1a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a X 2a Did the organization have a written conflict of interest policy? If "No," go to line 13 12a X 2b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b X 2 Did the organization have a written whistleblower policy? 13 X 3 Did the organization have a written obscience compliance with the policy? If "Yes," describe in Schedule O how this was done 12c X 3 Did the organization have a written obscience compliance with the policy? 13 X 4 Did the organization inves a written document retention and destruction policy? 14 X 5 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? 15a X 6 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 16a b If "Yes," did the organization to make its Form 900 is required to be filed ▶NJ 8 8 8 16a 16a<	0a	Did the organization have local chapters, branches, or affiliates?		10a		
1a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 1b Describe in Schedule O the process, if any, used by the organization to review this Form 990. 2a Did the organization have a written conflict of interest policy? If "No," go to line 13 2b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 2c Did the organization neve a written whisteblower policy? 3 Did the organization have a written document retention and destruction policy? 4 Did the organization have a written document retention and destruction policy? 5 Did the organization have a written document retention and destruction policy? 4 Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? 5 Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? 6 Did the organization follow a written policy or procedure requiring the organization to evaluate its participation's exempt status with respect to such arrangements? 6 Did the organization follow a written policy or procedure requiring the organization to evaluate its participation's exempt status with respect to such arrangements? 6 Did the organization have a written to make its Form 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. 6 Other explain in Schedule O <	b	If "Yes," did the organization have written policies and procedures governing the activities of such	chapters, affiliates,			
1a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 1b Describe in Schedule O the process, if any, used by the organization to review this Form 990. 2a Did the organization have a written conflict of interest policy? If "No," go to line 13 2b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 2c Did the organization neve a written whisteblower policy? 3 Did the organization have a written document retention and destruction policy? 4 Did the organization have a written document retention and destruction policy? 5 Did the organization have a written document retention and destruction policy? 4 Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? 5 Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? 6 Did the organization follow a written policy or procedure requiring the organization to evaluate its participation's exempt status with respect to such arrangements? 6 Did the organization follow a written policy or procedure requiring the organization to evaluate its participation's exempt status with respect to such arrangements? 6 Did the organization have a written to make its Form 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. 6 Other explain in Schedule O <		and branches to ensure their operations are consistent with the organization's exempt purposes?		10b		
2a Did the organization have a written conflict of interest policy? If "No," go to line 13 12a X b Were officers, directors, or trustess, and key employees required to disclose annually interests that could give rise to conflicts? 12b X c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done 12c X 3 Did the organization have a written document retention and destruction policy? 13 X 4 Did the organization fave a written document retention and destruction policy? 14 X 5 Did the organization's CEO, Executive Director, or top management official persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? 15a X 6 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 16a 16a 16a b If "Yes," did the organization follow a written policy or procedure requiring the organization is exempt status with respect to such arrangements? 16b 16a 16a 16b 16a 1	1a			11a	X	
2a Did the organization have a written conflict of interest policy? If "No," go to line 13 12a X b Were officers, directors, or trustess, and key employees required to disclose annually interests that could give rise to conflicts? 12b X c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done 12c X 3 Did the organization have a written document retention and destruction policy? 13 X 4 Did the organization fave a written document retention and destruction policy? 14 X 5 Did the organization's CEO, Executive Director, or top management official persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? 15a X 6 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 16a 16a 16a b If "Yes," did the organization follow a written policy or procedure requiring the organization is exempt status with respect to such arrangements? 16b 16a 16a 16b 16a 1	b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.				
b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b X c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done 12c X 3 Did the organization have a written whistleblower policy? 13 X 4 Did the organization have a written document retention and destruction policy? 14 X 5 Did the organization have a written document retention and destruction policy? 14 X 4 Did the organization have a written openeous substantiation of the deliberation and decision? 15a X a The organization incest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? 16a b If "Yes," did the organization follow a written policy or procedure requiring the organization's exempt status with respect to such arrangements? 16a etcion C. Disclosure 7 List the states with which a copy of this Form 990 is required to be filed NJ 7 List the states with which a copy of this Form 990 is required to be filed NJ 8 Section f104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.				12a	Х	
c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe 12c X 3 Did the organization have a written whistleblower policy? 13 X 4 Did the organization have a written document retention and destruction policy? 14 X 5 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? 15a X a The organization's CEO, Executive Director, or top management official 15a X b Other officers or key employees of the organization 15b if "Yes," 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 b 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? ection C. Disclosure 7 7 12 8 9 9 9 9 14 16 16 16 16 16 16 16 16 16 16 16 16 16 16 16 16 16 <td></td> <td></td> <td>se to conflicts?</td> <td>12b</td> <td>Х</td> <td></td>			se to conflicts?	12b	Х	
in Schedule O how this was done 12c X 3 Did the organization have a written whistleblower policy? 13 X 4 Did the organization have a written document retention and destruction policy? 14 X 5 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? 14 X a The organization's CEO, Executive Director, or top management official 15a X b Other officers or key employees of the organization 15b 15b 15b if "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). 6a 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 16a b 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? 16b 16a etitte states with which a copy of this Form 990 is required to be filed ▶NJ 8 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indi	с					Γ
 3 Did the organization have a written whistleblower policy? 13 X 4 Did the organization have a written document retention and destruction policy? 14 X 5 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? a The organization's CEO, Executive Director, or top management official b Other officers or key employees of the organization 15a X 15b 15b 15b 15c 16b 16a 16a				12c	X	
4 Did the organization have a written document retention and destruction policy? 14 X 5 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? 15 X a The organization's CEO, Executive Director, or top management official 15a X b Other officers or key employees of the organization 15b 15b if "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). 16a 16a b 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 16a b 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? 16b 16b exempt status with respect to such arrangements? 16b 16b 16b 16b exempt status with noich a copy of this Form 990 is required to be filed NJ 16b 16b 16b 16b 90 on website Another's website Su Upon request Other (explain in Schedule O) <t< td=""><td>13</td><td></td><td></td><td></td><td>Х</td><td>Γ</td></t<>	13				Х	Γ
5 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? 15 15 15 a The organization's CEO, Executive Director, or top management official 15a X 15b 15b <td< td=""><td>4</td><td></td><td></td><td></td><td>X</td><td>t</td></td<>	4				X	t
a The organization's CEO, Executive Director, or top management official 15a X b Other officers or key employees of the organization 15b 15b if "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). 6a 16a 16a b Id the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? 16a 16a b 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? 16a 16b ection C. Disclosure T List the states with which a copy of this Form 990 is required to be filed ▶NJ Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. Other (explain in Schedule O) 9 9 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. 00 9 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 ta						T
a The organization's CEO, Executive Director, or top management official 15a X b Other officers or key employees of the organization 15b 15b if "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). 6a 16a 16a b Id the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? 16a 16a b 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? 16a 16b eection C. Disclosure 16b 16b 16b 16b 7 List the states with which a copy of this Form 990 is required to be filed ▶NJ 8 16b 16b 16b 9 Down website Another's website X Upon request Other (explain in Schedule O) 9 9 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. 160 160 9 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements						
b Other officers or key employees of the organization 15b b Other officers or 15b, describe the process in Schedule O (see instructions). 15b 6a 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 b 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? 16a eection C. Disclosure 16b 7 List the states with which a copy of this Form 990 is required to be filed ▶NJ 8 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 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) 9 9 Describe in Schedule 0 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. 10 111116 Form 990 (2	а			15a	x	
If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). 6a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? b 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? eection C. Disclosure 7 16. 8 Section 6104 requires an organization to make its Form 990 is required to be filed ▶NJ 8 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990. T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. □ Own website □ 0 Number's website Image: Imag						
6a 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 b 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? 16a rection C. Disclosure 16b 7 List the states with which a copy of this Form 990 is required to be filed ▶NJ 8 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. □ Own website Another's website X Upon request Other (explain in Schedule O) Other (explain in Schedule O) 9 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. The Organization – 609 – 883 – 8484 The Organization – 609 – 883 – 8484 1977 N. OLDEN AVENUE #292, TRENTON, NJ 08618 Form 990 (2	5			100		┢
taxable entity during the year? 16a b 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 16a b 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 16b exempt status with respect to such arrangements? 16b 16b exempt status with respect to such arrangements? 16b 16b exempt status with respect to such arrangements? 16b 16b exempt status with respect to such arrangements? 16b 16b exempt status with which a copy of this Form 990 is required to be filed ▶NJ 16c 16b 8 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. 0 0 0 9 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. 160 9 - 883 - 8484 1977 N. OLDEN AVENUE #292, TRENTON, NJ 08618 1111-16 <td< td=""><td>62</td><td></td><td>ement with a</td><td></td><td></td><td></td></td<>	62		ement with a			
 b 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? fection C. Disclosure 7 List the states with which a copy of this Form 990 is required to be filed ▶NJ 8 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990.T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. Own website Another's website X Upon request Other (explain in Schedule O) 9 Describe in Schedule 0 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. 0 State the name, address, and telephone number of the person who possesses the organization's books and records: ► The Organization - 609-883-8484 1977 N. OLDEN AVENUE #292, TRENTON, NJ 08618 	Ua			165		Ľ
in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	h	, , ,		104		+
exempt status with respect to such arrangements? 16b ection C. Disclosure NJ 7 List the states with which a copy of this Form 990 is required to be filed ▶NJ 8 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. □ Own website □ 0 Own website □ 10 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. 10 State the name, address, and telephone number of the person who possesses the organization's books and records: ▶ The Organization - 609-883-8484 1977 N. OLDEN AVENUE #292, TRENTON, NJ 08618	D					
 Form 990 (2006 11-11-16 Particle Particle Parti				16h		
 7 List the states with which a copy of this Form 990 is required to be filed ▶<u>NJ</u> 8 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. ☐ Own website ☐ Another's website X Upon request ☐ Other (<i>explain in Schedule O</i>) 9 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. 0 State the name, address, and telephone number of the person who possesses the organization's books and records: ▶ The Organization - 609-883-8484 1977 N. OLDEN AVENUE #292, TRENTON, NJ 08618 						
 8 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. Own website Another's website X Upon request Other (explain in Schedule O) 9 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. 0 State the name, address, and telephone number of the person who possesses the organization's books and records: The Organization - 609-883-8484 1977 N. OLDEN AVENUE #292, TRENTON, NJ 08618 						
for public inspection. Indicate how you made these available. Check all that apply. Own website Another's website Image: 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. Image: 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. Image: 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. Image: 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. Image: 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. Image: Describe in Schedule O whether (and if so, how) the organization who possesses the organization's books and records: Image: Describe in Schedule O whether (and if so, how) the organization of 0.9 – 883 – 84.84 Image: Describe in Schedule O whether (and if so, how) the poly of 0.861.8 Image: Describe in Schedule O whether (and if so, how) the poly of 0.861.8 Image: Describe in Schedule O whether (and if so, how) the poly of 0.861.8 Image: Describe in Schedule O			-T (Section 501(c)(3)s only) availat	ole	
 Own website Another's website X Upon request Other (explain in Schedule O) 9 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. 0 State the name, address, and telephone number of the person who possesses the organization's books and records: ► The Organization - 609-883-8484 1977 N. OLDEN AVENUE #292, TRENTON, NJ 08618 				, availat		
 9 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. 0 State the name, address, and telephone number of the person who possesses the organization's books and records: ► The Organization - 609-883-8484 1977 N. OLDEN AVENUE #292, TRENTON, NJ 08618 			in in Schodulo ()			
statements available to the public during the tax year. State the name, address, and telephone number of the person who possesses the organization's books and records: The Organization - 609-883-8484 1977 N. OLDEN AVENUE #292, TRENTON, NJ 08618 Form 990 (3	0			nd fina-	cial	
0 State the name, address, and telephone number of the person who possesses the organization's books and records: ►	3		connict of interest policy, a	nu iinan	cial	
The Organization - 609-883-8484 1977 N. OLDEN AVENUE #292, TRENTON, NJ 08618 Form 990 (2 6	0					
<u>1977 N. OLDEN AVENUE #292, TRENTON, NJ 08618</u> ³²⁰⁰⁶ 11-11-16 6	0		books and records:			
Form 990 (2006 11-11-16 6						
6				Form	000	(0
•	2006	_		LOLU	1990	(2)
	70	-	U TNO	QO	20	

