Form **990**

Department of the Treasury

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) Do not enter social security numbers on this form as it may be made public. Go to www.irs.gov/Form990 for instructions and the latest information.



intern	al Reve	nue Service				
AF	or th	e 2023 calendar year, or tax year beginning and	ending			
BC	heck if plicab	le: C Name of organization		D Employer ident	tification n	umber
	Addre	WAR CHILD USA, INC.				
	Name			20-0994	157	
	Initial	A second se	Room/suite	E Telephone num	ber	
	Final	200 DELAWARE AVENUE	900	716-416	-7046	
h				G Gross receipts \$		544,233
	Amer	DITERATO NY 1/202		H(a) Is this a group	o return	
	Appli tion	F Name and address of principal officer: PETER STRINGHAM		for subordinat	tes? [Yes X No
	pend	SAME AS C ABOVE		H(b) Are all subordinate	s included?	Yes No
IT	ах-өх	empt status: X 501(c)(3) 501(c) () (insert no.) 4947(a)(1)	or 📃 527	If "No," attach	n a list. See	instructions
KF	orm o	f organization; 🔀 Corporation 📄 Trust 🦳 Association 📄 Other	L Year	of formation: 2001	M State of	f legal domicile; N
Pa	rtl	Summary				
	1	Briefly describe the organization's mission or most significant activities:	SCHEDU	LE O		
2 L						
rna	2	Check this box if the organization discontinued its operations or dispos	ed of more	than 25% of its net a	assets.	
ove	3	Number of voting members of the governing body (Part VI, line 1a)			3	
ŏ	4	Number of independent voting members of the governing body (Part VI, line 1b)			4	1
82 8	5	Total number of individuals employed in calendar year 2023 (Part V, line 2a)			5	
vitie	6	Total number of volunteers (estimate if necessary)			6	1
cti	7 a	Total unrelated business revenue from Part VIII, column (C), line 12			7a	0
<		Net unrelated business taxable income from Form 990-T, Part I, line 11			7b	0
				Prior Year		urrent Year
	8	Contributions and grants (Part VIII, line 1h)		316,465		544,233
nu	9	Program service revenue (Part VIII, line 2g)		0	•	6 544,233 Yes X No Gee instructions aber e of legal domicile: N Current Year 544,233 0 0 Current Year 544,233 0 0 Current Year 544,233 0 0 0 Current Year 50,000 0 0 379,301 459,301 37,596 End of Year 221,378 70,946 150,432
eve	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	900 716-416-7046 CIP or foreign postal code G cross receipts \$ 544,233 H(a) Is this a group return for subordinates? Yes No STRINGHAM Ves No (insert no.) 4947(a)(1) or 527 Yes No H(b) Are all subordinates included? Yes No Sociation Other L Year of formation: 2001 M State of legal domicile: N sociation Other L Year of formation: 2001 M State of legal domicile: N significant activities: SEE SCHEDULE O tinued its operations or disposed of more than 25% of its net assets. Part V, line 1a) 3 0 arr (l), line 1a 3 0 0 0 gening body (Part VI, line 1b) 4 0 0 0 umn (C), line 12 7a 0 0 gening body (Part VI, line 2a) 0 0 -47, 336 opt			
μ μ	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)				
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		316,465	•	496,897
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		50,000	•	50,000
	14	Benefits paid to or for members (Part IX, column (A), line 4)				· · · ·
ŝ	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)				30,000
nse	16a	Professional fundraising fees (Part IX, column (A), line 11e)		0	•	0
e de		Total fundraising expenses (Part IX, column (D), line 25) 113, 39	97.			
Ш		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)				
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		and the second se		459,301
	19	Revenue less expenses. Subtract line 18 from line 12		153,266	•	37,596
OC			Be			
sets	20	Total assets (Part X, line 16)				
AS	Check if applicable: Address change Change	Total liabilities (Part X, line 26)				
Net		Net assets or fund balances. Subtract line 21 from line 20		112,836		150,432
Pa	rt II	Signature Block				
Unde	r pen	alties of perjury, I declare that I have examined this return, including accompanying schedules	s and stateme	nts, and to the best of	my knowled	ge and belief, it is
true,	corre	ct, and complete. Declaration of preparer (other than officer) is based on all information of wh	ich preparer	has any knowledge.		

Sign Here	Signature of officer PETER STRINGHAM, BOARD CH . Type or print name and title	AIR Au S	Date 04/11/2024
	Print/Type preparer's name	Preparer's signature	Date Check PTIN
Paid		MARY MADONIA	04/02/24 ^{if} self-employed P00405803
Preparer	Firm's name FREED MAXICK CPAS	, P.C.	Firm's EIN 45-4051133
Use Only	Firm's address 424 MAIN STREET,	SUITE 800	
	BUFFALO, NY 14202	-3508	Phone no. 716-847-2651
May the I	RS discuss this return with the preparer shown abo	ve? See instructions	X Yes No

IUA For Denormark Deduction Art Nation and the constate instructions

Form	1990 (2023) WAR CHILD USA, INC.	20-0994157 Page 2
	rt III Statement of Program Service Accomplishments	Program Service Accomplishments O Contains a response or note to any line in this Part III O Contains a response or note to any line in this Part III O Contains a response or note to any line in this Part III O Contains a response or note to any line in this Part III O CONTROL AND ARE SUFFERING OT CHILDREN WHO ARE SUFFERING. Determine services of Schedule 0. See conducting, or make significant changes in how it conducts, any program services, as measured by expenses. If (b)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and program service accomplishments for each of its three largest program services, as measured by expenses. If (b)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and program service accomplishments for each of its three largest program services, as measured by expenses. If (b)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and program service accomplishments for each of its three largest program services, as measured by expenses. If (b)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and program service accomplishments for section of the U and to the amount of grants and allocations to others. If (b) O TERESS AS A RESULT OF WAR AND IN PARTICULAR PREJUDICE TO THE GENERALITY OF THE FOREGOING) TO BRING TO CHILDREN WHO ARE SUFFERING. D CHILDREN WHO ARE SUFFERING OUT OF SCHOL CHILDREN AND TAINABILITY BY ENGAGING WITH COMMUNITIES TO CREATE LEADERS RS FOR THE IRI SYSTEM IN THE DEMOCRATIC REPUBLIC OF CONGO. D reading grant of sector of the grant of sector
	Check if Schedule O contains a response or note to any line in this Part III	
1	Briefly describe the organization's mission:	
		3) TO BRING
	SUCH RELIEF TO CHILDREN WHO ARE SUFFERING.	
2		
	prior Form 990 or 990-EZ?	Yes A No
~	If "Yes," describe these new services on Schedule O.	
3		
	If "Yes," describe these changes on Schedule O.	
4		
		s, the total expenses, and
40	revenue, if any, for each program service reported. 79.327	
4a		
	SUCH RELIEF TO CHILDREN WHO ARE SUFFERING.	J/ TO DRING
	been Kellier to entilbailt who are botteking.	
4b	(Code:) (Expenses \$ 228,339. including grants of \$) (Revenue	
	TO BUILD SUSTAINABILITY BY ENGAGING WITH COMMUNITIES TO (CREATE LEADERS
	AND SUPPORTERS FOR THE IRI SYSTEM IN THE DEMOCRATIC REPUB	BLIC OF CONGO.
4c	(Code:) (Expenses \$ including grants of \$) (Revenue (Code:))	ie\$)
<u> </u>		
4d	Other program services (Describe on Schedule O.)	Υ.
<u> </u>)
4e	Total program service expenses 307,666.	
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 Form 990 (2023)
 WAR CHILD USA, INC.

 Part IV
 Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		<u> </u>
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		<u> </u>
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		<u> </u>
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		X
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?			
	If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi-endowments? If "Yes," complete Schedule D, Part V	10		Х
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VII, IX, or X,			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a		Х
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		Х
с	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		Х
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		Х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a		х
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		Х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	Х	
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b	х	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	Х	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17		Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18	х	
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		х
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
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		х
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IV Checklist of Required Schedules (continued)			
		Yes	No
Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	22		Х
and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
Schedule J	23		Х
last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	24a		X
Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	24c		
	24d		
	25a		X
that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	25b		X
	26		X
entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		X
Was the organization a party to a business transaction with one of the following parties? (See the Schedule L, Part IV,			
A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			
"Yes," complete Schedule L, Part IV	28a		X
A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		X
A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If			
"Yes," complete Schedule L, Part IV	28c		X
Did the organization receive more than \$25,000 in noncash contributions? If "Yes," complete Schedule M	29		X
	30		X
	31		Х
Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	32		X
Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	33		X
Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	34		X
	35a		X
	35b		
Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	36		X
	37		X
Note: All Form 990 filers are required to complete Schedule O	38	Х	
Check it Schedule O contains a response or note to any line in this Part V			
		Yes	No
Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
(gambling) winnings to prize winners?	1c	990	
	Part IX. column (A). Ime 2? If 'Yes,' complete Schedule I, Parts I and III Did the organization answer 'Yes' to Part VII. Section A. Ine 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 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 Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization attain an accrow account other than a refunding escrow at any time during the year to defease any tax exempt bonds? Did the organization as an 'on behalf of' issuer for bonds outstanding at any time during the year? Section 501(c)(8), 501(c)(1) and 501(c)(20) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I Is the organization report any any of the organization's prior Forms 990 or 90-E27 If 'Yes,' complete Schedule L, Part I Did the organization report any any of the organization's prior Forms 990 or 90-E27 If 'Yes,' complete Schedule L, Part I Did the organization provide a grant or ther assistance to any current or former office, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity for Lamp and or threas instanction with one of the following parties? (See the Schedule L, Part II Was the organization a party to a business transaction with one of the following parties? (See the Schedule L, Part IV A tamity member of any individual descheded in line 28a? If 'Yes,' complete Schedule L, Part IV A tamity comber of any individual descheded in lin	Part K. column (A). Ine 2? If "Yes," complete Schedule I, Parts I and III 22 Did the organization answer "Yes" to Part VII. Section A. Jine 3. A, 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 Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than 5100.000 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 J 24a Did the organization invest any proceeds of tax-exempt bond issue with an outstanding principal amount of more than 5100.000 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 J 24a Did the organization maintain an escrow account other than a refunding escrow at any time during the year? 24a Did the organization and as an "on behalf of" issuer for bonds outstanding at any time during the year? 24a Did the organization and as an "on behalf of" issuer for bonds outstanding principal so any current or former officer, director, trustee, key employee, reator or founder, substantia contributor, or 35% 25b Did the tarsasction has not been reported on any of the organization's port of substantia contributor, or a 35% 25b Did the organization report any and map ensors? If "Yes," complete Schedule L, Part II 26b Did the organization provide a grant or other assistance to any current or former officer, director, t	Part K. solumn (J.), Ine 27. If "Yes," complete Schedule I, Part I and II. 24. (A 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J. Dut 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 J. Mrv, do to fine 25d. (Mrv, do to fine 25d. (Mrv

