

** PUBLIC DISCLOSURE COPY **

| | | |
|---|--|---|
| Form 990 Department of the Treasury Internal Revenue Service | 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. | OMB No. 1545-0047 <div style="font-size: 24pt; font-weight: bold;">2023</div> Open to Public Inspection |
|---|--|---|

A For the 2023 calendar year, or tax year beginning **OCT 1, 2023** and ending **SEP 30, 2024**

| | | |
|---|---|---|
| B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending | C Name of organization SHELTER FOR LIFE INTERNATIONAL, INC. Doing business as Number and street (or P.O. box if mail is not delivered to street address) Room/suite 10201 WAYZATA BLVD 110 City or town, state or province, country, and ZIP or foreign postal code MINNETONKA, MN 55305 F Name and address of principal officer: MUSTAFA OMAR SAME AS C ABOVE | D Employer identification number 39-1657081 E Telephone number 763-416-0441 G Gross receipts \$ 7,087,021. H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. See instructions H(c) Group exemption number |
| I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () (Insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527 J Website: WWW.SHELTER.ORG K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other L Year of formation: 1989 M State of legal domicile: WI | | |

Part I Summary

| | | | |
|------------|---|----------------------------------|---------------------|
| 1 | Briefly describe the organization's mission or most significant activities: TO ENABLE PEOPLE AFFECTED BY CONFLICT AND DISASTER TO REBUILD THEIR LIVES AND COMMUNITIES. | | |
| 2 | Check this box <input type="checkbox"/> If the organization discontinued its operations or disposed of more than 25% of its net assets. | | |
| 3 | Number of voting members of the governing body (Part VI, line 1a) | 3 | 5 |
| 4 | Number of independent voting members of the governing body (Part VI, line 1b) | 4 | 5 |
| 5 | Total number of individuals employed in calendar year 2023 (Part V, line 2a) | 5 | 4 |
| 6 | Total number of volunteers (estimate if necessary) | 6 | 5 |
| 7a | Total unrelated business revenue from Part VIII, column (C), line 12 | 7a | 0. |
| 7b | Net unrelated business taxable income from Form 990-T, Part I, line 11 | 7b | 0. |
| 8 | Contributions and grants (Part VIII, line 1h) | Prior Year | Current Year |
| 9 | Program service revenue (Part VIII, line 2g) | 3,343,720. | 4,230,891. |
| 10 | Investment income (Part VIII, column (A), lines 3, 4, and 7d) | 3,825,745. | 2,797,010. |
| 11 | Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) | 8,757. | 51,563. |
| 12 | Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) | 76,318. | 7,557. |
| 13 | Grants and similar amounts paid (Part IX, column (A), lines 1-3) | 7,254,540. | 7,087,021. |
| 14 | Benefits paid to or for members (Part IX, column (A), line 4) | 0. | 0. |
| 15 | Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) | 0. | 0. |
| 16a | Professional fundraising fees (Part IX, column (A), line 11e) | 3,491,810. | 3,351,278. |
| 16b | Total fundraising expenses (Part IX, column (D), line 25) | 0. | 0. |
| 17 | Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) | 35,570. | 3,638,101. |
| 18 | Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) | 3,638,101. | 3,750,208. |
| 19 | Revenue less expenses. Subtract line 18 from line 12 | 7,129,911. | 7,101,486. |
| 20 | Total assets (Part X, line 16) | 124,629. | -14,465. |
| 21 | Total liabilities (Part X, line 26) | Beginning of Current Year | End of Year |
| 22 | Net assets or fund balances. Subtract line 21 from line 20 | 12,079,004. | 19,473,501. |
| | | 9,856,499. | 17,265,461. |
| | | 2,222,505. | 2,208,040. |