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

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

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

• List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.

• List all of the organization's current key employees, if any. See instructions for definition of "key employee."

• List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.

 List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

• List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

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

(A) Name and Title	(B) Average hours per week	rage (do not s per box, uni				is bot	h an	(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) DANIELLE GLETOW	40.00								0	0
EXECUTIVE DIRECTOR	1 00	Х		X				50,600.	0.	0.
(2) AMY MATSUO	1.00	x		x				0.	0.	0.
PRESIDENT (3) BRYAN ROBERTS	1.00	^						0.	0.	0.
SECRETARY	1.00	x		x				0.	0.	0.
(4) CHRIS DEMAYO	1.00			11					0.	
TREASURER		x		x				0.	0.	0.
(5) JOHANNA GREESON	1.00									
MEMBER		х						0.	0.	0.
(6) SCOTT GREENBERG	1.00									
MEMBER		Х						0.	0.	0.
(7) CHRIS CRAWFORD	1.00									
MEMBER		Х						0.	0.	0.
(8) STACI KOONDEL	1.00								0	0
MEMBER	1 00	Х						0.	0.	0.
(9) ELIZABETH BOLSTER	1.00	v						0.	0.	0
MEMBER (10) ADRIENNE DOBIN	1.00	X						0.	0.	0.
MEMBER	1.00	x						0.	0.	0.
(11) NEIL CAPEL	1.00								0.	0.
MEMBER	100	x						0.	0.	0.
(12) SRIVATSAN RAJAGOPALAN	1.00									
MEMBER		х						0.	Ο.	0.
					-	\vdash				
632007 11-11-16						1				Form 990 (2016)

2016.05070 ONE SIMPLE WISH, INC.

7

		PLE WISH								26-31	28	590	Pa	age 8
Par	t VII Section A. Officers, Directors, Tr		ploy	ees,			ghe	st C						
	week					verage burs per weekPosition (do not check more than one box, unless person is both an officer and a director/trustee)Reportable compensation from theReportable compensation from relation							(F) stimate nount other pensa	of tion
		hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	(W-2/1099-MIS) 	org and	om the anizati d relate anizatio	ion ed
			-											
									F0 C00					
с	Sub-total Total from continuation sheets to Part Total (add lines 1b and 1c)	VII, Section A							50,600. 0. 50,600.		0.0.0.			0. 0. 0.
2	Total number of individuals (including but compensation from the organization		-					o r	-	,000 of reportable	; ;			0
													Yes	No
3	Did the organization list any former office line 1a? If "Yes," complete Schedule J fo					•			highest compensated e			3		х
4	For any individual listed on line 1a, is the and related organizations greater than \$	50,000? If "Yes,	" coi	mpe mple	ensa ete S	ition Sche	anc dule	otl J f	her compensation from for such individual	the organization		4		х
5	Did any person listed on line 1a receive or rendered to the organization? <i>If</i> "Yes," co	-				-			-			5		Х
<u>5ec</u>	tion B. Independent Contractors Complete this table for your five highest	compensated in	depe	ende	nt c	ontra	acto	rs t	hat received more than	\$100,000 of com	pensa	ation f	rom	
	the organization. Report compensation for (A)	or the calendar y	ear e	endir	ng w	/ith c	or w	thir I	n the organization's tax y (B)	/ear.		(0	3)	
	Name and busine	ss address	NC	ONE	2			_	Description of s	ervices	C		nsatio	n
. <u> </u>														
2	Total number of independent contractors \$100,000 of compensation from the orga		iot lir	niteo	d to	thos C		tec	above) who received m	nore than				
												Form	990 (2	2016)

632008 11-11-16

Form	ı 99	0 (;	2016) ONE SIMPLE W	ISH, I	INC.			26-3128	590 Page 9
Pa	rt \	/11	Statement of Revenue						
			Check if Schedule O contains a respons	e or note to	o any lir		/=>		
						(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
Contributions, Gifts, Grants and Other Similar Amounts	1	а	Federated campaigns 1a						
àrar oun			Membership dues 1b						
S, G			Fundraising events 1c						
Sift lar			Related organizations 1d						
imi			Government grants (contributions) 1e]			
rior S		f	All other contributions, gifts, grants, and						
ibu ⁻			similar amounts not included above If 1	,213,4	435.				
d O		g	Noncash contributions included in lines 1a-1f: \$	300,3					
an C		h	Total. Add lines 1a-1f	<u></u>	🕨	1,213,435.			
				Busines	s Code				
e Ce	2	а							
Program Service Revenue		b							
		С							
grar Rev		d							
roç		е							
"		f	All other program service revenue						
			Total. Add lines 2a-2f		🕨				
	3		Investment income (including dividends, inter-			43.			43.
	4		other similar amounts) Income from investment of tax-exempt bond			=5.	-		
	4 5		Royalties	-					
	Ŭ		(i) Real	(ii) Pers					
	6	а	Gross rents		Jona				
			Less: rental expenses						
			Rental income or (loss)						
			Net rental income or (loss)						
	7		Gross amount from sales of (i) Securities						
			assets other than inventory						
		b	Less: cost or other basis						
			and sales expenses						
		с	Gain or (loss)						
		d	Net gain or (loss)		🕨				
Other Revenue	8	а	Gross income from fundraising events (not including \$ of						
sev.			contributions reported on line 1c). See						
erF			Part IV, line 18	a					
Oth			• • • • • • • • • • • • • • • • • • • •	b					
•			Net income or (loss) from fundraising events		🕨				
	9	а	Gross income from gaming activities. See						
			Part IV, line 19						
			• • • • • • • • • • • • • • • • • • • •	b					
	40		Net income or (loss) from gaming activities		🕨				
	10	а	Gross sales of inventory, less returns						
		h	and allowances Less: cost of goods sold	a b					
		U	Net income or (loss) from sales of inventory Miscellaneous Revenue	Busines					
	11	а							
		a b							
		c							
		d	All other revenue						
			Total. Add lines 11a-11d		•				
	12		Total revenue. See instructions.			1,213,478.	0.	0.	43.
63200	9 11	-11							Form 990 (2016)
						9			