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Par	TV Statements Regarding Other IRS Filings and Tax Compliance (continued)			
			Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
	filed for the calendar year ending with or within the year covered by this return 2a 0			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		
	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 on 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			I
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X
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		<u>X</u>
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
	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			1
	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			I
	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		<u>X</u>
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			1
	to file Form 8282?	7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year7d			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		Х
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Х
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	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:			
а	Initiation fees and capital contributions included on Part VIII, line 12 10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders			
b	Gross income from other sources. (Do not net amounts due or paid to other sources against			
	amounts due or received from them.) 11b			
12a	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 12b			
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		
	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			
с	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Х
	If "Yes," has it filed a Form 720 to report these payments? <i>If "No," provide an explanation on Schedule O</i>	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			
	excess parachute payment(s) during the year?	15		х
	If "Yes," see the instructions and file Form 4720, Schedule N.			
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		х
	If "Yes," complete Form 4720, Schedule O.			
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities			
••	that would result in the imposition of an excise tax under section 4951, 4952 or 4953?	17		1
	If "Yes," complete Form 6069.			
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 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 on Schedule O. See instructions.

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

X

3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person? 4 Did the organization make any significant thanges to its governing documents since the prior Form 990 was filed? 5 Did the organization have members or stockholders? The organization have members or stockholders? 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? De the organization averance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? 9 Did the organization averance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? 9 Is there any officer, director, truster, or key employee listed in Part VII. Section A, who cannot be reached at the organization's maining address? If 'Yes, 'reou'reord the rannes and addresses an Schedule O Section B. Policies (This Section A requests information about policies not required by the Internal Revenue Code.] 10 Did the organization have local chapters, tranches, or affiliates? 11 12 12 12 Did the organization have	andy, or if the governing ain on Schedule 0. adependent b or a business relationship with any other c or a business relationship with any other performed by or under the direct supervision ay or other person? an of the organization's assets? ad the power to elect or appoint one or a approval by) members, stockholders, or b approval by the laternal Revenue Code. required by the Internal Revenue Code. required by the Internal Revenue Code. no schedule 0 and the policy? in a second purposes? no fits governing body before filing the form? view this Form 990. b in 13 interests that could give rise to conflicts? ance with the policy? if "Yes," describe ilicy? lude a review and approval by independent leiberation and decision? ista could give rise to conflicts? ista could give rise to conflicts? ance with the policy? if "Yes," describe itcore itcore <td< th=""><th>es</th></td<>	es
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 b Other officers or key employees of the organization	15b cctions. venture or similar arrangement with a the organization to evaluate its participation eps to safeguard the organization's 16b NY 24-A, if applicable), 990, and 990-T (section 501(c)(3)s only) availst apply. Other (explain on Schedule O) governing documents, conflict of interest policy, and financial esses the organization's books and records 14202	ζ
If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions. 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? 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? 17 List the states with which a copy of this Form 990 is required to be filed	ctions. 16a wenture or similar arrangement with a 16a the organization to evaluate its participation 16a eps to safeguard the organization's 16b NY 16b 24-A, if applicable), 990, and 990-T (section 501(c)(3)s only) availst apply. Other (explain on Schedule O) governing documents, conflict of interest policy, and financial esses the organization's books and records 14202	-
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 X Own website Another's website Upon request Other (explain on Schedule O) Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and fi 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 - 716-416-7046 	Other <i>(explain on Schedule O)</i> governing documents, conflict of interest policy, and financial eses the organization's books and records 14202	ma
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20 State the name, address, and telephone number of the person who possesses the organization's books and records <u>THE ORGANIZATION - 716-416-7046</u>	14202	
THE ORGANIZATION - 716-416-7046	14202	
	Form 99	20

Form 990 (2023)	WAR CHILD USA, INC.	20-0994157 Page 7						
Part VII Compens	sation of Officers, Directors, Trustees, Key Employe	es, Highest Compensated						
Employee	Employees, and Independent Contractors							
Check if Sch	hedule O contains a response or note to any line in this Part VII							
Section A. Officers, D	Directors, Trustees, Key Employees, and Highest Compensated E	Employees						
•	for all persons required to be listed. Report compensation for the ca nization's current officers, directors, trustees (whether individuals o	, , ,						

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 the 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, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) 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.

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

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

(A)	(B)			(0	C)			(D)	(E)	(F)
Name and title	Average	(do		Pos	itior) than d	ne	Reportable	Reportable	Estimated
	hours per	box	, unle	ss pei	rson i	s both	n an	compensation	npensation compensation	
	week		cer ar	nd a d I	irecto	r/trus I	tee)	from	from related	other
	(list any	rector						the	organizations	compensation
	hours for	or di	ee			ated		organization	(W-2/1099-MISC/	from the
	related organizations	ustee	trust		66	bens		(W-2/1099-MISC/ 1099-NEC)	1099-NEC)	organization and related
	below	lual tr	tional		nploy	st con	_	1099-1420)		organizations
	line)	Individual trustee or director	In stitutional trustee	Officer	Key employee	Highest compensated employee	Former			organizations
(1) SAMANTHA NUTT	5.00				-					
BOARD MEMBER/PRESIDENT		х		x				30,000.	0.	0.
(2) PETER STRINGHAM	0.50									
BOARD CHAIR		Х		Х				0.	0.	0.
(3) MARIA HALE	0.50									
BOARD MEMBER		х						0.	Ο.	0.
(4) MICHAEL EIZENGA	0.50									
BOARD MEMBER		Х						0.	0.	0.
(5) GREG SLEWETT	0.50									
BOARD MEMBER		Х						0.	0.	0.
(6) DANIELLE STAMPLEY	0.50									
BOARD MEMBER/SECRETARY		Х		Х				0.	0.	0.
					<u> </u>					
						-				
					-	-				
332007 12-21-23	1						1	1		Form 990 (2023)

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Form 990 (2023)

	990 (2023) WAR CHILI									20-099	4157 Page	∍ 8
Par	t VII Section A. Officers, Directors, Trust		oloy	ees,			ghes	t C	ompensated Employee	s (continued)		
	(A) (B) Name and title Average hours per week			Average Position (do not check more than one box, unless person is both 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 em ployee	Highest compensated employee	Former	the organization (W-2/1099-MISC/ 1099-NEC)	organizations (W-2/1099-MISC/ 1099-NEC)	compensation from the organization and related organizations	ı
	Quidatada I								30,000.	0).
с	Subtotal Total from continuation sheets to Part VII Total (add lines 1b and 1c)	, Section A							0.	0	. 0).
2	Total number of individuals (including but no compensation from the organization										-	0
3	Did the organization list any former officer,	director, truste	e, k	key e	mpl	oye	e, or	hig	hest compensated emp	loyee on		lo
4	line 1a? <i>If "Yes," complete Schedule J for su</i> For any individual listed on line 1a, is the su	m of reportable	e co	mpe	ensa	tion	and	oth	er compensation from t	he organization	3 2 4 2	
5	and related organizations greater than \$150 Did any person listed on line 1a receive or a rendered to the organization? <i>If</i> "Yes." <i>com</i>	ccrue compen	sati	on fr	om	any	unre	late	ed organization or individ	dual for services		X
Sec	tion B. Independent Contractors					5013	011 .					
1	Complete this table for your five highest cor the organization. Report compensation for t	•	•							•		
	(A) Name and business	address	NC	ONE	2				(B) Description of s	ervices	(C) Compensation	
2	Total number of independent contractors (ir \$100,000 of compensation from the organiz	•	ot lin	nitec	l to i	thos (ted	above) who received mo	ore than		
											Form 990 (202	23)