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

| | | | |
|-------------------------------|--|---|------|
| Sign Here | Signature of officer: Mustafa Omar Signature of preparer: DEIRDRE HODGSON MUSTAFA OMAR, CHIEF EXECUTIVE OFFICER Type or print name and title | Date | Date |
| Paid Preparer Use Only | Print/Type preparer's name: DEIRDRE HODGSON Firm's name: CLIFTONLARSONALLEN LLP Firm's address: 220 S 6TH STREET, SUITE 300 MINNEAPOLIS, MN 55402 | Preparer's signature: DEIRDRE HODGSON Date: 07/22/25 Check if self-employed: <input type="checkbox"/> PTIN: P01484710 Firm's EIN: 41-0746749 Phone no.: 612-376-4500 | |

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

Form 990 (2023)

SHELTER FOR LIFE INTERNATIONAL, INC.

39-1657081

Page 2

Part III Statement of Program Service Accomplishments

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

☒

1 Briefly describe the organization's mission:

SHELTER FOR LIFE INTERNATIONAL, INC. EXISTS TO DEMONSTRATE GOD'S LOVE BY ENABLING PEOPLE AFFECTED BY CONFLICT AND DISASTER TO REBUILD THEIR COMMUNITIES AND RESTORE THEIR LIVES.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? ☐ Yes ☒ No

If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? ☐ Yes ☒ No

If "Yes," describe these changes on Schedule O.

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses \$ 2,672,529. including grants of \$ 0.) (Revenue \$ 1,172,087.)

LIFT CASHEW SENEGAL PROGRAM:

SHELTER FOR LIFE INTERNATIONAL (SFL) HAS BEEN WORKING IN THE NATURAL REGION OF CASAMANCE (SEDHIOU, KOLDA, AND ZIGUINCHOR) IN SENEGAL SINCE 2012. AS A RESULT OF A CIVIL WAR OF SEVERAL DECADES WHICH HAS OCCASIONALLY OVERTAKEN CAPITAL AND MARKET DEVELOPMENT IN THIS REGION. SFL'S WORK IN CASAMANCE FOCUSES ON IMPROVING MARKET CONNECTIONS, PARTICULARLY IN THE CASHEW SECTOR, AND RESETTLEMENT OF FAMILIES DISPLACED BY CONFLICT. DURING THE FY 2024, TWO PROJECTS HAVE BEEN STILL UNDER IMPLEMENTATION.

ONE OF THE PROJECTS IS LIFT CASHEW THAT INCLUDES THE FOLLOWING ACTIVITIES AND OUTCOMES:

SHELTER FOR LIFE IS REGISTERED IN SENEGAL AS NON-PROFIT NGO. AS PART OF

4b (Code:) (Expenses \$ 900,483. including grants of \$ 0.) (Revenue \$ 394,924.)

THE GAMBIA PROGRAM:**CROP-H PROJECT**

THE CLIMATE RESILIENT OPTIMIZATION FOR PRODUCTIVITY IN HORTICULTURE (CROP-H) PROJECT HAS MADE SIGNIFICANT PROGRESS ACROSS ITS THREE COMPONENTS, DEMONSTRATING RESILIENCE AND ADAPTABILITY IN THE FACE OF CHALLENGES.

IN COMPONENT 1, FOCUSED ON INCREASING HORTICULTURAL PRODUCTIVITY AND MARKETS, CROP-H CONDUCTED ASSESSMENTS OF 30 COMMUNITY GARDENS, IDENTIFYING WIDESPREAD INFRASTRUCTURE LIMITATIONS AND DEVELOPING CRITERIA FOR IRRIGATION UPGRADES. A COMPREHENSIVE FARMER FIELD SCHOOL CURRICULUM WAS DEVELOPED, EMPHASIZING CLIMATE-SMART AGRICULTURE

4c (Code:) (Expenses \$ 2,804,575. including grants of \$ 0.) (Revenue \$ 1,229,999.)