ONE SIMPLE WISH, INC. Part IX Statement of Functional Expenses

	Check if Schedule O contains a respons	<u> </u>		(0)	/= \
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations			-	
	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22	671,017.	671,017.		
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,	50,600.	25,300.	5,060.	20,240.
6	trustees, and key employees	50,000.	23,300.	5,000.	20,2400
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		92,887.	55,260.	28,338.	9,289.
8	Pension plan accruals and contributions (include	52,00,1	5572001	20,000	57205
0	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes	14,528.	10,896.	2,179.	1,453.
11	Fees for services (non-employees):	,		, -	,
a	Management				
b					
с	Accounting	42,630.	31,972.	6,395.	4,263.
	Lobbying				
е					
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25,				
	column (A) amount, list line 11g expenses on Sch 0.)	12,744.	7,906. 11,591.	3,784. 2,318.	1,054. 1,546.
12	Advertising and promotion	15,455.	11,591.	2,318.	1,546.
13	Office expenses	10,177.	7,632.	1,527.	1,018.
14	Information technology				
15	Royalties		01 600	4 200	
16	Occupancy	28,800.	21,600.	4,320.	2,880.
17	Travel	5,933.	4,450.	890.	593.
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	46,929.	35,196.	7,040.	4,693.
22	Depreciation, depletion, and amortization	40,929.	3,160.	632.	421
23 24	Insurance	÷,2±J•	5,100.	052.	7210
24	above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.)				
а	BANK AND CREDIT CARD FE	15,611.	11,708.	2,342.	1,561
b	COMPUTER SOFTWARE MAINT	12,765.	9,573.	1,915.	1,277.
c	OHANA PROJECT	10,000.	10,000.	· · · ·	-
d	MILLY'S PLACE	9,073.	9,073.		
e	All other expenses	24,477.	22,455.	1,212.	810.
25	Total functional expenses. Add lines 1 through 24e	1,067,839.	948,789.	67,952.	51,098.
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)				

632010 11-11-16

10270514 756348 8888

10 2016.05070 ONE SIMPLE WISH, INC. Form **990** (2016)

8888___1

		trustees, key employees, and highest compensation	ated emplo	yees. Complete			
S		Part II of Schedule L			5		
	6	Loans and other receivables from other disguali					
		section 4958(f)(1)), persons described in section					
		employers and sponsoring organizations of sect					
		employees' beneficiary organizations (see instr).			6		
Assets	7	Notes and loans receivable, net				7	
As	8	Inventories for sale or use			43,596.	8	83,450.
	9	Prepaid expenses and deferred charges				9	
		Land, buildings, and equipment: cost or other	 I I			5	
	IUa	basis. Complete Part VI of Schedule D	102	244,886.			
	h	Less: accumulated depreciation	104		53,058.	10c	114,174.
	11				55,050.	11	
	12	Investments - publicly traded securities				12	
		Investments - other securities. See Part IV, line -					
	13	Investments - program-related. See Part IV, line			593.	13	548.
	14	Intangible assets			2,400.	14 15	2,400.
	15	Other assets. See Part IV, line 11			303,383.		455,407.
	16	Total assets. Add lines 1 through 15 (must equ			12,774.	16	19,159.
	17	Accounts payable and accrued expenses			12,114.	17	19,139.
	18	Grants payable			18		
	19	Deferred revenue			19		
	20	Tax-exempt bond liabilities			20		
	21	Escrow or custodial account liability. Complete				21	
ies	22	Loans and other payables to current and forme					
oilit		key employees, highest compensated employee					
Liabilities		Complete Part II of Schedule L				22	
	23	Secured mortgages and notes payable to unrela	ated third p	parties		23	
	24	Unsecured notes and loans payable to unrelate	d third part	ies		24	
	25	Other liabilities (including federal income tax, pa	yables to r	elated third			
		parties, and other liabilities not included on lines	s 17-24). Co	omplete Part X of			
		Schedule D				25	
	26	Total liabilities. Add lines 17 through 25			12,774.	26	19,159.
		Organizations that follow SFAS 117 (ASC 958		ere ▶ X and			
se		complete lines 27 through 29, and lines 33 an	d 34.				
anc	27	Unrestricted net assets			182,538.	27	324,087.
3al	28	Temporarily restricted net assets			108,071.	28	112,161.
Fund Balances	29	Permanently restricted net assets		<u></u>		29	
Fur		Organizations that do not follow SFAS 117 (A	SC 958), c	heck here 🕨 📃			
		and complete lines 30 through 34.					
Net Assets or	30	Capital stock or trust principal, or current funds				30	
Ass	31	Paid-in or capital surplus, or land, building, or ec				31	
et /	32	Retained earnings, endowment, accumulated in				32	
ž	33	Total net assets or fund balances	·		290,609.	33	436,248.

ONE SIMPLE WISH, INC.

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

Cash - non-interest-bearing

Savings and temporary cash investments

Pledges and grants receivable, net

Accounts receivable, net

Total net assets or fund balances

Total liabilities and net assets/fund balances

Loans and other receivables from current and former officers, directors,

26-3128590 Page 11

(A)

Beginning of year

203,736.

1

2

3

4

(B) End of year

248,835.

6,000.

632011 11-11-16

34

34

303,383.

8888___1

436,248. 455,407.

Form **990** (2016)

10270514 756348 8888

Form 990 (2016) Part X Balance Sheet

1

2

3

4

5

	990 (2016) ONE SIMPLE WISH, INC.	26-31	28590	Pag	ge 12
Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI		<u></u>		
			4 4	~ .	
1	Total revenue (must equal Part VIII, column (A), line 12)	1	1,21	3,4	<u>78.</u>
2	Total expenses (must equal Part IX, column (A), line 25)	2	1,06		
3	Revenue less expenses. Subtract line 2 from line 1	3			39.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	290	0,6	09.
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,		4.2	~ ~	4.0
	column (B))	10	430	6,2	48.
Ра	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				
_	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule				v
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2 a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	d on a			
	separate basis, consolidated basis, or both:				
-	Separate basis Consolidated basis Both consolidated and separate basis			v	
b	Were the organization's financial statements audited by an independent accountant?		2 b	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat	e basis,			
	consolidated basis, or both:				
	X Separate basis Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the			Х	
	review, or compilation of its financial statements and selection of an independent accountant?		2c	Δ	
•	If the organization changed either its oversight process or selection process during the tax year, explain in Sch				
за	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si	•			х
1-	Act and OMB Circular A-133?		3a		
a	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ				
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits			000	

Form **990** (2016)

632012 11-11-16

SCHEDULE A

(Form	990	or	990	-EZ
-------	-----	----	-----	-----

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section

4947(a)(1) nonexempt charitable trust. Attach to Form 990 or Form 990-EZ.

20	IU
Open to Inspec	

OMB No. 1545-0047

16

ባበ

26-3128590

Department of the Treasury
Internal Revenue Service

Part I

Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990. Name of the organization Employer identification number ONE SIMPLE WISH, INC. 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 churche	s, or association of churc	hes described i	n section 17	70(b)(1)(A)(i).

2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).) 3

- A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).
- A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, 4 city, and state:
- 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 X 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).
- An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or 12 more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.
 - Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving а the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B.
 - Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C.
 - Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, С its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E.
 - d J Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V.
 - Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.
 - f Enter the number of supported organizations

g Provide the following information	n about the supporte	ed organization(s).				
(i) Name of supported	(ii) EIN	(iii) Type of organization	(iv) Is the orga in your governi	inization listed	(v) Amount of monetary	(vi) Amount of other
organization		(described on lines 1-10 above (see instructions))	Yes	No	support (see instructions)	support (see instructions)
Total						

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. 632021 09-21-16 Schedule A (Form 990 or 990-EZ) 2016 13

2016.05070 ONE SIMPLE WISH, INC.

8888 1

Schedule A (Form 990 or 990-EZ) 2016 ONE SIMPLE WISH, INC.

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.)

Se	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	938,092.	1,096,453.	1,434,305.	889,816.	1,213,435.	5,572,101.
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3	938,092.	1,096,453.	1,434,305.	889,816.	1,213,435.	5,572,101.
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)						949,211.
6	Public support. Subtract line 5 from line 4.						4,622,890.
	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
7	Amounts from line 4	938,092.	1,096,453.	1,434,305.	889,816.	1,213,435.	5,572,101.
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar sources	346.	224.	74.	99.	43.	786.
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI.)	527.	4,793.	3,750.	187.		9,257.
11	Total support. Add lines 7 through 10			-			5,582,144.
	Gross receipts from related activities,	etc. (see instruction	ons)			12	59,654.
	First five years. If the Form 990 is for			d. fourth. or fifth ta	ax vear as a sectio	n 501(c)(3)	
	organization, check this box and stor		· · ·	· · ·	, ,		
Se	ction C. Computation of Publ	ic Support Pe	rcentage				
14	Public support percentage for 2016 (line 6, column (f) d	ivided by line 11, c	olumn (f))		14	82.82 %
	Public support percentage from 2015					15	83.36 %
	33 1/3% support test - 2016. If the o					nore, check this bo	ox and
	stop here. The organization qualifies	as a publicly supp	orted organization				►X
b	33 1/3% support test - 2015. If the o	organization did no	t check a box on I	ine 13 or 16a, and	l line 15 is 33 1/3%	or more, check th	nis box
	and stop here. The organization qual	lifies as a publicly s	supported organiza	ation			
17a	10% -facts-and-circumstances tes						
	and if the organization meets the "fac						
	meets the "facts-and-circumstances"						
b	0 10% -facts-and-circumstances tes						
	more, and if the organization meets th						
	organization meets the "facts-and-cire						
18	Private foundation. If the organization	on did not check a	box on line 13, 16	a, 16b, 17a, or 17t	o, check this box a	and see instruction	s
-			i			edule A (Form 990	

632022 09-21-16

10270514 756348 8888

14 2016.05070 ONE SIMPLE WISH, INC.