332008 12-21-23

					A, INC.			20-0994	157 Page 9
Pa	rt V	/111	Statement of Reven	ue					
			Check if Schedule O conta	iins a respons	e or note to any lin		(B)	(0)	
						(A) Total revenue	Related or exempt	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
សួល	1	а	Federated campaigns	1a					
Contributions, Gifts, Grants and Other Similar Amounts			Membership dues]			
کي م			Fundraising events		114,217.				
ar /		d	Related organizations	1d					
ini, 0		е	Government grants (contributio	ons) 1e					
rtion S		f	All other contributions, gifts, grants						
ţ			similar amounts not included abov		430,016.				
ontro Dd		-	Noncash contributions included in lines 1			F 44 000			
<u>ਹ</u> ਰ		h	Total. Add lines 1a-1f		Business Code	544,233.			
	~	_							
/ice	2	a b							
Ser		c							
E a		d							
Program Service Revenue		e			_				
Pro			All other program service rever	nue	_				
			Total. Add lines 2a-2f						
	3		Investment income (including o						
			other similar amounts)						
	4		Income from investment of tax	-exempt bond	l proceeds				
	5		Royalties						
				(i) Real	(ii) Personal				
	6		Gross rents 6a						
			Less: rental expenses 6b						
			Rental income or (loss) 6c						
			Net rental income or (loss) Gross amount from sales of	(i) Securities					
	'	а	assets other than inventory 7a						
		h	Less: cost or other basis			-			
Ð		D	and sales expenses						
venue		с	Gain or (loss) 7c						
			Net gain or (loss)						
Other Re			Gross income from fundraising even including \$ 114,2	ents (not					
0			contributions reported on line						
			Part IV, line 18	· ·	Ba 0.				
		b	Less: direct expenses		Bb 47,336.				
			Net income or (loss) from fundi			-47,336.			-47,336.
	9		Gross income from gaming act						
			Part IV, line 19		Da				
			Less: direct expenses		9b				
			Net income or (loss) from gami						
	10	а	Gross sales of inventory, less r						
		_	and allowances	·····	0a				
			Less: cost of goods sold		Ob				
		С	Net income or (loss) from sales	or inventory	Business Code				
sn	11	2			Busiliess Code				
neo		a b			-				
ellai		c			-				
Miscellaneous Revenue			All other revenue		_				
Σ			Total. Add lines 11a-11d						
	12		Total revenue. See instructions			496,897.	0.	0.	
33200	9 12-	21-	23						Form 990 (2023)

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2023.03030 WAR CHILD USA, INC.

	Check if Schedule O contains a respons			(
	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				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16	50,000.	50,000.		
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	30,000.	15,088.	1,500.	13,412.
6	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages				
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (nonemployees):				
а	Management	29,296.		<u>4</u> ,026. 8,522.	<u>25,270.</u> 38,771.
b	Legal	47,293.		8,522.	38,771.
С	Accounting	18,981.		18,981.	
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
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.)	10 000			10 000
12	Advertising and promotion	12,837.		4 201	12,837.
13	Office expenses	4,381.		4,381.	
14	Information technology				
15	Royalties				
16	Occupancy		6 600		0.007
17	Travel	15,715.	6,688.		9,027.
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20					
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23	Insurance				
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount list line 24e expenses on Schedule 0.)				
а	amount, list line 24e expenses on Schedule 0.) PROGRAM ACTIVITIES	235,890.	235,890.		
a b	DONOR DATABASE AND PROC	14,080.	200,000.		14,080.
c b	BANK CHARGES	828.		828.	
d					
e	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	459,301.	307,666.	38,238.	113,397.
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)				

332010 12-21-23

08360409 759621 7762228

2023.03030 WAR CHILD USA, INC.

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Form 990 (2023)

Form 990 (2023)

WAR CHILD USA INC. Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A)

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

3320	11	12-21	1-23
3320	11	12-21	1-23

08360409	759621	7762228	
00000400	122021	1102220	

Form 990 (2023) Part X Balance Sheet WAR CHILD USA, INC.

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		Check if Schedule O contains a response or note to any line in this Part X			
			(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing	208,271.	1	212,876.
	2	Savings and temporary cash investments		2	
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net	934.	4	
	5	Loans and other receivables from any current or former officer, director,			
		trustee, key employee, creator or founder, substantial contributor, or 35%			
		controlled entity or family member of any of these persons		5	
	6	Loans and other receivables from other disqualified persons (as defined			
		under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
ts	7	Notes and loans receivable, net		7	
Assets	8	Inventories for sale or use		8	8,502.
Ä	9	Prepaid expenses and deferred charges		9	
	10a	Land, buildings, and equipment: cost or other			
		basis. Complete Part VI of Schedule D 10a			
	b	Less: accumulated depreciation 10b		10c	
	11	Investments - publicly traded securities		11	
	12	Investments - other securities. See Part IV, line 11		12	
	13	Investments - program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11		15	
	16	Total assets. Add lines 1 through 15 (must equal line 33)	209,205.	16	221,378.
	17	Accounts payable and accrued expenses	5,574.	17	18,758.
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
es	22	Loans and other payables to any current or former officer, director,			
ii ti		trustee, key employee, creator or founder, substantial contributor, or 35%			
Liabilities		controlled entity or family member of any of these persons		22	
	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third			
		parties, and other liabilities not included on lines 17-24). Complete Part X	00 705		E0 100
		of Schedule D	90,795.		52,188.
	26	Total liabilities. Add lines 17 through 25	96,369.	26	70,946.
ş		Organizations that follow FASB ASC 958, check here X			
nce	07	and complete lines 27, 28, 32, and 33.	112,836.	07	150,432.
alaı	27	Net assets without donor restrictions	112,030.	27	130,432.
ар	28	Net assets with donor restrictions		28	
'n		Organizations that do not follow FASB ASC 958, check here			
Net Assets or Fund Balances	29	and complete lines 29 through 33. Capital stock or trust principal, or current funds		29	
ets		Paid-in or capital surplus, or land, building, or equipment fund		29 30	
Isse	30 31	Detained comings, and surrough a commutated in come, on other funds		30	
et∧	32	Total net assets or fund balances	112,836.	32	150,432.
Ź	32	Total liabilities and net assets/fund balances	209,205.	32 33	221,378.
	00		200,200.	00	Form 990 (2023)

Form **990** (2023)

_	1990 (2023) WAR CHILD USA, INC.	<u>20-099</u>	4157	Pag	_{je} 12
Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1	496		
2	Total expenses (must equal Part IX, column (A), line 25)	2	459	-	
3	Revenue less expenses. Subtract line 2 from line 1	3			96.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	112	, 8:	36.
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 on Schedule O)	9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,				
	column (B))	10	150	, 43	32.
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 on Schedule	О.			
2a			2a	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a			
	separate basis, consolidated basis, or both:				
	X Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b		<u> </u>
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	basis,			
	consolidated basis, or both:				
	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				
	review, or compilation of its financial statements and selection of an independent accountant?		2c		<u>X</u>
	If the organization changed either its oversight process or selection process during the tax year, explain on Sch	edule O.			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the				
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?		3a		<u>X</u>
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	ed audit			
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b	000	

Form **990** (2023)

332012 12-21-23

SCHEDULE A	١
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Department of the Treasury Internal Revenue Service

(Form 990)

Public Charity Status and Public Support Complete if the organization is a section 501(c)(3) organization or a section

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

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

OMB No. 1545-0047
2023
Open to Public Inspection

Name of the organization	

Nan		the organization							
			CHILD USA,						0-0994157
Ра	rt I	Reason for Public C	Charity Status.	(All organizations must c	omplete th	nis part.) S	ee instructions	S.	
The	organ	ization is not a private found	ation because it is: (F	For lines 1 through 12, c	heck only	one box.)			
1		A church, convention of chu	urches, or associatio	n of churches described	in sectio	on 170(b)(1	I)(A)(i).		
2		A school described in secti	ion 170(b)(1)(A)(ii). (Attach Schedule E (Forn	ו 990).)				
3		A hospital or a cooperative	hospital service orga	anization described in se	ection 170)(b)(1)(A)(ii	i).		
4		A medical research organization	ation operated in cor	njunction with a hospital	described	in sectio	n 170(b)(1)(A)	(iii). Enter	the hospital's name,
		city, and state:							
5									
		section 170(b)(1)(A)(iv). (C		°		, ,			
6	\square	A federal, state, or local gov		nental unit described in	section 17	70(b)(1)(A)	(v).		
	X	An organization that normal	•				.,	e general r	ublic described in
'		section 170(b)(1)(A)(vi). (Co			onna gove			e general p	
8		A community trust describe		(1)(A)(ui) (Complete Der	• 11 \				
	H					ad in aanii	nation with a	land arout	
9		An agricultural research org							
		or university or a non-land-g	frant college of agric	ulture (see instructions).	Enter the I	name, city	, and state of t	ine college	or
		university:							
10		An organization that normal						•	•
		activities related to its exem							
		income and unrelated busir		(less section 511 tax) fro	m busines	sses acqui	red by the org	anization a	fter June 30, 1975.
		See section 509(a)(2). (Cor	mplete Part III.)						
11		An organization organized a	and operated exclusi	vely to test for public sa	fety. See	section 50)9(a)(4).		
12		An organization organized a	and operated exclusi	vely for the benefit of, to	perform t	he functio	ns of, or to car	ry out the	purposes of one or
		more publicly supported or	ganizations describe	d in section 509(a)(1) d	r section	509(a)(2).	See section 5	6 09(a)(3). (Check the box on
		_lines 12a through 12d that o	describes the type of	f supporting organizatior	n and com	plete lines	12e, 12f, and	12g.	
а		Type I. A supporting orga	anization operated, s	upervised, or controlled	by its supp	ported org	anization(s), ty	pically by	giving
		the supported organization	on(s) the power to req	gularly appoint or elect a	majority c	of the direc	tors or trustee	es of the su	ipporting
		organization. You must c	omplete Part IV, Se	ections A and B.					
b		Type II. A supporting orga	anization supervised	or controlled in connect	ion with its	s supporte	d organizatior	n(s), by hav	ring
		control or management o	f the supporting orga	anization vested in the sa	ame perso	ns that co	ntrol or manag	e the supp	ported
		organization(s). You mus	t complete Part IV,	Sections A and C.					
с		Type III functionally inte	grated. A supporting	g organization operated	in connect	tion with, a	and functionall	y integrate	d with,
		its supported organizatior	n(s) (see instructions)). You must complete I	Part IV, Se	ections A,	D, and E.		
d		Type III non-functionally	integrated. A supp	orting organization oper	ated in co	nnection w	ith its support	ted organiz	ation(s)
		that is not functionally inte						-	
		requirement (see instructi			•		-		
е		Check this box if the orga	,	•				I. Type III	
		functionally integrated, or					51 7 51	, ,,	
f	Ente	er the number of supported o							
g		vide the following information	• • • • • • • • • • • • • • • • • • • •						
		(i) Name of supported	(ii) EIN	(iii) Type of organization	(iv) Is the orga	anization listed ing document?	(v) Amount of	monetary	(vi) Amount of other
		organization		(described on lines 1-10 above (see instructions))	Yes	No	support (see in	structions)	support (see instructions)
					100				
	-								
Tota	ni 👘								1

WAR CHILD USA, 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.)

Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	184,038.	241,701.	183,094.	316,465.	544,233.	1469531.
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	104 020	041 701	102 004	216 465	E44 000	1460521
	Total. Add lines 1 through 3	184,038.	241,701.	183,094.	316,465.	544,233.	1469531.
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)						100 710
~							<u>109,749.</u> 1359782.
	Public support. Subtract line 5 from line 4.						1339702.
	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
	Amounts from line 4	184,038.	241,701.	183,094.	316,465.	544,233.	1469531.
	Gross income from interest,	101,050.	241,7010	105,054.	510,103.	511,255.	14055510
0	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources						
9							
Ŭ	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI.)						
11	Total support. Add lines 7 through 10						1469531.
	Gross receipts from related activities,	etc. (see instructio	ons)			12	
	First 5 years. If the Form 990 is for the		,			01(c)(3)	
	organization, check this box and sto	phere					
Sec	ction C. Computation of Publi	ic Support Per	centage				
14	Public support percentage for 2023 (I	line 6, column (f), d	ivided by line 11, c	olumn (f))		14	92.53 <u>%</u>
15	Public support percentage from 2022	Schedule A, Part	II, line 14			15	<u>83.59</u> %
16a	33 1/3% support test - 2023. If the	organization did no	t check the box or	n line 13, and line 1	14 is 33 1/3% or m	ore, check this bo	k and
	stop here. The organization qualifies	as a publicly supp	orted organization				X
b	33 1/3% support test - 2022. If the	organization did no	t check a box on I	ine 13 or 16a, and	line 15 is 33 1/3%	or more, check thi	s box
	and stop here. The organization qua	lifies as a publicly s	supported organiza	ation			
17a	10% -facts-and-circumstances test	t - 2023. If the org	anization did not o	check a box on line	e 13, 16a, or 16b, a	nd line 14 is 10% o	or more,
	and if the organization meets the fact	s-and-circumstance	es test, check this	box and stop her	re. Explain in Part	VI how the organiz	ation
	meets the facts-and-circumstances te	est. The organizatio	n qualifies as a pu	blicly supported or	rganization		
b	10% -facts-and-circumstances test	t - 2022. If the org	anization did not o	heck a box on line	e 13, 16a, 16b, or 1	7a, and line 15 is	10% or
	more, and if the organization meets the						
	organization meets the facts-and-circ		•				
18	Private foundation. If the organization	on did not check a	box on line 13, 16a	a, 16b, 17a, or 17b	o, check this box a		
						Schedule A	(Form 990) 2023

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WAR CHILD USA, INC.

Part III Support Schedule for Organizations Described in Section 509(a)(2)

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

Section A. Public Support						
Calendar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
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 organization's tax-exempt purpose						
3 Gross receipts from activities that 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						
6 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						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						
Section B. Total Support	, L		•	•	1	
Calendar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
9 Amounts from line 6						
10a 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						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included on 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						
assets (Explain in Part VI.) 13 Total support. (Add lines 9, 10c, 11, and 12.)			1			
14 First 5 years. If the Form 990 is for th	he organization's fi	rst second third	fourth or fifth tax	vear as a section 5	01(c)(3) organiz	ation
	e e					·
Section C. Computation of Publ						
15 Public support percentage for 2023 (column (f))		15	%
16 Public support percentage from 2022	2 Schedule A, Part	III, line 15			16	%
Section D. Computation of Inves						
17 Investment income percentage for 20	023 (line 10c, colur	mn (f), divided by l	ine 13, column (f))		17	%
18 Investment income percentage from	2022 Schedule A,	Part III, line 17			18	%
19a 33 1/3% support tests - 2023. If the	organization did r	not check the box	on line 14, and lin	e 15 is more than 3	3 1/3%, and line	e 17 is not
more than 33 1/3%, check this box a	nd stop here. The	organization qual	ifies as a publicly	supported organiza	ation	
b 33 1/3% support tests - 2022. If the	organization did r	not check a box or	n line 14 or line 19	a, and line 16 is mo	ore than 33 1/3%	6, and
line 18 is not more than 33 1/3%, che	eck this box and st	t op here. The orga	anization qualifies	as a publicly suppo	orted organizatio	on
20 Private foundation. If the organization	on did not check a	box on line 14, 19	a, or 19b, check t	his box and see ins	structions	
332023 12-21-23		1 5			Schedul	e A (Form 990) 2023

2023.03030 WAR CHILD USA, INC.

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1

2

3a

3b

3c

Yes No

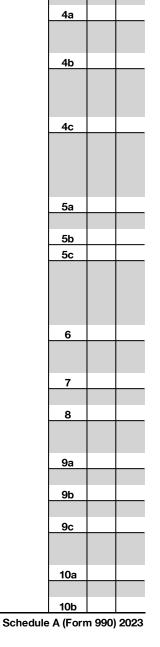
Part IV Supporting Organizations

(Complete only if you checked a box on line 12 of Part I. If you checked box 12a, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete Sections A, D, and E. If you checked box 12d, 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 lines 3b and 3c 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 box 12a or 12b in Part I, answer lines 4b and 4c 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 lines 5b and 5c 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 (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? *If "Yes," complete Part I of Schedule L (Form 990).*
- **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 on 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 on 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 line 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.)

332024 12-21-23



16 2023.03030 WAR CHILD USA, INC.

Schedule A (Form 990) 2023	WAR	CHILD	USA,	INC.
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Part IV Supporting Organizations (continued)

2

V. N

Yes No

			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 on lines 11b and			
	11c below, the governing body of a supported organization?	11a		
b	A family member of a person described on line 11a above?	11b		
с	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide			
	detail in Part VI.	11c		
Sec	Section B. Type I Supporting Organizations			
			Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, 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 officers, 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			
	Dort VI have a strength of the strengt of the strength of the strength of the strength of the			

Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization

		the supporting	
Section C. T	ype II Supp	orting Orga	nižations

 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
 Image: Control organization 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 managed
 Image: Control organization or trustees during the tax year also a majority of the directors or trustees of each of the organization was vested in the same persons that controlled or managed
 Image: Control organization organization organization was vested in the same persons that controlled or managed
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Section D. All Type III Supporting Organizations	

			res	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 on line 2, above, 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 plaved in this regard.	3		

Section E. Type III Functionally Integrated Supporting Organizations

I Check the box next to the method that the organization used to satisfy the integral Part Lest during the year 1500 IIISU UC	I Part Test during the year (see instructions).	Check the box next to the method that the organization used to satisfy the Integral P
---	---	---

- a The organization satisfied the Activities Test. Complete line 2 below.
- **b** The organization is the parent of each of its supported organizations. *Complete* **line 3** *below.*

с	The organization supported a governmental entity.	Describe in Part VI how you supported a governmental entity (see instructions).	
C	The organization supported a governmental entity.	Describe in Fait VI now you supported a governmental entity (see instruction <u>s).</u>	_

17

- 2 Activities Test. Answer lines 2a and 2b below.
- **a** 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.
- b Did the activities described on line 2a, above, 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.
- **3** Parent of Supported Organizations. **Answer lines 3a and 3b below.**

a 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? *If* "Yes" or "*No*" *provide details in* **Part VI.**

b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? *If "Yes," describe in Part VI the role played by the organization in this regard.* 332025 12-21-23

3b | | Schedule A (Form 990) 2023

2a

2b

3a

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2023.03030 WAR CHILD USA, INC.