AFGHANISTAN PROGRAM:

SFL AFGHANISTAN THROUGHOUT THE PARTNERSHIP WITH WFP FOR THE PERIOD OF SEPTEMBER 2024 TO MARCH 2025 IMPLEMENTING THE FOLLOWING PROJECTS: 1. RESILIENCE FOOD SYSTEM (RFS FOOD AND CBT). 2. SEASONAL SUPPORT FOOD AND EMERGENCY PROJECT AND 3. MATERNAL CHILD BENEFIT PROGRAM (MCBP). THESE PROJECTS ARE IMPLEMENTING TO THE FOLLOWING PROVINCES. KUNDUZ, BAGHLAN, BADA KHSHAN, GHAZNI AND BALKH. AFOREMENTIONED PROJECTS ARE IMPLEMENTING PARTNERSHIP WITH WFP IN 26 DISTRICTS IN 5 MENTIONED PROVINCES. ALTOGETHER 72,981 HOUSEHOLDS (510,867 INDIVIDUALS), BENEFITED DIRECTLY FROM IMPLEMENTED PROJECTS.

4d Other program services (Describe on Schedule O.)

(Expenses \$ 0. including grants of \$ 0.) (Revenue \$ 0.)

4e Total program service expenses 6,377,587.

Form 990 (2023)

Form 990 (2023)

SHELTER FOR LIFE INTERNATIONAL, INC.

39-1657081

Page 3

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)? <i>If "Yes," complete Schedule A</i> | <input checked="" type="checkbox"/> | |
| 2 Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> ? See instructions | <input checked="" type="checkbox"/> | |
| 3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i> | | <input checked="" type="checkbox"/> |
| 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? <i>If "Yes," complete Schedule C, Part II</i> | | <input checked="" type="checkbox"/> |
| 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? <i>If "Yes," complete Schedule C, Part III</i> | | <input checked="" type="checkbox"/> |
| 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? <i>If "Yes," complete Schedule D, Part I</i> | | <input checked="" type="checkbox"/> |
| 7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i> | | <input checked="" type="checkbox"/> |
| 8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i> | | <input checked="" type="checkbox"/> |
| 9 Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i> | | <input checked="" type="checkbox"/> |
| 10 Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i> | | <input checked="" type="checkbox"/> |
| 11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X, as applicable. | | |
| a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI</i> | <input checked="" type="checkbox"/> | |
| 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? <i>If "Yes," complete Schedule D, Part VII</i> | | <input checked="" type="checkbox"/> |
| c 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? <i>If "Yes," complete Schedule D, Part VIII</i> | | <input checked="" type="checkbox"/> |
| 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? <i>If "Yes," complete Schedule D, Part IX</i> | | <input checked="" type="checkbox"/> |
| e Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i> | <input checked="" type="checkbox"/> | |
| 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)? <i>If "Yes," complete Schedule D, Part X</i> | <input checked="" type="checkbox"/> | |
| 12a Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i> | <input checked="" type="checkbox"/> | |
| b Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional</i> | | <input checked="" type="checkbox"/> |
| 13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i> | | <input checked="" type="checkbox"/> |
| 14a Did the organization maintain an office, employees, or agents outside of the United States? | <input checked="" type="checkbox"/> | |
| 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? <i>If "Yes," complete Schedule F, Parts I and IV</i> | <input checked="" type="checkbox"/> | |
| 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? <i>If "Yes," complete Schedule F, Parts II and IV</i> | | <input checked="" type="checkbox"/> |
| 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? <i>If "Yes," complete Schedule F, Parts III and IV</i> | | <input checked="" type="checkbox"/> |
| 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? <i>If "Yes," complete Schedule G, Part I. See instructions</i> | | <input checked="" type="checkbox"/> |
| 18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i> | | <input checked="" type="checkbox"/> |
| 19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i> | | <input checked="" type="checkbox"/> |
| 20a Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i> | | <input checked="" type="checkbox"/> |
| b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? | | |
| 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? <i>If "Yes," complete Schedule I, Parts I and II</i> | | <input checked="" type="checkbox"/> |

332003 12-21-23

Form 990 (2023)

Form 990 (2023)

SHELTER FOR LIFE INTERNATIONAL, INC.