8888___1

26-3128590 Page 2

Schedule A (Form 990 or 990-EZ) 2016 ONE SIMPLE WISH, INC.

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

Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 20	016 (f) Tota	al
1	Gifts, grants, contributions, and							
	membership fees received. (Do not							
	include any "unusual grants.")							
2	Gross receipts from admissions, merchandise sold or services per- formed, or facilities furnished in any activity that is related to the							
2	organization's tax-exempt purpose Gross receipts from activities that							
5	are not an unrelated trade or bus-							
	iness under section 513							
4	Tax revenues levied for the organ- ization's benefit and either paid to							
	or expended on its behalf							
5	The value of services or facilities							
	furnished by a governmental unit to							
	the organization without charge							
	Total. Add lines 1 through 5							
7a	Amounts included on lines 1, 2, and							
	3 received from disqualified persons							
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year							
с	Add lines 7a and 7b							
	Public support. (Subtract line 7c from line 6.)							
	tion B. Total Support							
	ndar year (or fiscal year beginning in) 🕨	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 20)16 (f) Tota	al
	Amounts from line 6							
	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources							
b	Unrelated business taxable income							
	(less section 511 taxes) from businesses acquired after June 30, 1975							
с	Add lines 10a and 10b							
	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on							
12	Other income. Do not include gain or loss from the sale of capital							
12	assets (Explain in Part VI.)							
	First five years. If the Form 990 is for t	bo organization'	l s first second thi	d fourth or fifth to	y yoar as a soctio	$\frac{1}{10000000000000000000000000000000000$	organization	
14		-			-			
800	check this box and stop here							
	-					15		0/
	Public support percentage for 2016 (lin							%
<u>16</u>	Public support percentage from 2015					16		%
	ction D. Computation of Invest					1 1		
	Investment income percentage for 201					17		%
	Investment income percentage from 20					18		%
19a	33 1/3% support tests - 2016. If the c							
	more than 33 1/3%, check this box and							
b	33 1/3% support tests - 2015. If the cline 18 is not more than 33 1/3%, chec							
20	Private foundation. If the organization							
	23 09-21-16	GIG HOL CHECK &	557 011 1110 14, 18				orm 990 or 990-EZ)	0016
13202				15	301		5 m 550 01 350-EZ	, 2010
70	514 756348 8888	20.	16.05070 0	ONE SIMPLE	יד אפרש ז	NC	8888	1
		<u>2</u> U.					0000	

8888___1

1

2

3a

3b

3c

4a

4b

4c

5a

5b

5c

6

7

8

9a

9b

9c

10a

10b

Yes

No

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

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

632024 09-21-16

10270514 756348 8888

16 2016.05070 ONE SIMPLE WISH, INC.

	Cupperting organizations (continued)		V.	N
			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		
	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		
Sec	tion 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		
Sec	tion C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	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		
Sec	tion D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		
Sec	tion E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the yea(see instructions).			
а	The organization satisfied the Activities Test. <i>Complete line 2</i> below.			
b	The organization is the parent of each of its supported organizations. <i>Complete line 3 below.</i>			
С	L The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see inst	ructions).	
2	Activities Test. Answer (a) and (b) below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more			
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the			
	reasons for the organization's position that its supported organization(s) would have engaged in these			
	activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer (a) and (b) below.			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
	trustees of each of the supported organizations? Provide details in Part VI.	3a		
b	5			
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b		
63202	5 09-21-16 Schedule A (Form 9	90 or 99	90-EZ)	2016
	17			

2016.05070 ONE SIMPLE WISH, INC.

8888___1

Schedule A (Form 990 or 990-EZ) 2016 ONE SIMPLE WISH, INC.

 Part V
 Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

 1
 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI.) See instructions. All

other Type III non-functionally integrated supporting organizations must complete Sections A through E.

short-term capital gain overies of prior-year distributions er gross income (see instructions) lines 1 through 3 reciation and depletion on of operating expenses paid or incurred for production or ction of gross income or for management, conservation, or ctenance of property held for production of income (see instructions) er expenses (see instructions) isted Net Income (subtract lines 5, 6, and 7 from line 4) - Minimum Asset Amount regate fair market value of all non-exempt-use assets (see	1 2 3 4 5 6 7 8		
er gross income (see instructions) lines 1 through 3 reciation and depletion on of operating expenses paid or incurred for production or ction of gross income or for management, conservation, or thenance of property held for production of income (see instructions) er expenses (see instructions) isted Net Income (subtract lines 5, 6, and 7 from line 4) - Minimum Asset Amount	3 4 5 6 7		
lines 1 through 3 reciation and depletion on of operating expenses paid or incurred for production or ction of gross income or for management, conservation, or itenance of property held for production of income (see instructions) er expenses (see instructions) isted Net Income (subtract lines 5, 6, and 7 from line 4) - Minimum Asset Amount	4 5 6 7		
eciation and depletion on of operating expenses paid or incurred for production or ction of gross income or for management, conservation, or itenance of property held for production of income (see instructions) er expenses (see instructions) isted Net Income (subtract lines 5, 6, and 7 from line 4) - Minimum Asset Amount	5 6 7		
on of operating expenses paid or incurred for production or ction of gross income or for management, conservation, or itenance of property held for production of income (see instructions) er expenses (see instructions) isted Net Income (subtract lines 5, 6, and 7 from line 4) - Minimum Asset Amount	6 7		
ction of gross income or for management, conservation, or itenance of property held for production of income (see instructions) er expenses (see instructions) isted Net Income (subtract lines 5, 6, and 7 from line 4) - Minimum Asset Amount	7		
tenance of property held for production of income (see instructions) er expenses (see instructions) ested Net Income (subtract lines 5, 6, and 7 from line 4) - Minimum Asset Amount	7		
er expenses (see instructions) Isted Net Income (subtract lines 5, 6, and 7 from line 4) - Minimum Asset Amount	7		
sted Net Income (subtract lines 5, 6, and 7 from line 4) - Minimum Asset Amount			
- Minimum Asset Amount	8		
regate fair market value of all non-exempt-use assets (see		(A) Prior Year	(B) Current Year (optional)
uctions for short tax year or assets held for part of year):			
age monthly value of securities	1a		
age monthly cash balances	1b		
market value of other non-exempt-use assets	1c		
I (add lines 1a, 1b, and 1c)	1d		
ount claimed for blockage or other			
ors (explain in detail in Part VI):			
uisition indebtedness applicable to non-exempt-use assets	2		
rract line 2 from line 1d	з		
n deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount,			
nstructions)	4		
value of non-exempt-use assets (subtract line 4 from line 3)	5		
iply line 5 by .035	6		
overies of prior-year distributions	7		
mum Asset Amount (add line 7 to line 6)	8		
- Distributable Amount			Current Year
sted net income for prior year (from Section A, line 8, Column A)	1		
r 85% of line 1	2		
num asset amount for prior year (from Section B, line 8, Column A)	3		
r greater of line 2 or line 3	4		
me tax imposed in prior year	5		
ributable Amount. Subtract line 5 from line 4, unless subject to	6		1
	deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, nstructions) alue of non-exempt-use assets (subtract line 4 from line 3) oly line 5 by .035 veries of prior-year distributions num Asset Amount (add line 7 to line 6) - Distributable Amount eted net income for prior year (from Section A, line 8, Column A) 85% of line 1 num asset amount for prior year (from Section B, line 8, Column A) greater of line 2 or line 3	deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, nstructions) 4 alue of non-exempt-use assets (subtract line 4 from line 3) 5 oly line 5 by .035 6 veries of prior-year distributions 7 num Asset Amount (add line 7 to line 6) 8 - Distributable Amount 1 sted net income for prior year (from Section A, line 8, Column A) 1 85% of line 1 2 num asset amount for prior year (from Section B, line 8, Column A) 3 greater of line 2 or line 3 4 ne tax imposed in prior year 5	deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, nstructions) 4 alue of non-exempt-use assets (subtract line 4 from line 3) 5 oly line 5 by .035 6 veries of prior-year distributions 7 num Asset Amount (add line 7 to line 6) 8 - Distributable Amount 1 sted net income for prior year (from Section A, line 8, Column A) 1 85% of line 1 2 num asset amount for prior year (from Section B, line 8, Column A) 3 greater of line 2 or line 3 4 ne tax imposed in prior year 5

instructions).