77622281

1	 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (<i>explain in</i> Part VI). See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E. 					
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)		
1	Net short-term capital gain	1				
2	Recoveries of prior-year distributions	2				
3	Other gross income (see instructions)	3				
4	Add lines 1 through 3.	4				
5	Depreciation and depletion	5				
6	Portion of operating expenses paid or incurred for production or					
	collection of gross income or for management, conservation, or					
	maintenance of property held for production of income (see instructions)	6				
7	Other expenses (see instructions)	7				
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8				
	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)		
1	Aggregate fair market value of all non-exempt-use assets (see					
	instructions for short tax year or assets held for part of year):					
а	Average monthly value of securities	1a				
	Average monthly cash balances	1b				
	Fair market value of other non-exempt-use assets	1c				
	Total (add lines 1a, 1b, and 1c)	1d				
	Discount claimed for blockage or other factors					
Ū	(explain in detail in Part VI):					
2	Acquisition indebtedness applicable to non-exempt-use assets	2				
3	Subtract line 2 from line 1d.	3				
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,					
-	see instructions).	4				
		5				
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	6				
6	Multiply line 5 by 0.035.	7				
7	Recoveries of prior-year distributions					
8	Minimum Asset Amount (add line 7 to line 6)	8				
Sect	ion C - Distributable Amount			Current Year		
1	Adjusted net income for prior year (from Section A, line 8, column A)	1				
2	Enter 0.85 of line 1.	2				
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3				
4	Enter greater of line 2 or line 3.	4				
5	Income tax imposed in prior year	5				
6	Distributable Amount. Subtract line 5 from line 4, unless subject to					
	emergency temporary reduction (see instructions).	6				
7	Check here if the current year is the organization's first as a non-functional	lly integrate	d Type III supporting orga	nization (see		

Type III supporting org instructions).

Schedule A (Form 990) 2023

332026 12-21-23

 Schedule A (Form 990) 2023
 WAR CHILD USA, INC.

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

and 4c. 8 Breakdown of line 7: a Excess from 2019 b Excess from 2020 c Excess from 2021 d Excess from 2022 e Excess from 2023

 Schedule A (Form 990) 2023
 WAR CHILD USA, INC.
 2

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

 Section D - Distributions
 1

 1
 Amounts paid to supported organizations to accomplish exempt purposes
 1

Sect	ion D - Distributions				Current Year
1	Amounts paid to supported organizations to accomplish exe	mpt purposes		1	
2	Amounts paid to perform activity that directly furthers exemp	t purposes of supported			
	organizations, in excess of income from activity			2	
3	Administrative expenses paid to accomplish exempt purpose	es of supported organizations	3	3	
4	Amounts paid to acquire exempt-use assets			4	
5	Qualified set-aside amounts (prior IRS approval required - pro	ovide details in Part VI)		5	
6	Other distributions (describe in Part VI). See instructions.			6	
7	Total annual distributions. Add lines 1 through 6.			7	
8	Distributions to attentive supported organizations to which the	ne organization is responsive			
	(provide details in Part VI). See instructions.			8	
9	Distributable amount for 2023 from Section C, line 6			9	
10	Line 8 amount divided by line 9 amount			10	
Sect	ion E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistribution Pre-2023	s	(iii) Distributable Amount for 2023
_1	Distributable amount for 2023 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2023 (reason-				
	able cause required - explain in Part VI). See instructions.				
3	Excess distributions carryover, if any, to 2023				
a	From 2018				
b	From 2019				
C	From 2020				
d	From 2021				
e	From 2022				
f	Total of lines 3a through 3e				
g	Applied to underdistributions of prior years				
h	Applied to 2023 distributable amount				
i	Carryover from 2018 not applied (see instructions)				
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2023 from Section D,				
	line 7: \$				
<u>a</u>	Applied to underdistributions of prior years				
b	Applied to 2023 distributable amount				
C	Remainder. Subtract lines 4a and 4b from line 4.				
5	Remaining underdistributions for years prior to 2023, 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 2023. Subtract lines 3h				
	and 4b from line 1. For result greater than zero, explain in				
	Part VI. See instructions.				
7	Excess distributions carryover to 2024. Add lines 3i				

Schedule A (Form 990) 2023

19 2023.03030 WAR CHILD USA, INC.

Schedule A	(Form 990) 2023	WAR	CHILD	USA,	INC.			20-0994157	Page 8
Part VI	Supplemental Infor Part IV, Section A, lines 1 line 1; Part IV, Section D, Section D, lines 5, 6, and	mation. , 2, 3b, 3c lines 2 and	Provide th , 4b, 4c, 5a d 3; Part IV,	e explana , 6, 9a, 9 Section	ations requ b, 9c, 11a, E, lines 1c	, 2a, 2b, 3a, an	d 3b; Part V, line 1;	17a or 17b; Part III, line 12; lines 1 and 2; Part IV, Sectior Part V, Section B, line 1e; Pa	n C,
	(See instructions.)								
332028 12-21-2	3							Schedule A (Form S	990) 2023
					20				,

** PUBLIC DISCLOSURE COPY **

Schedule of Contributors

Attach to Form 990, 990-EZ, or 990-PF. Go to www.irs.gov/Form990 for the latest information. OMB No. 1545-0047

2023

Employer identification number

20-0994157

Schedule	В
(Form 990)	

Department of the Treasury Internal Revenue Service

Name of the organization

	WAR CHILD USA, INC.	20-
Organization type (chec		
Filers of:	Section:	
Form 990 or 990-EZ	\fbox 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), 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 (entering "N/A" in column (b) instead of the contributor name and address), II, and III.

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, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year for an *exclusively* set is the set in the set in the set in the set in the set is the set in the set in the set in the set in the set is the set in the set in the set in the set in the set is the set in the set in the set is the set in the set in the set in the set in the set is the set in the set in the set in the set in the set is the set in the set in the set in the set in the set is the set in the set in the set is the set in the set in the set is the set in the set in the set in the set is the set in the set in the set in the set in the set is the set in the set in the set in the set in the set is the set in the set in the set is the set in the set in the set in the set in the set is the set in the set in the set in the set in the set is the set in t

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), 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).

For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.

Schedule	B (For	m 990)	(2023)
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Name of organization

Employer identification number

20-0994157

WAR CHILD USA, INC.

Part I	Contributors (see instructions). Use duplicate copies of Part I if add	itional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$5,000.	PersonXPayrollNoncash(Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2		\$50,000.	PersonXPayrollNoncash(Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3		\$25,475.	PersonXPayrollNoncash(Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4		\$25,000.	PersonXPayrollNoncash(Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5		\$5,360.	PersonXPayrollNoncash(Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
6		\$8,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)

Schedule B (Form 990) (2023)

23 2023.03030 WAR CHILD USA, INC.

323452 12-26-23

Schedule	B (Form	990)	(2023)
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Name of organization

Employer identification number

20-0994157

WAR CHILD USA, INC.

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7		\$ <u>251,000.</u>	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
8_		\$11,081.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
9		\$14,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
10		\$ <u>25,000.</u>	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

Schedule B (Form 990) (2023)

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Page **2**

24 2023.03030 WAR CHILD USA, INC.

08360409 759621 7762228

Schedule	В	(Form	990)	(2023)
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Name of organization

Page **3**

Employer identification number

20-0994157

WAR CHILD USA, INC.

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

Noncash Property (see instructions). Use duplicate copies of Pan		
(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
	\$	
(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
	\$	
(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
	\$	
(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
	\$	
(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
	\$	
(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
	Description of noncash property given (b) Description of noncash property given	(b) FWV (or estimate) (See instructions.) (b) s (c) (c) (b) FWV (or estimate) (See instructions.) (c) (b) (c) (b) (c) (c) FMV (or estimate) (See instructions.) (c) (b) (c) (c) FMV (or estimate) (See instructions.) (c) (b) FMV (or estimate) (See instructions.) (c) (b) (c) (c) FMV (or estimate) (See instructions.) (c) (b) (c) (b) FMV (or estimate) (See instructions.) (c) (See instructions.) (c) (b) (c) (b) FMV (or estimate) (See instructions.) (see instructions.) (See instructions.) (see instructions.) (See instructions.) (see instructions.) (See instructions.)

08360409 759621 7762228

2023.03030 WAR CHILD USA, INC.

25

Name of o	organization		Employer identification number					
WAR C	HILD USA, INC.		20-0994157					
Part III	Exclusively religious, charitable, etc., contribu	tions to organizations described in sect	ion 501(c)(7), (8), or (10) that total more than \$1,000 for the year					
	from any one contributor. Complete columns (a completing Part III, enter the total of exclusively religious,	charitable, etc., contributions of \$1,000 or les	s for the year. (Enter this info. once.)					
(a) No.	Use duplicate copies of Part III if additional	l space is needed.						
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, a	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					
	(e) Transfer of gift							
	Transferee's name, address, a	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					
	(e) Transfer of gift							
	Transferee's name, address, a	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					
		(e) Transfer of gift						
			-					
	Transferee's name, address,	ana ZIP + 4	Relationship of transferor to transferee					
000454 10 5			0-L-1-1-D (F 000) (0000)					
323454 12-26	0-20	26	Schedule B (Form 990) (2023)					