39-1657081

Page 4

Part IV Checklist of Required Schedules (continued)

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

Note: All Form 990 filers are required to complete Schedule O

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

| | Yes | No |
|--|-----|----|
| 1a Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable | | |
| b Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable | | |
| c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? | | |

Form 990 (2023)

SHELTER FOR LIFE INTERNATIONAL, INC.

39-1657081

Page 5

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

| | Yes | No |
|--|-----|----|
| 2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return | 2a | 4 |
| b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? | 2b | X |
| 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? | 3a | X |
| b If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation 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 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 AFGHANISTAN, SENEGAL, GUINEA-BISSAU 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 | X |
| b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? | 5b | X |
| c If "Yes" to line 5a or 5b, did the organization file Form 8886-T? | 5c | |
| 6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions? | 6a | X |
| b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? | 6b | |
| 7 Organizations that may receive deductible contributions under section 170(c). | | |
| a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? | 7a | X |
| b If "Yes," did the organization notify the donor of the value of the goods or services provided? | 7b | |
| c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? | 7c | X |
| d If "Yes," indicate the number of Forms 8282 filed during the year | 7d | |
| e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? | 7e | X |
| f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? | 7f | X |
| g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? | 7g | |
| 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. | | |
| a Did the sponsoring organization make any taxable distributions under section 4966? | 9a | |
| b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? | 9b | |
| 10 Section 501(c)(7) organizations. Enter: | | |
| a 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: | | |
| a Gross income from members or shareholders | 11a | |
| 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 | |
| b 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. | | |
| a Is the organization licensed to issue qualified health plans in more than one state? Note: See the instructions for additional information the organization must report on Schedule O. | 13a | |
| b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans | 13b | |
| c Enter the amount of reserves on hand | 13c | |
| 14a Did the organization receive any payments for indoor tanning services during the tax year? | 14a | X |
| b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O | 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? If "Yes," see the instructions and file Form 4720, Schedule N. | 15 | X |
| 16 Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O. | 16 | X |
| 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? If "Yes," complete Form 6069. | 17 | |

Form 990 (2023)

SHELTER FOR LIFE INTERNATIONAL, INC.

39-1657081

Page 6

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

☒**Section A. Governing Body and Management**

| | 1a | 1b | Yes | No |
|---|----|----|-----|----|
| 1a Enter the number of voting members of the governing body at the end of the tax year | 5 | | | |
| If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O. | | | | |
| b Enter the number of voting members included on line 1a, above, who are independent | | 5 | | |
| 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee? | | | 2 | 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? | | | 3 | X |
| 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? | | | 4 | X |
| 5 Did the organization become aware during the year of a significant diversion of the organization's assets? | | | 5 | X |
| 6 Did the organization have members or stockholders? | | | 6 | X |
| 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? | | | 7a | X |
| b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? | | | 7b | X |
| 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: | | | | |
| a The governing body? | | | 8a | X |
| b Each committee with authority to act on behalf of the governing body? | | | 8b | X |
| 9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O | | | 9 | X |

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

| | Yes | No |
|--|-----|----|
| 10a Did the organization have local chapters, branches, or affiliates? | 10a | X |
| b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? | 10b | |
| 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? | 11a | X |
| b Describe on Schedule O the process, if any, used by the organization to review this Form 990. | | |
| 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 | 12a | X |
| b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? | 12b | X |
| c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done | 12c | X |
| 13 Did the organization have a written whistleblower policy? | 13 | X |
| 14 Did the organization have a written document retention and destruction policy? | 14 | X |
| 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? | | |
| a The organization's CEO, Executive Director, or top management official | 15a | X |
| b Other officers or key employees of the organization | 15b | X |
| 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? | 16a | X |
| b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? | 16b | |

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed MN, WI, KY, CO, MA, NC, PA, SC, VA, MS, MD, NH

18 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
☒ Own website ☐ Another's website ☒ Upon request ☐ Other (explain on Schedule O)

19 Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.