Schedule A (Form 990 or 990-EZ) 2016

632026 09-21-16

10270514 756348 8888

8888___1

Par	t V Type III Non-Functionally Integrated 509	(a)(3) Supporting Orga	anizations (continued)	0
Sect	on D - Distributions		,	Current Year
1	Amounts paid to supported organizations to accomplish exe	mpt purposes		
2	Amounts paid to perform activity that directly furthers exemp	ot purposes of supported		
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purpose	es of supported organizatior	IS	
4	Amounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in Part VI). See instructions			
7	Total annual distributions. Add lines 1 through 6			
8	Distributions to attentive supported organizations to which the	he organization is responsive	e	
	(provide details in Part VI). See instructions			
9	Distributable amount for 2016 from Section C, line 6			
10	Line 8 amount divided by Line 9 amount			
		(i)	(ii)	(iii)
Sect	on E - Distribution Allocations (see instructions)	Excess Distributions	Underdistributions Pre-2016	Distributable Amount for 2016
1	Distributable amount for 2016 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2016 (reason-			
	able cause required- explain in Part VI). See instructions			
3	Excess distributions carryover, if any, to 2016:			
a				
b				
c	From 2013			
d	From 2014			
e	From 2015			
f	Total of lines 3a through e			
g	Applied to underdistributions of prior years			
h	Applied to 2016 distributable amount			
i	Carryover from 2011 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2016 from Section D,			
	line 7: \$			
a	Applied to underdistributions of prior years			
b	Applied to 2016 distributable amount			
C	Remainder. Subtract lines 4a and 4b from 4			
5	Remaining underdistributions for years prior to 2016, if			
	any. Subtract lines 3g and 4a from line 2. For result greater			
	than zero, explain in Part VI. See instructions			
6	Remaining underdistributions for 2016. Subtract lines 3h			
	and 4b from line 1. For result greater than zero, explain in			
	Part VI. See instructions			
7	Excess distributions carryover to 2017. Add lines 3j and 4c			
8	Breakdown of line 7:			
а				
b	Excess from 2013			
	Excess from 2014			
	Excess from 2015			
-	Excess from 2016			
-				

Schedule A (Form 990 or 990-EZ) 2016

632027 09-21-16

10270514 756348 8888

Schedule A	(Form 990 or 990-EZ) 2016 ONE SIMPL				26-3128590 _{Pag}
Part VI	Supplemental Information. Provide th Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a line 1; Part IV, Section D, lines 2 and 3; Part IV Section D, lines 5, 6, and 8; and Part V, Section (See instructions.)	a, 6, 9a, 9b, 9c /, Section E, lin	, 11a, 11b, and 11c; es 1c, 2a, 2b, 3a, an	Part IV, Section B, lin d 3b; Part V, line 1; Pa	es 1 and 2; Part IV, Section C, art V, Section B, line 1e; Part V,

632028 09-21-16

10270514 756348 8888

Schedule A (Form 990 or 990-EZ) 2016

20 2016.05070 ONE SIMPLE WISH, INC.

8888___1

Schedule B (Form 990, 990-EZ, or 990-PF)	
Department of the Treasury	

Name of the organization

· · · · / · · ·

Schedule of Contributors

 Attach to Form 990, Form 990-EZ, or Form 990-PF.
 Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www.irs.gov/form990.

INC.

OMB No. 1545-0047

2016

Employer identification number

26-3128590

ONE	SIMPLE	WISH,

Organization type (check of	
Filers of:	Section:
Form 990 or 990-EZ	X 501(c)(3) (enter number) organization
	4947(a)(1) nonexempt charitable trust not treated as a private foundation
	527 political organization
Form 990-PF	501(c)(3) exempt private foundation
	4947(a)(1) nonexempt charitable trust treated as a private foundation
	501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**. **Note:** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

X For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2016)

Name of organization

ONE

Name of Or	yanization			
ONE S	IMPLE WISH, INC.		26	-3128590
Part I	Contributors (See instructions). Use duplicate copies of Part I if additiona	al space is needed.		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contribution	ns	(d) Type of contribution
1	KIDS 703 BARTLEY CHESTER ROAD FLANDERS, NJ 07836	\$266,8	05.	Person Payroll Noncash X (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributior	ns	(d) Type of contribution
2	HASBRO 1027 NEWPORT AVENUE PAWTUCKET, RI 02862	\$37,2		Person Payroll Noncash X (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contribution	ne	(d) Type of contribution
3	HASBRO CHILDREN'S FUND INC PO BOX 1228 PAWTUCKET, RI 02862-1228	\$25,0		Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributior	ns	(d) Type of contribution
		\$		Person Payroll On Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributior	ns	(d) Type of contribution
		\$		Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contribution	ns	(d) Type of contribution
				Person

Schedule B (Form 990, 990-EZ, or 990-PF) (2016)

Payroll Noncash

(Complete Part II for noncash contributions.)

8888___1

10270514 756348 8888

623452 10-18-16

22 2016.05070 ONE SIMPLE WISH, INC.

\$

26-3128590

ONE SIMPLE WISH, INC.

Part II Noncash Property (See instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
	CLOTHING, TOYS		
1			
		\$ 266,805.	08/04/16
(a)		(-)	
No.	(b)	(c) FMV (or estimate)	(d)
from	Description of noncash property given	(See instructions)	Date received
Part I		(000	
	TOYS		
2			
		27 220	10/11/10
		\$37,239.	12/11/16
-,,			
(a) No		(c)	/ -13
No. from	(b)	FMV (or estimate)	(d) Data received
Part I	Description of noncash property given	(See instructions)	Date received
		\$	
		♥	
(a)			
No.	(b)	(c)	(d)
from	Description of noncash property given	FMV (or estimate) (See instructions)	Date received
Part I		(See instructions)	
		\$	
(-)			
(a) No.	(b)	(c)	(d)
from	Description of noncash property given	FMV (or estimate)	Date received
Part I		(See instructions)	241010001000
		\$	
(a)		(c)	
No.	(b)	(C) FMV (or estimate)	(d)
from	Description of noncash property given	(See instructions)	Date received
Part I		. ,	
		^	
		\$	000 000 E7 000 DE
3453 10-18	23	Scueanie R (Form 8	990, 990-EZ, or 990-PF)

Name of org	anization		Employer identification number
ONE SI	IMPLE WISH, INC.		26-3128590
Part III	Exclusively religious, charitable, etc.,	contributions to organizations described in sec	tion 501(c)(7), (8), or (10) that total more than \$1,000 for
	completing Part III, enter the total of exclusively rel	ete columns (a) through (e) and the following lir igious, charitable, etc., contributions of \$1,000 or less for	16 entry. For organizations the year. (Enter this info. once.) \$
(-) N	Use duplicate copies of Part III if addi	tional space is needed.	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
_		(e) Transfer of gift	
	Transferee's name, address	s, and ZIP + 4	Relationship of transferor to transferee
(a) No. from	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
Part I	(b) Fulpose of gift		
			<u> </u>
-		(e) Transfer of gift	
-	Transferee's name, address	s, and ZIP + 4	Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
		_	
F		(e) Transfer of gift	
	Transferee's name, address		Relationship of transferor to transferee
(a) No		l	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
F		(e) Transfer of gift	
	Transferee's name, address		Relationship of transferor to transferee
	· · · · · · · · · · · · · · · · · · ·		
623454 10-18·	-16	24	Schedule B (Form 990, 990-EZ, or 990-PF) (201