2023.03030 WAR CHILD USA, INC. 77622281

SCHEDU (Form 990)	Treasury	Complete Part IV, line 6		on answered " 11b, 11c, 11d, to Form 990.	Yes" o 11e, 1	on Form 990, 1f, 12a, or 12b.	-		D23 n to Public
Internal Revenue Se Name of the o			gov/Form990 for i	nstructions an	id the l	atest informatio		ployer identifica	ection
	organizati	WAR CHILD US	A, INC.					20-099	
Part I 🛛 🤇	Organiza	ations Maintaining Done		nds or Othe	r Sim	ilar Funds or	Accour		
c	organizatio	n answered "Yes" on Form 990), Part IV, line 6.						
				(a) Donor ad	vised fu	unds	(b) Fur	nds and other ac	counts
		nd of year							
		f contributions to (during year)							
		f grants from (during year)							
		t end of year					function		
	-	on inform all donors and donor n's property, subject to the org	-					Yes	5 🗌 No
		on inform all grantees, donors,							
	J. J	oses and not for the benefit of		•	•				
impermi	issible priva	ate benefit?		, , , , , , , , , , , , , , , , , , , ,	,			Yes	s 🗌 No
Part II 0	Conserv	ation Easements. Comp	lete if the organiza	tion answered	"Yes" c	on Form 990, Par	t IV, line 7		
		ervation easements held by th							
Pi	reservation	of land for public use (for exa	mple, recreation or	r education)	Р	Preservation of a h	nistorically	important land	area
Pi	rotection o	f natural habitat			P	Preservation of a o	certified hi	storic structure	
		of open space							
		through 2d if the organization	held a qualified co	onservation con	tributio	on in the form of a	a conserva		
•	he tax year							Held at the End	of the Tax Year
		onservation easements							
		ricted by conservation easeme							
		vation easements on a certified					<u>2c</u>		
		vation easements included on	•				2d		
		ture listed in the National Regis vation easements modified, tra						during the tax	
year		valion easements mouneu, tra	insierreu, releaseu	, extinguisited,	or tern	inated by the org	Janization	during the tax	
	r of states v	where property subject to cons	servation easemen	t is located					
		tion have a written policy regar		-	pection	. handling of			
	•	orcement of the conservation e	•	· · ·		, C		Yes	s 🗌 No
6 Staff and	d voluntee	r hours devoted to monitoring,	inspecting, handli						e year
7 Amount	t of expens	es incurred in monitoring, insp	ecting, handling of	f violations, and	d enford	cing conservatior	i easemen	ts during the yea	ar
		vation easement reported on li	ne 2d above satisf	y the requireme	ents of	section 170(h)(4)	(B)(i)		
	tion 170(h)	· · · · · · · · · · · · · · · · · · ·							s 🛄 No
		be how the organization reports				•			
		d include, if applicable, the text		the organization	on's fina	ancial statements	s that desc	cribes the	
organiza	ation's acci Organiza	ounting for conservation easer ations Maintaining Colle	nents. Actions of Art.	Historical 1	Treas	ures, or Othe	r Simila	r Assets	
		the organization answered "Y			in ouo				
		elected, as permitted under FA			revenu	e statement and	halance s	heet works	
	-	easures, or other similar assets		-					
		Part XIII the text of the footnot	•					public	
		elected, as permitted under FA					ance sheet	t works of	
	-	ures, or other similar assets he		-					
		ng amounts relating to these it	-				•	-	
-		ded on Form 990, Part VIII, line						\$	
								\$	
2 If the or	ganization	received or held works of art, I	nistorical treasures	s, or other simil	ar asse	ts for financial ga			
	-	unts required to be reported ur		-					
		on Form 990, Part VIII, line 1						\$	
		Form 990, Part X						\$	
	perwork R	eduction Act Notice, see the	Instructions for F	orm 990.				Schedule D (Fo	orm 990) 2023
32051 09-28-23				27					
0400 7	E0C01	776000	• •	27) T.TT		102 -		
0409 7	JAQT	7762228	20	∠3.03030	J WA	R CHILD U	JSA, I	LINC .	77622

Sche		LD USA, I						20-09			age 2
Par	t III Organizations Maintaining C	collections of	Art, Hist	orical Tre	easures, or	Other S	Similar	⁻ Assets	contii	nued)	
3	Using the organization's acquisition, accessi	ion, and other rec	ords, checł	any of the	following that r	nake sigr	nificant u	ise of its			
	collection items (check all that apply).										
а	Public exhibition		d 🗌	Loan or exc	change progran	n					
b	Scholarly research		е 🗌	Other							
с	Preservation for future generations										
4	Provide a description of the organization's co	ollections and exp	olain how th	ney further t	he organization	i's exemp	ot purpos	se in Part	XIII.		
5	During the year, did the organization solicit of	or receive donatio	ns of art, hi	storical trea	sures, or other	similar a	ssets		_		_
_	to be sold to raise funds rather than to be ma		<u>u</u>		ollection?				Yes		No
Par	t IV Escrow and Custodial Arran reported an amount on Form 990, Pa		plete if the	organizatio	n answered "Ye	es" on Fo	orm 990,	Part IV, li	ne 9, or		
1a	Is the organization an agent, trustee, custod	ian, or other inter	mediary for	contributio	ns or other ass	ets not in	cluded				
	on Form 990, Part X?	•	•						Yes		No
b	If "Yes," explain the arrangement in Part XIII										
		-	-						Amoun	t	
с	Beginning balance						1c				
	Additions during the year						1d				
	Distributions during the year						1e				
	Ending balance						1f				
	Did the organization include an amount on F						/?		Yes		No
b	If "Yes," explain the arrangement in Part XIII.]
Par	t V Endowment Funds Complete in	f the organization	answered '	"Yes" on Fo	rm 990, Part IV						
		(a) Current yea	ur (b) F	Prior year	(c) Two years	back (c	d) Three y	ears back	(e) Fou	r years	back
1a	Beginning of year balance										
b	Contributions										
С	Net investment earnings, gains, and losses										
d	Grants or scholarships										
е	Other expenditures for facilities										
	and programs										
f	Administrative expenses										
g	End of year balance										
2	Provide the estimated percentage of the cur	rent year end bala	ance (line 1	g, column (a	a)) held as:						
а	Board designated or quasi-endowment		%								
b	Permanent endowment	%									
С	Term endowment	_%									
	The percentages on lines 2a, 2b, and 2c sho										
3a	Are there endowment funds not in the posse	ession of the orga	nization tha	it are held a	nd administere	d for the				N.	
	organization by:									Yes	No
	(i) Unrelated organizations?								3a(i)		
									3a(ii)		
b	If "Yes" on line 3a(ii), are the related organiza								3b		<u> </u>
4 Par	Describe in Part XIII the intended uses of the tVI Land, Buildings, and Equipm		ndowment i	unas.							
1 41	Complete if the organization answere		000 Part IV	/ line 11a S	See Form 990	Part X lir	10 ac				
			,	,	, i			d		k volu	
	Description of property	(a) Cost (basis (inve		• •	t or other (other)	.,	cumulate reciation	a	(d) Boo	k valu	e
4-	Land		Sumony	04313		acpi	Solution				
	Land				_						
b	Buildings										
	Leasehold improvements										
	Equipment										
	Other		lart V line 1	00.000							0.
- otd		- <u></u>	ai i A, III le T		<u>יי</u> שוי			 Schedule	D (Forr	n 990)	

Schedule D (Form 990) 2023

332052 09-28-23

(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, line 12, col. (B) Part VIII Investments - Program Related	d.		
Complete if the organization answered			
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or en	d-of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Col. (b) must equal Form 990, Part X, line 13, col. (B)			
Part IX Other Assets			
Complete if the organization answered "	Yes" on Form 990, Part IV, line	e 11d. See Form 990, Part X, line 15.	
	(a) Description		(b) Book value
(1)			
(2)			
(3)			
(3) (4)			
(4)			
(4) (5)			
(4) (5) (6) (7)			
(4) (5) (6) (7) (8)			
(4) (5) (6) (7) (8) (9)	5. col. (B))		
(4) (5) (6) (7) (8)	5, col. (B))		
(4) (5) (6) (7) (8) (9) Total. (Column (b) must equal Form 990, Part X, line 1: Part X Other Liabilities		e 11e or 11f. See Form 990, Part X, line 25	
(4) (5) (6) (7) (8) (9) Total. (Column (b) must equal Form 990, Part X, line 1: Part X Other Liabilities Complete if the organization answered "			5. (b) Book value
(4) (5) (6) (7) (8) (9) Total. (Column (b) must equal Form 990, Part X, line 1: Part X Other Liabilities Complete if the organization answered " 1. (a) Description of liability			1
(4) (5) (6) (7) (8) (9) Total. (Column (b) must equal Form 990, Part X, line 1: Part X Other Liabilities Complete if the organization answered " 1. (a) Description of liability (1) Federal income taxes			(b) Book value
(4) (5) (6) (7) (8) (9) Total. (Column (b) must equal Form 990, Part X, line 1. Part X Other Liabilities Complete if the organization answered " 1. (a) Description of liability (1) Federal income taxes (2) DUE TO RELATED PARTY			1
(4) (5) (6) (7) (8) (9) Total. (Column (b) must equal Form 990, Part X, line 1: Part X Other Liabilities Complete if the organization answered " 1. (a) Description of liability (1) Federal income taxes (2) DUE TO RELATED PARTY (3)			(b) Book value
(4) (5) (6) (7) (8) (9) Total. (Column (b) must equal Form 990, Part X, line 1. Part X Other Liabilities Complete if the organization answered " 1. (a) Description of liability (1) Federal income taxes (2) DUE TO RELATED PARTY (3) (4)			(b) Book value
(4) (5) (6) (7) (8) (9) Total. (Column (b) must equal Form 990, Part X, line 1: Part X Other Liabilities Complete if the organization answered " 1. (a) Description of liability (1) Federal income taxes (2) DUE TO RELATED PARTY (3) (4) (5)			(b) Book value
(4) (5) (6) (7) (8) (9) Total. (Column (b) must equal Form 990, Part X, line 1: Part X Other Liabilities Complete if the organization answered " 1. (a) Description of liability (1) Federal income taxes (2) DUE TO RELATED PARTY (3) (4) (5) (6)			(b) Book value
(4) (5) (6) (7) (8) (9) Total. (Column (b) must equal Form 990, Part X, line 1: Part X Other Liabilities Complete if the organization answered " 1. (a) Description of liability (1) Federal income taxes (2) DUE TO RELATED PARTY (3) (4) (5) (6) (7)			(b) Book value
(4) (5) (6) (7) (8) (9) Total. (Column (b) must equal Form 990, Part X, line 1. Part X Other Liabilities Complete if the organization answered " 1. (a) Description of liability (1) Federal income taxes (2) DUE TO RELATED PARTY (3) (4) (5) (6) (7) (8)			(b) Book value
(4) (5) (6) (7) (8) (9) Total. (Column (b) must equal Form 990, Part X, line 1. Part X Other Liabilities Complete if the organization answered " 1. (a) Description of liability (1) Federal income taxes (2) DUE TO RELATED PARTY (3) (4) (5) (6) (7) (8) (9)	Yes" on Form 990, Part IV, line	e 11e or 11f. See Form 990, Part X, line 25	(b) Book value 52,188.
(4) (5) (6) (7) (8) (9) Total. (Column (b) must equal Form 990, Part X, line 1. Part X Other Liabilities Complete if the organization answered " 1. (a) Description of liability (1) Federal income taxes (2) DUE TO RELATED PARTY (3) (4) (5) (6) (7) (8)	Yes" on Form 990, Part IV, line	e 11e or 11f. See Form 990, Part X, line 25	(b) Book value 52,188.