20 State the name, address, and telephone number of the person who possesses the organization's books and records
BERHANU SHASHEGO - (612) 298-7616
10201 WAYZATA BLVD 110, MINNETONKA, MN 55305

Form 990 (2023)

SHELTER FOR LIFE INTERNATIONAL, INC.

39-1657081

Page 9

Part VIII Statement of RevenueCheck if Schedule O contains a response or note to any line in this Part VIII ☐

| | | | | (A) Total revenue | (B) Related or exempt function revenue | (C) Unrelated business revenue | (D) Revenue excluded from tax under sections 512 - 514 |
|---|--|---|---------------------------|----------------------|--|--------------------------------------|---|
| Contributions, Gifts, Grants and Other Similar Amounts | 1 a | Federated campaigns | 1a | | | | |
| | b | Membership dues | 1b | | | | |
| | c | Fundraising events | 1c | | | | |
| | d | Related organizations | 1d | | | | |
| | e | Government grants (contributions) | 1e | 4,081,588. | | | |
| | f | All other contributions, gifts, grants, and similar amounts not included above | 1f | 149,303. | | | |
| | g | Noncash contributions included in lines 1a-1f | 1g | \$ | | | |
| | h | Total. Add lines 1a-1f | | 4,230,891. | | | |
| Program Service Revenue | 2 a | WORLD FOOD PROGRAM | Business Code 624200 | 2,642,723. | 2,642,723. | | |
| | b | VEHICLE RENTAL INCOME | 624200 | 154,287. | 154,287. | | |
| | c | | | | | | |
| | d | | | | | | |
| | e | | | | | | |
| | f | All other program service revenue | | | | | |
| | g | Total. Add lines 2a-2f | | 2,797,010. | | | |
| Other Revenue | 3 | Investment income (including dividends, interest, and other similar amounts) | | 51,563. | | | 51,563. |
| | 4 | Income from investment of tax-exempt bond proceeds | | | | | |
| | 5 | Royalties | | | | | |
| | 6 a | Gross rents | (i) Real (ii) Personal | | | | |
| | b | Less: rental expenses | | | | | |
| | c | Rental income or (loss) | | | | | |
| | d | Net rental income or (loss) | | | | | |
| | 7 a | Gross amount from sales of assets other than inventory | (i) Securities (ii) Other | | | | |
| | b | Less: cost or other basis and sales expenses | | | | | |
| | c | Gain or (loss) | | | | | |
| | d | Net gain or (loss) | | | | | |
| | 8 a | Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18 | | | | | |
| | b | Less: direct expenses | | | | | |
| | c | Net income or (loss) from fundraising events | | | | | |
| | 9 a | Gross income from gaming activities. See Part IV, line 19 | | | | | |
| b | Less: direct expenses | | | | | | |
| c | Net income or (loss) from gaming activities | | | | | | |
| 10 a | Gross sales of inventory, less returns and allowances | | | | | | |
| b | Less: cost of goods sold | | | | | | |
| c | Net income or (loss) from sales of inventory | | | | | | |
| Miscellaneous Revenue | 11 a | MANAGEMENT FEES | Business Code 900099 | 7,557. | | | 7,557. |
| | b | | | | | | |
| | c | | | | | | |
| | d | All other revenue | | | | | |
| | e | Total. Add lines 11a-11d | | 7,557. | | | |
| 12 | Total revenue. See instructions | | 7,087,021. | 2,797,010. | 0. | 59,120. | |

Form 990 (2023)

SHELTER FOR LIFE INTERNATIONAL, INC.