10270514 756348 8888

2016.05070 ONE SIMPLE WISH, INC.

8888___1

SCHEDULE D (Form 990)	► Complet	emental Finance te if the organization answ 6, 7, 8, 9, 10, 11a, 11b, 11c	vered "Yes" on Form 990.		OMB No. 1545-0047
Department of the Treasury		Attach to Forn	າ 990.		Open to Public Inspection
Internal Revenue Service Name of the organiza		edule D (Form 990) and its	Instructions is at www.irs		bloyer identification number
Name of the organiza	ONE SIMPLE W	ISH, INC.			26-3128590
Part I Organia	zations Maintaining Don		Other Similar Funds	or Accou	Ints.Complete if the
organizat	ion answered "Yes" on Form 99				
			or advised funds	(b) Fun	ds and other accounts
	end of year				
	of contributions to (during year)				
	of grants from (during year) at end of year				
	tion inform all donors and donor		assets held in donor advis	ed funds	
	tion's property, subject to the or	-			Yes No
6 Did the organiza	tion inform all grantees, donors, rposes and not for the benefit o	and donor advisors in writir	ng that grant funds can be	used only	
impermissible pr	ivate benefit?				Yes No
	vation Easements. Comp			Part IV, line 7	
	nservation easements held by the	č		ula a Pere Se	tent level ever
	on of land for public use (e.g., re	ecreation or education)	Preservation of a histo		
	of natural habitat on of open space		Preservation of a certi	ned historic:	structure
	a through 2d if the organization	held a qualified conservation	on contribution in the form	of a conserva	ation easement on the last
day of the tax ye	• •	nicia a qualinea concervati			Held at the End of the Tax Yea
	conservation easements			2a	
	stricted by conservation easeme				
	ervation easements on a certifie				
d Number of conse	ervation easements included in	(c) acquired after 8/17/06, a	nd not on a historic structu	ıre	
	onal Register				
3 Number of conse	ervation easements modified, tra	ansferred, released, extingu	ished, or terminated by the	organizatior	n during the tax
year ►					
	s where property subject to con		·		
•	zation have a written policy rega nforcement of the conservation				Yes No
,	eer hours devoted to monitoring		lations and enforcing cons		
			allone, and emeroing conc		omonto duning the your
7 Amount of exper	 nses incurred in monitoring, insp	pecting, handling of violatior	ns, and enforcing conservation	tion easemer	nts during the year
▶\$	5, 1	3, 3	, 3		5,
8 Does each conse	ervation easement reported on I	line 2(d) above satisfy the re	quirements of section 170	(h)(4)(B)(i)	
and section 170	(h)(4)(B)(ii)?				Yes 🗌 No
9 In Part XIII, desc	ribe how the organization report	ts conservation easements	n its revenue and expense	statement, a	and balance sheet, and
include, if applic	able, the text of the footnote to	the organization's financial	statements that describes	the organizat	tion's accounting for
conservation eas					
	zations Maintaining Coll			ther Simil	ar Assets.
	if the organization answered "Y on elected, as permitted under S			opt and bal	anco shoot works of art
0	res, or other similar assets held f	(<i>)</i> ,			·
	otnote to its financial statement				Service, provide, in r art All,
	n elected, as permitted under S			and balance	sheet works of art. historica
	er similar assets held for public				
relating to these		, ,		<i>,</i> ,	5
	luded on Form 990, Part VIII, line	e 1		>	\$
(ii) Assets inclue	ded in Form 990, Part X			►	\$
	on received or held works of art,				
the following am	ounts required to be reported u	nder SFAS 116 (ASC 958) r	elating to these items:		
	ed on Form 990, Part VIII, line 1				\$
	in Form 990, Part X				•
	Reduction Act Notice, see the	Instructions for Form 990			Schedule D (Form 990) 201
632051 08-29-16		2	5		
270514 75634	8 8888	2016.05070 ON		TNC	8888 1
-1001# 10004	0000	2010.030/0 ON	T OTHETT MIQU	,	

Sche		PLE WISH,						6-31			age 2
Pa	rt III Organizations Maintaining C	ollections of A	rt, His	torical Tr	easures,	or Oth	er Simila	r Asse	ts (contir	nued)	
3	Using the organization's acquisition, accessi (check all that apply):	on, and other record	ls, chec	k any of the	following the	at are a s	ignificant u	se of its	collectio	n item	S
а	Public exhibition	d		Loan or exc	hange progr	ams					
b	Scholarly research	е									
с	Preservation for future generations										
4	Provide a description of the organization's co	ollections and explai	n how th	ney further t	he organizat	ion's exe	mpt purpos	se in Par	t XIII.		
5	During the year, did the organization solicit o								-		-
	to be sold to raise funds rather than to be ma								Yes		No
Pa	rt IV Escrow and Custodial Arran		ete if the	e organizatio	on answered	"Yes" or	n Form 990,	Part IV,	line 9, or		
	reported an amount on Form 990, Par										
1a	Is the organization an agent, trustee, custodi		-						7	_	1
	on Form 990, Part X?							L	Yes		No
D	If "Yes," explain the arrangement in Part XIII	and complete the to	liowing	table:					A.m.o.u.m	•	
~	Regipping balance						1c		Amoun	ι	
	Beginning balance Additions during the year										
	Distributions during the year										
f											
	Did the organization include an amount on Fo								Yes		No
	If "Yes," explain the arrangement in Part XIII.						• • • • • • • • • • • • • • • • • • • •]
Pa	rt V Endowment Funds. Complete in	f the organization an	swered	"Yes" on Fo	orm 990, Par	t IV, line	10.				
		(a) Current year	(b) F	Prior year	(c) Two yea	rs back	(d) Three ye	ars back	(e) Four	' years	back
1a	Beginning of year balance										
b	Contributions										
с	Net investment earnings, gains, and losses										
	Grants or scholarships										
е	Other expenditures for facilities										
	and programs			_							
	Administrative expenses										
g 2	End of year balance Provide the estimated percentage of the curr	rent year end balance	o (lino 1	a column ()) held as:						
_ a	Board designated or quasi-endowment	ent year end baland	%	9, 00101111 (8	<i>a))</i> field a3.						
b		%									
с		%									
	The percentages on lines 2a, 2b, and 2c sho	uld equal 100%.									
3a	Are there endowment funds not in the posse	ssion of the organization	ation tha	at are held a	Ind administe	ered for t	he organiza	ation	_		
	by:									Yes	No
	(i) unrelated organizations								3a(i)		
	(ii) related organizations								3a(ii)		
	If "Yes" on line 3a(ii), are the related organiza								3b		
4	Describe in Part XIII the intended uses of the rt VI Land, Buildings, and Equipm		owment	funds.							
га	Complete if the organization answered) Dart IV	/ lino 110 9	Soo Earm 00(0 Dart V	lino 10				
	Description of property	(a) Cost or o			or other		ccumulated	4	(d) Boo	k volu	
	Description of property	basis (investr			(other)		preciation	1	(u) B00	r value	5
1a	Land		/		0,000.				1	0,0	00.
	Buildings									, -	
	Leasehold improvements			2	3,000.				2	3,0	00.
	Equipment				3,929.		3,92				0.
	Other			20	7,957.		126,78	3.		1,1	
Tota	I. Add lines 1a through 1e. (Column (d) must e	qual Form 990, Part	X, colur	mn (B), line 1	10c.)				11	4,1	74.

Schedule D (Form 990) 2016

632052 08-29-16

10270514 756348 8888

Schedule D (Form 990) 2016 ONE SIMPLE	WISH, INC.	2	6-3128590 Page 3
Part VII Investments - Other Securities.			
Complete if the organization answered "Yes"			
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or e	nd-of-year market value
(1) Financial derivatives			
(2) Closely-held equity interests			
(3) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)			
Part VIII Investments - Program Related.			
	an Farma 000 Dart IV/ lin	a 11a Cas Faura 000 Bast V line 10	
Complete if the organization answered "Yes" (a) Description of investment	(b) Book value	(c) Method of valuation: Cost or e	nd-of-vear market value
	(b) DOOK Value		nd-or-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)			
Part IX Other Assets.			
Complete if the organization answered "Yes"		ne 11d. See Form 990, Part X, line 15.	
(a)	Description		(b) Book value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line	- 15)		•
Part X Other Liabilities.			
Complete if the organization answered "Yes"	on Form 990 Part IV lir	ne 11e or 11f See Form 990 Part X line (25
I. (a) Description of liability		(b) Book value	
(1) Federal income taxes			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line	÷ 25.)►		
2. Liability for uncertain tax positions. In Part XIII, provide	the text of the footnote	to the organization's financial statement	s that reports the
organization's liability for uncertain tax positions under			
			hadula D (Earm 990) 2016

Schedule D (Form 990) 2016

632053 08-29-16

10270514 756348 8888

Sche	edule D (Form 990) 2016 ONE SIMPLE WISH, INC.			26-	3128590 Page 4
Pa	rt XI Reconciliation of Revenue per Audited Financial Stateme	ents With	Revenue per R		
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.				
1	Total revenue, gains, and other support per audited financial statements			1	1,218,878.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
а	Net unrealized gains (losses) on investments	2a			
b	Donated services and use of facilities		5,400.		
с	Recoveries of prior year grants				
d					
е				2e	5,400.
3	Subtract line 2e from line 1			3	1,213,478.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)	4b			
	Add lines 4a and 4b			4c	0.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)				1,213,478.
Pa	rt XII Reconciliation of Expenses per Audited Financial Statem	ents With	Expenses per	Retu	ırn.
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.				
1	Total expenses and losses per audited financial statements			1	1,073,239.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
а	Donated services and use of facilities	2a	5,400.		
b	Prior year adjustments	2b			
с	Other losses	2c			
d	Other (Describe in Part XIII.)	2d			
е	Add lines 2a through 2d			2e	5,400.
3	Subtract line 2e from line 1			3	1,067,839.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)	4b			
с	Add lines 4a and 4b			4c	0.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)			5	1,067,839.
Pa	rt XIII Supplemental Information.				
	ide the descriptions required for Dart II, lines 2, 5, and 9; Dart III, lines 1a and 4; Dart				

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

Part X, Line 2:

The Organization's federal tax returns are subject to examination by the
IRS, generally for three years after they were filed. The statute of
limitations does not apply to unfiled returns. The Organization believes
that all required returns have been filed.
If applicable, the Organization would recognize interest paid related to
unrecognized tax benefits in interest expense and penalties in management
and general expenses. The Organization has not recognized any amounts for
interest and penalties paid at June 30, 2017 and 2016.