08360409 759621 7762228

(b) Book value (c) Method of valuation: Cost or end-of-year market value

Schedule D (Form 990) 2023 WAR CHILD USA, INC. Part VII Investments - Other Securities

(a) Description of security or category (including name of security)

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

Schedule D (Form 990) 2023

	edule D (Form 990) 2023 WAR CHILD USA, INC.		20-0994157	Page 4
Pa	rt XI Reconciliation of Revenue per Audited Financial Stat		e per Return	
	Complete if the organization answered "Yes" on Form 990, Part IV, lir	ie 12a.		
1			1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	1 1		
а	3 (<i>' ' '</i>			
b				
С	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII.)	2d		
е	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1			
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		
c	Add lines 4a and 4b		4c	
•				
_5	Total revenue. Add lines 3 and 4c. (This must equal Form 990. Part I. line 12.)		
)	ses per Return	
	Total revenue. Add lines 3 and 4c. (This must equal Form 990. Part I. line 12.	atements With Expen	ses per Return	
	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12, rt XII Reconciliation of Expenses per Audited Financial Sta	t ements With Expen te 12a.	ses per Return	
Pa	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12, rt XII Reconciliation of Expenses per Audited Financial Sta Complete if the organization answered "Yes" on Form 990, Part IV, line	t ements With Expen te 12a.	ses per Return	
Pa	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12, rt XII Reconciliation of Expenses per Audited Financial Statements Complete if the organization answered "Yes" on Form 990, Part IV, line Total expenses and losses per audited financial statements	tements With Expen	ses per Return	
Pa	Total revenue. Add lines 3 and 4c. (<i>This must equal Form 990, Part I, line 12,</i> rt XII Reconciliation of Expenses per Audited Financial State Complete if the organization answered "Yes" on Form 990, Part IV, line Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities	atements With Expen	ses per Return	
Pa 1 2 a	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12, rt XII) Reconciliation of Expenses per Audited Financial Statements Complete if the organization answered "Yes" on Form 990, Part IV, line Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments	2a 2b	ses per Return	
Pa 1 2 a	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12, rt XII) Reconciliation of Expenses per Audited Financial Statements Complete if the organization answered "Yes" on Form 990, Part IV, line Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities	2a 2b 2c	ses per Return	
Pa 1 2 a	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12, rt XII) Reconciliation of Expenses per Audited Financial State Complete if the organization answered "Yes" on Form 990, Part IV, line Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.)	2a 2b 2c 2d	ses per Return1	
Pa 1 2 a b c d	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12, rt XII Reconciliation of Expenses per Audited Financial State Complete if the organization answered "Yes" on Form 990, Part IV, line Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d	2a 2b 2c 2d	2e	
Pa 1 2 b c d e	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12, rt XII) Reconciliation of Expenses per Audited Financial State Complete if the organization answered "Yes" on Form 990, Part IV, line Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.)	2a 2b 2c 2d	2e	
Pa 1 2 a b c d e 3	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12, rt XII) Reconciliation of Expenses per Audited Financial State Complete if the organization answered "Yes" on Form 990, Part IV, line Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1:	2a 2b 2c 2d	2e	
Pa 1 2 a b c d e 3 4	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12, rt XII) Reconciliation of Expenses per Audited Financial State Complete if the organization answered "Yes" on Form 990, Part IV, line Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b	2a 2b 2c 2d	2e	
Pa 1 2 a b c d e 3 4	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12, rt XII) Reconciliation of Expenses per Audited Financial State Complete if the organization answered "Yes" on Form 990, Part IV, line Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1:	2a 2b 2c 2d 4a 4b	1 2e 3	
Pa 1 2 a b c d e 3 4 b c 5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12, rt XII Reconciliation of Expenses per Audited Financial State Complete if the organization answered "Yes" on Form 990, Part IV, line Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b Other (Describe in Part XIII.)	2a 2b 2c 2d	ses per Return 1 2e 3 4c	

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:

INCOME TAXES: THE ORGANIZATION HAS ELECTED TO FILE UNDER SECTION 501A OF THE INTERNAL REVENUE CODE WHICH PROVIDES TAX FREE STATUS TO CERTAIN INCOME RELATING TO OPERATIONS OF THE ORGANIZATION. NET NONEXEMPT FUNCTION INCOME IS SUBJECT TO FEDERAL AND STATE INCOME TAXES.

A TAX LIABILITY FROM UNCERTAIN TAX POSITION (ONE THAT MAY CAUSE THE

ORGANIZATION TO BE SUBJECT TO UNINCORPORATED BUSINESS INCOME TAX OR TO

LOSE ITS TAX-EXEMPT STATUS) MAY BE RECOGNIZED WHEN IT IS MORE LIKELY THAN

NOT THAT THE POSITION WILL BE SUSTAINED UPON EXAMINATION. AS OF DECEMBER

31, 2023 AND 2022, THE ORGANIZATION HAD NO FEDERAL AND STATE INCOME TAX

REFLECTED ON THE ACCOMPANYING STATEMENT OF FINANCIAL POSITION.

332054 09-28-23

Continued)	
	Schedule D (Form 990) 2023

332055 09-28-23

(Form 990)			nswered "Yes" on Form 990, Part IV		2023
Department of the Treasury	O a ta		Attach to Form 990.		Open to Public
Internal Revenue Service Name of the organization	GO TO W	ww.irs.gov/Form	990 for instructions and the latest		Inspection rer identification number
i and of the organization					
WAR CHILD USA	, INC.				994157
		ctivities Out	side the United States. Comp	lete if the organization an	swered "Yes" on
	art IV, line 14b.	n maintain record	ds to substantiate the amount of its gra	ants and other assistance	
-	-		he selection criteria used to award the		X Yes No
2 For grantmakers. I United States.	Describe in Part V the	e organization's	procedures for monitoring the use of it	s grants and other assista	ance outside the
	n. (The following Part	I, line 3 table ca	n be duplicated if additional space is r	needed.)	
(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in the region	 (d) Activities conducted in the region (by type) (such as, fundraising, pro- gram services, investments, grants to recipients located in the region) 	is a program serv	ice, expenditures for and investments
				TO IMPROVE THE LIT	
DEMOCRATIC REPUBLIC				FOR CHILDREN, ESPE	
OF CONGO	0	0	PROGRAM SERVICES	GIRLS, BY INCREASI	NG 250,000.
3 a Subtotal	0	0			250,000.
b Total from continuat sheets to Part I	tion	0			0.
c Totals (add lines 3a and 3b)		0			250,000.

Statement of Activities Outside the United States

For Paperwork Reduction Act Notice, see the Instructions for Form 990. SEE PART V FOR COLUMN (E) DESCRIPTIONS Schedule F (Form 990) 2023

LHA 332071 11-29-23

OMB No. 1545-0047
2023
Open to Public

3 Enter total number of other organizations or entities

	recognized as charities by the for counsel has provided a sect			

33

Part II Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

(d) Purpose of

grant

TO BRING RELIEF TO PERSONS ANYWHERE IN THE WORLD WHO ARE

SUFFERING HARDSHIP

(e) Amount

Schedule F (Form 990) 2023

(a) Name of organization

1

WAR CHILD USA, INC.

CANADA

(c) Region

SEE PART V FOR COLUMN (D) DESCRIPTIONS

(b) IRS code section

and EIN (if applicable)

(f) Manner of

of cash grant cash disbursement

50,000.WIRE

(g) Amount of

noncash

assistance

Ο.

(h) Description

of noncash

assistance

Schedule F (Form 990) 2023

Page 2

(i) Method of

valuation (book, FMV,

appraisal, other)

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of noncash assistance	(g) Description of noncash assistance	(h) Method of valuation (book, FMV, appraisal, other)

WAR CHILD USA, INC. Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16.

Т

Part III can be duplicated if additional space is needed.

Т

Page 3

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

Schedule F (Form 990) 2023

WAR CHILD USA, INC. Schedule F (Form 990) 2023 Part V Supplemental Information

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

PART I, LINE 2:

THE ORGANIZATION'S GOVERNING BOARD REVIEWS AND APPROVES ALL GRANTS.