39-1657081 Page 10

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 ☐

| Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII. | (A) Total expenses | (B) Program service expenses | (C) Management and general expenses | (D) Fundraising expenses |
|--|-----------------------|---------------------------------|--|-----------------------------|
| 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 | | | | |
| 4 Benefits paid to or for members | | | | |
| 5 Compensation of current officers, directors, trustees, and key employees | 396,130. | 198,065. | 198,065. | |
| 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 | 2,744,760. | 2,655,591. | 89,169. | |
| 8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) | | | | |
| 9 Other employee benefits | 177,458. | 161,958. | 15,500. | |
| 10 Payroll taxes | 32,930. | 28,023. | 4,907. | |
| 11 Fees for services (nonemployees): | | | | |
| a Management | | | | |
| b Legal | 11,274. | 6,367. | 4,907. | |
| c Accounting | 55,094. | 9,928. | 45,166. | |
| d Lobbying | | | | |
| e 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 O.) | 489,111. | 457,958. | 153. | 31,000. |
| 12 Advertising and promotion | | | | |
| 13 Office expenses | 263,983. | | 259,413. | 4,570. |
| 14 Information technology | 13,678. | | 13,678. | |
| 15 Royalties | | | | |
| 16 Occupancy | 108,010. | 86,163. | 21,847. | |
| 17 Travel | 175,192. | 175,192. | | |
| 18 Payments of travel or entertainment expenses for any federal, state, or local public officials | | | | |
| 19 Conferences, conventions, and meetings | | | | |
| 20 Interest | | | | |
| 21 Payments to affiliates | | | | |
| 22 Depreciation, depletion, and amortization | 35,524. | | 35,524. | |
| 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 O.) | | | | |
| a OTHER DIRECT PROGRAM CO | 1,749,859. | 1,749,859. | | |
| b FIELD SUPPLIES AND CONS | 587,367. | 587,367. | | |
| c BAD DEBT EXPENSE | 168,000. | 168,000. | | |
| d EQUIPMENT | 93,116. | 93,116. | | |
| e All other expenses | | | | |
| 25 Total functional expenses. Add lines 1 through 24e | 7,101,486. | 6,377,587. | 688,329. | 35,570. |
| 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 <input type="checkbox"/> if following SOP 98-2 (ASC 958-720) | | | | |

Form 990 (2023)

SHELTER FOR LIFE INTERNATIONAL, INC.

39-1657081

Page 11

Part X Balance SheetCheck if Schedule O contains a response or note to any line in this Part X ☐

| | | (A) Beginning of year | | (B) End of year |
|---|---|--------------------------|-------------|--------------------|
| Assets | 1 Cash - non-interest-bearing | 755,941. | 1 | 524,480. |
| | 2 Savings and temporary cash investments | 9,218,488. | 2 | 17,206,554. |
| | 3 Pledges and grants receivable, net | 1,996,102. | 3 | 1,559,368. |
| | 4 Accounts receivable, net | 11,386. | 4 | 66,435. |
| | 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 | |
| | 7 Notes and loans receivable, net | 8,075. | 7 | 0. |
| | 8 Inventories for sale or use | | 8 | |
| | 9 Prepaid expenses and deferred charges | 31,676. | 9 | 32,094. |
| | 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D | 10a 250,795. | | |
| | b Less: accumulated depreciation | 10b 190,954. | 10c | 59,841. |
| | 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 | 34,724. | 15 | 24,729. |
| 16 Total assets. Add lines 1 through 15 (must equal line 33) | 12,079,004. | 16 | 19,473,501. | |
| Liabilities | 17 Accounts payable and accrued expenses | 493,968. | 17 | 499,833. |
| | 18 Grants payable | | 18 | |
| | 19 Deferred revenue | 9,327,514. | 19 | 16,740,517. |
| | 20 Tax-exempt bond liabilities | | 20 | |
| | 21 Escrow or custodial account liability. Complete Part IV of Schedule D | | 21 | |
| | 22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons | | 22 | |
| | 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 of Schedule D | 35,017. | 25 | 25,111. |
| | 26 Total liabilities. Add lines 17 through 25 | 9,856,499. | 26 | 17,265,461. |
| Net Assets or Fund Balances | Organizations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 27, 28, 32, and 33. | | | |
| | 27 Net assets without donor restrictions | 2,222,505. | 27 | 2,208,040. |
| | 28 Net assets with donor restrictions | 0. | 28 | 0. |
| | Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 29 through 33. | | | |
| | 29 Capital stock or trust principal, or current funds | | 29 | |
| | 30 Paid-in or capital surplus, or land, building, or equipment fund | | 30 | |
| | 31 Retained earnings, endowment, accumulated income, or other funds | | 31 | |
| | 32 Total net assets or fund balances | 2,222,505. | 32 | 2,208,040. |
| 33 Total liabilities and net assets/fund balances | 12,079,004. | 33 | 19,473,501. | |