632054 08-29-16

	Schedule D (Form 990) 2016
632055 08-29-16 0270514 756348 8888	29 2016.05070 ONE SIMPLE WISH, INC. 8888_1
0000 0710 JUDIE0 0000	ZOTO OCO CHE DIMINI MICI COOO T

SCHEDULE I (Form 990) Department of the Treasury	Go	rants and Oth vernments, an ete if the organizatio	nd Individua	ls in the Ŭn i " on Form 990, Pa	ited States		OMB No. 1545-0047 2016 Open to Public
Internal Revenue Service	Informati	on about Schedule I	•		at www.irs.gov/form99	0.	Inspection
Name of the organization ONE SIMPI	E WISH, I	NC.					Employer identification number $26 - 3128590$
Part I General Information on Grants	and Assistance						
 Does the organization maintain records criteria used to award the grants or ass Describe in Part IV the organization's pi 	istance?	-					ction X Yes No
Part II Grants and Other Assistance to recipient that received more than	Domestic Organi	zations and Domesti	c Governments. C	Complete if the org	anization answered "Y	/es" on Form 990, Par	t IV, line 21, for any
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
				2			
 2 Enter total number of section 501(c)(3) 3 Enter total number of other organization LHA For Paperwork Reduction Act Notice 	ns listed in the line	i table	ne line 1 table				Schedule I (Form 990) (2016)

 Part III
 Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22.

 Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
Wishes Granted	3755	410,506.	260,511.	FMV	Toys, Clothing, and other wishes
				•	
Part IV Supplemental Information. Provide the information req	uired in Part I, lin	e 2; Part III, column	(b); and any other a	dditional information.	
Part I, Line 2:					
Grants and other assistance to ind	ividuals	represent	s simple w	vishes to	
foster children and vulnerable fam	ilies.	Wishes are	submitted	by the	
Organization's network of communit	y partne	rs (nonpro	fit and go	vernmental	
agencies that serve children and f	amilies	in need).	These par	tners go	
through an application process wit	h the Or	ganization	and once	approved they	
may submit wishes using an online	form. W	ishes must	be submit	ted for	
actual children or families the pa	rtner is	serving.	The One S	imple Wish	

program manager reviews and approves each wish prior to it becoming

Schedule I (Form 990) ONE SIMPLE WISH, INC. Part IV Supplemental Information	26-3128590 Page 2
viewable by a donor on the Organization's website. A donor	can browse
wishes by value, age of the wish recipient, or type of wish	and can grant
the wish by a simple click on the website. All wishes are a	assigned a
number for tracking purposes.	
	Schedule I (Form 990)
632291 04-01-16 32	Genedule I (FOIIII 390)
270514 756348 8888 2016.05070 ONE SIMPLE WISH, INC.	8888 1

10

,

artment of the Treasury	-		28b, or 28c, o ► Atta	or For ach to	m 990- Form ⁽	s" on Form 990, Pa EZ, Part V, line 38 990 or Form 990-I EZ) and its instructio	8a or 4 E Z .	40b.	orm99	0.	2016 Open To Public Inspection				
ne of the organization	ONE OT	мот	е мтен	TNC	r				-	-	ident 285		on nu	mbe	
			E WISH, ons (section 50			ion 501(c)(4), and 5	501(c)	(29) organizatior	-	-	205	90			
						art IV, line 25a or 2)b.				
(a) Name of disqualified	person	(b) R	elationship bet person and o			lified	(c) De	escription of tran	sactio	n		<u> </u>	Corre		
··· ·	-			iyaniza									es	No	
												_			
												+			
Enter the amount of tax	incurred by	the o	rganization mar	nagers	or disc	qualified persons d	luring	the year under							
section 4958 Enter the amount of tax						appization				► \$ ► ¢					
Enter the amount of tax	, il any, on i	me∠, a	above, reimburs	sed by	the or	ganization				Þ					
art II Loans to an	d/or Fror	n Int	erested Per	sons	5.										
						, Part V, line 38a o	r Form	n 990, Part IV, lir	ie 26;	or if th	ie orga	anizati	on		
reported an amo	ount on For														
· · · · · · · · · · · · · · · · · · ·			, Part X, line 5, 6				14	Balanco duo	(a)	In	(h) Ap	proved	(i) W	/ritte	
(a) Name of interested person	(b) Relatio with organi	nship	, Part X, line 5, 6 (c) Purpose of loan	(d) Lo fron	2. oan to or n the ization?	(e) Original principal amount		Balance due	(g) defa		(h) Ap by bo comm	proved ard or hittee?	(i) W agree	/ritter	
(a) Name of	(b) Relatio	nship	(c) Purpose	(d) Lo fron organi	oan to or n the			Balance due			(h) Ap by bo comm Yes	nittee?	(i) W agree Yes	ment	
(a) Name of	(b) Relatio	nship	(c) Purpose	(d) Lo fron organi	oan to or n the ization?			Balance due	defa	ult?	comm	nittee?	ayree	ment	
(a) Name of	(b) Relatio	nship	(c) Purpose	(d) Lo fron organi	oan to or n the ization?			Balance due	defa	ult?	comm	nittee?	ayree	men	
(a) Name of	(b) Relatio	nship	(c) Purpose	(d) Lo fron organi	oan to or n the ization?			Balance due	defa	ult?	comm	nittee?	ayree	men	
(a) Name of	(b) Relatio	nship	(c) Purpose	(d) Lo fron organi	oan to or n the ization?			Balance due	defa	ult?	comm	nittee?	ayree	men	
(a) Name of	(b) Relatio	nship	(c) Purpose	(d) Lo fron organi	oan to or n the ization?) Balance due	defa	ult?	comm	nittee?	ayree	men	
(a) Name of	(b) Relatio	nship	(c) Purpose	(d) Lo fron organi	oan to or n the ization?			Balance due	defa	ult?	comm	nittee?	ayree	ment	
(a) Name of	(b) Relatio	nship	(c) Purpose	(d) Lo fron organi	oan to or n the ization?) Balance due	defa	ult?	comm	nittee?	ayree	men	
(a) Name of interested person	(b) Relatio	nship	(c) Purpose	(d) Lo fron organi	oan to or n the ization?	principal amount) Balance due	defa	ult?	comm	nittee?	ayree	men	
(a) Name of	(b) Relatio with organi	nship ization	(c) Purpose of loan	(d) Lc fror organi To	an to or n the ization? From	principal amount) Balance due	defa	ult?	comm	nittee?	ayree	men	
(a) Name of interested person	(b) Relatio with organi	e Ber	(c) Purpose of Ioan	(d) Lc fror organi To	ed Per	principal amount) Balance due	defa	ult?	comm	nittee?	ayree	men	
(a) Name of interested person	(b) Relatio with organi	Bern ansv	(c) Purpose of Ioan	(d) Lc fror organi To Form 9	Pan to or n the ization? From From G Per 990, Pa pen	principal amount	\$	(d) Type assistan	defa	ult?		nittee?			
(a) Name of interested person	(b) Relatio with organi	Bern ansv	(c) Purpose of Ioan	(d) Lc fror organi To Form 9	Pan to or n the ization? From From G Per 990, Pa pen	principal amount	\$	(d) Туре	defa	ult?) Purp			
(a) Name of interested person	(b) Relatio with organi	Bern ansv	(c) Purpose of Ioan	(d) Lc fror organi To Form 9	Pan to or n the ization? From From G Per 990, Pa pen	principal amount	\$	(d) Туре	defa	ult?) Purp			
(a) Name of interested person	(b) Relatio with organi	Bern ansv	(c) Purpose of Ioan	(d) Lc fror organi To Form 9	Pan to or n the ization? From From G Per 990, Pa pen	principal amount	\$	(d) Туре	defa	ult?) Purp			
(a) Name of interested person	(b) Relatio with organi	Bern ansv	(c) Purpose of Ioan	(d) Lc fror organi To Form 9	Pan to or n the ization? From From G Per 990, Pa pen	principal amount	\$	(d) Туре	defa	ult?) Purp			
(a) Name of interested person	(b) Relatio with organi	Bern ansv	(c) Purpose of Ioan	(d) Lc fror organi To Form 9	Pan to or n the ization? From From G Per 990, Pa pen	principal amount	\$	(d) Туре	defa	ult?) Purp			
(a) Name of interested person	(b) Relatio with organi	Bern ansv	(c) Purpose of Ioan	(d) Lc fror organi To Form 9	an to or n the ization? From From G Per 990, Pa een	principal amount	\$	(d) Туре	defa	ult?) Purp			
(a) Name of interested person	(b) Relatio with organi	Bern ansv	(c) Purpose of Ioan	(d) Lc fror organi To Form 9	an to or n the ization? From From G Per 990, Pa een	principal amount	\$	(d) Туре	defa	ult?) Purp			

chedule L	(Form	990 o	r 990-EZ)	2016	ONE	SIME	$^{\rm PE}$	WIS	н,	INC.	

Part IV Business Transactions Involving Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

(a) Name of interested person		ship betwee and the orga	n interested anization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
						Yes	No
KIMBERLY GELB	FORMER	BOARD	MEMBER	10,925.	PAID FOR SE	2	X

Part V Supplemental Information

Provide additional information for responses to questions on Schedule L (see instructions).

Sch L, Part IV, Business Transactions Involving Interested Persons:

- (a) Name of Person: KIMBERLY GELB
- (b) Relationship Between Interested Person and Organization:

FORMER BOARD MEMBER

(c) Amount of Transaction \$ 10,925.