PART I, LINE 3, COLUMN (E):

REGION: DEMOCRATIC REPUBLIC OF CONGO

(E) SPECIFIC TYPES OF SERVICES IN REGION: TO IMPROVE THE LITERACY AND

LEARNING OUTCOMES FOR CHILDREN, ESPECIALLY GIRLS, BY INCREASING ACCESS TO

EDUCATION FOR OUT OF SCHOOL CHILDREN AND TO BUILD SUSTAINABILITY BY

ENGAGING WITH COMMUNITIES TO CREATE LEADERS AND SUPPORTERS FOR THE IRI

SYSTEM IN THE DEMOCRATIC REPUBLIC OF CONGO.

PART II, COLUMN (D):

REGION: CANADA

(D) PURPOSE OF GRANT: TO BRING RELIEF TO PERSONS ANYWHERE IN THE WORLD

WHO ARE SUFFERING HARDSHIP, SICKNESS OR DISTRESS AS A RESULT OF WAR AND

IN PARTICULAR (BUT WITHOUT PREJUDICE TO THE GENERALITY OF THE FOREGOING)

TO BRING SUCH RELIEF TO CHILDREN WHO ARE SUFFERING.

332075 11-29-23

SCHEDULE G	Suppleme	ntal Information Regarding	Fund	Iraisi	ng or Gaming A	ctiv	ities	OMB No. 1545-0047				
(Form 990)		e organization answered "Yes" on organization entered more than \$15				r 19,	or if the	2023				
Department of the Treasury		Attach to Form 990 o						Open to Public				
Internal Revenue Service	Go t	o www.irs.gov/Form990 for instruc				n.		Inspection				
Name of the organization	ו							entification number				
	WAR CHILD USA, INC. 20-0994157 Part I Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not											
	complete this part		red "Y	es" or	n Form 990, Part IV, I	ine 1	7. Form 990-E	Z filers are not				
1 Indicate whether the	e organization rais	ed funds through any of the followin	•		,							
a Mail solicitat				0	overnment grants							
_	email solicitations				nment grants							
c Phone solici d In-person so		g Special	lunura	asing	events							
		or oral agreement with any individual	(incluc	ling of	ficers, directors, trus	tees,	or					
key employees list	ed in Form 990, Pa	art VII) or entity in connection with pr	rofessi	onal fi	undraising services?		Ye	s 🗌 No				
b If "Yes," list the 10	highest paid indiv	viduals or entities (fundraisers) pursua	ant to	agreer	ments under which th	ne fur	ndraiser is to b	be				
compensated at le	ast \$5,000 by the	organization.										
			(iii)	Did			Amount paid	(vi) Amount paid				
(i) Name and addres or entity (fund		(ii) Activity	fùndr have c or cor	ustody	(iv) Gross receipts from activity		or retained by) fundraiser	to (or retained by)				
			contrib				ted in col. (i)	organization				
			Yes	No								
Total			<u></u>									
3 List all states in whi or licensing.	ch the organizatio	n is registered or licensed to solicit c	ontrib	utions	or has been notified	it is e	exempt from r	egistration				

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

Schedule G (Form 990) 2023

LHA 332081 09-13-23

37 2023.03030 WAR CHILD USA, INC. Part II Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-FZ lines 1 and 6b. List events with gross receipts greater than \$5,000

		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events
					(add col. (a) through
		LA EVENT	SF EVENT	2	col. (c)
		(event type)	(event type)	(total number)	
1	Gross receipts	38,385.	28,366.	47,466.	114,217
2	Less: Contributions	38,385.	28,366.	47,466.	114,217
3	Gross income (line 1 minus line 2)				
4	Cash prizes				
5	Noncash prizes				
6	Rent/facility costs	9,758.			9,758
7	Food and beverages				
8	Entertainment		537.	36,476.	37,578
9 10	Other direct expenses Direct expense summary. Add lines 4 through				47,336
11	, , ,	()			-47,336
irt	Gaming. Complete if the organization				
	\$15,000 on Form 990-EZ, line 6a.	I	(I) Dull take (instant		
		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (d
1	Gross revenue				
2	Cash prizes				
3	Noncash prizes				
4	Rent/facility costs				
5	Other direct expenses				
6	Volunteer labor	└── Yes % └── No	└── Yes % └── No	└── Yes % └── No	
7	Direct expense summary. Add lines 2 throug	n 5 in column (d)			
	Direct expense summary. Add lines 2 through Net gaming income summary. Subtract line 7				
8	Net gaming income summary. Subtract line 7	í from line 1, column (d)			
8 En	Net gaming income summary. Subtract line 7 ter the state(s) in which the organization condu the organization licensed to conduct gaming a	<u>from line 1, column (d)</u> ucts gaming activities: _ ctivities in each of these	states?		Yes N
8 En	Net gaming income summary. Subtract line 7 ter the state(s) in which the organization condu	<u>from line 1, column (d)</u> ucts gaming activities: _ ctivities in each of these	states?		Yes N
8 En Is 1 If "	Net gaming income summary. Subtract line 7 ter the state(s) in which the organization condu- the organization licensed to conduct gaming a "No," explain: ere any of the organization's gaming licenses re	from line 1, column (d) ucts gaming activities: ctivities in each of these	states?	ear?	
8 En Is 1 If "	Net gaming income summary. Subtract line 7 ter the state(s) in which the organization conduct the organization licensed to conduct gaming a 'No," explain:	from line 1, column (d) ucts gaming activities: ctivities in each of these	states?	ear?	

332082 09-13-23

Schedule G (Form 990) 2023

Sch	edule G (Form 990) 2023	WAR	CHILD	USA,	INC.		20-0	99415	7 Page 3
11	Does the organization conduct of	gaming act	tivities with	nonmemt	oers?			Yes	No
12						of a partnership or other entity formed			
10	to administer charitable gaming Indicate the percentage of gami							Yes	└── No
								13a	%
								13b	%
14	Enter the name and address of	the person	who prepa	res the or	ganization's	s gaming/special events books and record	ds:		
	Nama								
	Name								
	Address								
15a	Does the organization have a cc	ontract with	n a third par	ty from w	hom the or	ganization receives gaming revenue?		Yes	No
	·								
b	If "Yes," enter the amount of ga					\$ and the arr	nount		
~	of gaming revenue retained by t If "Yes," enter name and addres	-	-						
U	in res, entername and addres		nu party.						
	Name								
	Address								
16	Gaming manager information:								
	5								
	Name								
	Coming manager companyation	. Ф							
	Gaming manager compensation	n \$							
	Description of services provided	ı							
	Director/officer	En En	nployee			endent contractor			
			. ,		·				
17	Mandatory distributions:								
а	Is the organization required und retain the state gaming license?							Yes	No
b						d to other exempt organizations or spent i			
	organization's own exempt activ								
Pa						ired by Part I, line 2b, columns (iii) and (v)	; and Par	t III, lines 9,	9b, 10b,
	15b, 15c, 16, and 17b, a	as applicat	ble. Also pro	vide any	additional i	nformation. See instructions.			
3320	83 09-13-23						Schedu	ule G (Form	n 990) 2023
					39				

	G (Form 990)		CHILD		INC.
Part IV	Supplemental	Information	(continued)	

 Schedule G	(Form 990)
	,

332084 04-01-23

SCHEDULE O (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization Supplemental Information to Form 990 or 990-EZ Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

Attach to Form 990 or Form 990-EZ.

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

2023 Open to Public Inspection

OMB No. 1545-0047

WAR CHILD USA, INC.

Employer identification number 20-0994157

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

TO PROVIDE FINANCIAL ASSISTANCE TO CHARITIES WORKING WITH CHILDREN IN

WAR-AFFECTED AREAS OF THE WORLD AND THOSE CHARITIES THAT WORK TO RAISE

PUBLIC AWARENESS ABOUT THE IMPACT OF WAR ON COMMUNITIES.

FORM 990, PART VI, SECTION A, LINE 3:

WAR CHILD USA, INC. SHARES COMMON INTERESTS AND PURPOSES WITH WAR CHILD

CANADA. ON JANUARY 1, 2021, THE ORGANIZATION ENTERED INTO AN AGREEMENT WITH

WAR CHILD CANADA TO PROVIDE VARIOUS GENERAL MANAGEMENT AND ADMINISTRATIVE

SERVICES THAT IT DOES NOT HAVE THE CAPACITY TO PERFORM, WHICH ARE REQUIRED

BY THE ORGANIZATION TO FURTHER ENABLE ITS CHARITABLE PURPOSES. SUCH

SERVICES INCLUDE MANAGING THE ORGANIZATION'S OPERATIONS, GENERAL

ADMINISTRATION, AND FUNDRAISING INITIATIVES.

FORM 990, PART VI, SECTION B, LINE 11B:

THE FORM 990 IS PREPARED BY AN OUTSIDE, INDEPENDENT ACCOUNTING FIRM. A

COPY IS PROVIDED TO ALL BOARD MEMBERS PRIOR TO FILING WITH THE INTERNAL

REVENUE SERVICE.

FORM 990, PART VI, SECTION B, LINE 12C:

ALL BOARD MEMBERS RECEIVE THE CONFLICT OF INTEREST POLICY AND ANNUALLY

COMPLETE THE CONFLICT OF INTEREST DISCLOSURE FORM.

FORM 990, PART VI, SECTION B, LINE 15A:

CONSIDERATION WAS GIVEN REGARDING EXPERIENCE AND GEOGRAPHIC LOCATION IN

MAKING COMPENSATION DECISIONS.

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. LHA 332211 11-14-23 41

Schedule O	(Form 990) 2023
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WAR CHILD USA, INC.

FORM 990, PART VI, SECTION C, LINE 19:

THE GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND REVIEWED FINANCIAL

STATEMENTS ARE AVAILABLE UPON REQUEST.

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