(d) Description of Transaction: PAID FOR SERVICES AS CREATIVE DIRECTOR

(e) Sharing of Organization Revenues? = No

Schedule L (Form 990 or 990-EZ) 2016

632132 10-24-16

10270514 756348 8888

SCHEDULE	Μ
(Form 990)	

Noncash Contributions

OMB No. 1545-0047

Department of the Treasury
Internal Revenue Service

Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.
 Attach to Form 990.

Open To Public Inspection

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

		Employer identificat	on number
SH.	INC.	26-3128	590

	ONE SIMPLE W	ISH, I	NC.		26-3	3128!	590	
Pa	rt I Types of Property							
		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d Method of d noncash contrib	etermini	•	S
1	Art - Works of art							
2	Art - Historical treasures							
3	Art - Fractional interests							
4	Books and publications							
5	Clothing and household goods	Х		248,274.	FAIR MARKE	r vai	LUE	
6	Cars and other vehicles							
7	Boats and planes							
8	Intellectual property							
9	Securities - Publicly traded							
10	Securities - Closely held stock							
11	Securities - Partnership, LLC, or							
	trust interests							
12	Securities - Miscellaneous							
13	Qualified conservation contribution -							
	Historic structures							
14	Qualified conservation contribution - Other $_{\dots}$							
15	Real estate - Residential							
16	Real estate - Commercial							
17	Real estate - Other							
18	Collectibles							
19	Food inventory							
20	Drugs and medical supplies							
21	Taxidermy							
22	Historical artifacts							
23	Scientific specimens							
24	Archeological artifacts							
25	Other ► (<u>TOYS</u>)	X	9		FAIR MARKE	r vai	LUE	
26	Other (PERSONAL CARE)	Х	5	4,150.				
27	Other ► ()							
28	Other ► ()							
29	Number of Forms 8283 received by the organi							
	for which the organization completed Form 82	83, Part IV, I	Donee Acknowled	gement 29				
							Yes	No
30a	During the year, did the organization receive b	-	• • • •		-			
	must hold for at least three years from the dat	e of the initia	al contribution, and	d which isn't required to be u	ised for			
	exempt purposes for the entire holding period	?				30a		X
b	If "Yes," describe the arrangement in Part II.							
31	Does the organization have a gift acceptance	policy that re	equires the review	of any nonstandard contribu	utions?	31		X
32a	Does the organization hire or use third parties	or related or	ganizations to soli	cit, process, or sell noncash				
	contributions?					32a		X
b	If "Yes," describe in Part II.							
33	If the organization didn't report an amount in c	column (c) fo	r a type of propert	y for which column (a) is che	cked,			

10270514 756348 8888

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

Schedule M (Form 990) (2016)

632141 08-23-16

Schedule M (Form 990) (2016) 0	NE SIMPLE WISH,	INC.
--------------------------------	-----------------	------

Part II Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

Schedule M, Part I, Column (b):

Part I, Column B reports the number of contributions received

632142 08-23-16	Schedule M (Form 990) (201
270514 756348 8888	36 2016.05070 ONE SIMPLE WISH, INC. 8888

SCHEDULE O (Form 990 or 990-EZ)

Name of the organization

Supplemental Information to Form 990 or 990-EZ Complete to provide information for responses to specific questions on OMB No 1545-0047

Open to Public

Inspection

Employer identification number 26 - 3128590

16

Department of the Treasury Internal Revenue Service

Form 990 or 990-EZ or to provide any additional information. ► Attach to Form 990 or 990-EZ.

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

ONE SIMPLE WISH, INC.

Form 990, Part I, Line 1, Description of Organization Mission:

of thousands of children by connecting them to people who care.

Form 990, Part VI, Section A, line 8b:

There are no committees with the authority to act on behalf of the

governing board. Therefore there is no documentation of any such meetings.

Form 990, Part VI, Section B, line 11b:

One Simple Wish handles most communication via email. The Form 990 is uploaded to a secure Dropbox file with a password and distributed to Board members. They have 3 business days to review it and provide feedback, in writing. If no feedback, they are asked to respond to the email that they have read and reviewed the Form 990.

Form 990, Part VI, Section B, Line 12c:

The Organization regularly and consistently monitors and enforces compliance with the conflict of interest policy by requiring each director, principal officer and member of a committee with governing board delegated powers to annually sign a statement. This statement affirms such person: has received a copy of the conflict of interest policy, has read and understands the policy, has agreed to comply with the policy, and understands the Organization is charitable and in order to maintain its federal tax exemption it must engage primarily in activities which accomplish one or more of its tax-exempted purposes.

	Form	990,	Part	: VI,	Section	в,	Line	15a	.:					
	LHA For	Paperw	ork Redu	ction Ac	t Notice, see th	e Inst	ructions fo	or Forn	n 990 or	990-EZ.	S	chedule O	(Form 990 or 990-EZ)	(2016)
	632211 08-	25-16							37					
10	27051	4 75	5348	8888		20	016.05	070	ONE	SIMPLE	WISH,	INC.	8888_	1

Schedule O (Form 990 or 990-EZ) (2016)		Page 2
Name of the organization ONE SIMPLE WIS	SH, INC.	Employer identification number 26-3128590
The executive director's sal	ary was based on a review an	d approval by the
board of directors and inclu	ided an assessment of other s	imilar
organizations in the Mercer	County area as well as an ex	pectation of
growth. The decision was do	ocumented in the organization	's minutes. No
other officers receive compe	ensation therfore there is no	process for
determining other officers'	compensation.	
Form 990, Part VI, Section C	. Line 19:	
	overning documents, conflict	of interest
policy, and financial statem	ments available to the public	upon request.
Form 990, Part XII, line 2c		
There was no change in the poutside accounting firm.	process of overseeing or sele	ecting the
	6	
632212 08-25-16	Sch	nedule O (Form 990 or 990-EZ) (2016)
270514 756348 8888	38 2016.05070 ONE SIMPLE WISH,	INC. 88881

(Rev. January 2017)

Department of the Treasury Internal Revenue Service

Application for Automatic Extension of Time To File an Exempt Organization Return

File a separate application for each return.

▶ Information about Form 8868 and its instructions is at www.irs.gov/form8868 .

Electronic filing (e-file). You can electronically file Form 8868 to request a 6-month automatic extension of time to file any of the forms listed below with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, for which an extension request must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit *www.irs.gov/efile*, click on Charities & Non-Profits, and click on *e-file* for *Charities and Non-Profits*.

Automatic 6-Month Extension of Time. Only submit original (no copies needed).

All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

				Lucel Ind	er sidendign	ig number		
Type or	Name of exempt organization or other filer, see instru	uctions.		Employe	Employer identification number (EIN) o			
print			06 0100500					
File by the	ONE SIMPLE WISH, INC.	26-3128590						
due date for filing your return See	ling your eturn. See 1977 N. OLDEN AVENUE #292							
instructions.	nstructions. City, town or post office, state, and ZIP code. For a foreign address, see instructions. TRENTON, NJ 08618							
Enter the	Return Code for the return that this application is for (fil	le a separa	te application for each return)			01		
Applicati	ion	Return	Application			Return		
Is For		Code	Is For			Code		
Form 990) or Form 990-EZ	01	Form 990-T (corporation)			07		
Form 990)-BL	02	Form 1041-A			08		
Form 472	20 (individual)	03	Form 4720 (other than individual)			09		
Form 990)-PF	04	Form 5227			10		
Form 990)-T (sec. 401(a) or 408(a) trust)	05	Form 6069			11		
Form 990)-T (trust other than above)	06	Form 8870			12		
• If this box ▶ [1 I re for ▶[organization does not have an office or place of busines is for a Group Return, enter the organization's four digit If it is for part of the group, check this box ▶ quest an automatic 6-month extension of time until the organization named above. The extension is for the or tax year beginning JUL 1, 2016 ne tax year entered in line 1 is for less than 12 months, of	Group Exe and atta May organizatio	emption Number (GEN) I ch a list with the names and EINs of $\underline{y \ 15, \ 2018}$, to file on's return for: d ending JUN 30, 2017	f this is fo all memb	r the whole g pers the exter npt organizati	ision is for.		
	Change in accounting period				1			
	his application is for Forms 990-BL, 990-PF, 990-T, 4720	, or 6069,	enter the tentative tax, less any			0.		
	nrefundable credits. See instructions.			3a	\$	0.		
	his application is for Forms 990-PF, 990-T, 4720, or 6069					0.		
	estimated tax payments made. Include any prior year overpayment allowed as a credit. 3b					0.		
	lance due. Subtract line 3b from line 3a. Include your pa	-				0.		
	using EFTPS (Electronic Federal Tax Payment System).			<u>3c</u>	\$			
instruction:	If you are going to make an electronic funds withdrawal ns.	i (direct de	bit) with this Form 8868, see Form 8	453-EO a	na Form 8879	9-EO for payment		
LHA F	or Privacy Act and Paperwork Reduction Act Notice,	see instru	uctions.		Form 8	868 (Rev. 1-2017)		

Mail to: Department of the Treasury Internal Revenue Service Center Ogden, UT 84201-0045

623841 01-11-17

10270514 756348 8888

Entor filor's identifying number