Form 990 (2023)

Form 990 (2023)

SHELTER FOR LIFE INTERNATIONAL, INC.

39-1657081 Page 12

Part XI Reconciliation of Net AssetsCheck 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 | 7,087,021. |
| 2 | Total expenses (must equal Part IX, column (A), line 25) | 2 | 7,101,486. |
| 3 | Revenue less expenses. Subtract line 2 from line 1 | 3 | -14,465. |
| 4 | Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A)) | 4 | 2,222,505. |
| 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 | 2,208,040. |

Part XII Financial Statements and ReportingCheck 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: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O. | | |
| 2a Were the organization's financial statements compiled or reviewed by an independent accountant? _____ 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: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis | X | |
| b Were the organization's financial statements audited by an independent accountant? _____ 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: <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis | X | |
| c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? _____ If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O. | X | |
| 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? _____ | X | |
| b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits _____ | X | |

Form 990 (2023)

Schedule A (Form 990) 2023

SHELTER FOR LIFE INTERNATIONAL, INC.

39-1657081 Page 2

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

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

Section A. Public Support

| Calendar year (or fiscal year beginning in) | (a) 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.") | 3405845. | 4906150. | 6827797. | 3343720. | 4230891. | 22714403. |
| 2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf | | | | | | |
| 3 The value of services or facilities furnished by a governmental unit to the organization without charge | | | | | | |
| 4 Total. Add lines 1 through 3 | 3405845. | 4906150. | 6827797. | 3343720. | 4230891. | 22714403. |
| 5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) | | | | | | |
| 6 Public support. Subtract line 5 from line 4. | | | | | | 22714403. |

Section B. Total Support

| Calendar year (or fiscal year beginning in) | (a) 2019 | (b) 2020 | (c) 2021 | (d) 2022 | (e) 2023 | (f) Total |
|---|----------|----------|----------|----------|----------|--------------------------|
| 7 Amounts from line 4 | 3405845. | 4906150. | 6827797. | 3343720. | 4230891. | 22714403. |
| 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources | 725. | 116. | 169. | 8,757. | 51,563. | 61,330. |
| 9 Net income from unrelated business activities, whether or not the business is regularly carried on | | | | | | |
| 10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) | | 3,250. | 3,600. | 76,318. | 7,557. | 90,725. |
| 11 Total support. Add lines 7 through 10 | | | | | | 22866458. |
| 12 Gross receipts from related activities, etc. (see instructions) | | | | | 12 | 11,899,042. |
| 13 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here | | | | | | <input type="checkbox"/> |

Section C. Computation of Public Support Percentage

| | | | |
|---|-------------------------------------|-------|---|
| 14 Public support percentage for 2023 (line 6, column (f), divided by line 11, column (f)) | 14 | 99.34 | % |
| 15 Public support percentage from 2022 Schedule A, Part II, line 14 | 15 | 99.57 | % |
| 16a 33 1/3% support test - 2023. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization | <input checked="" type="checkbox"/> | | |
| b 33 1/3% support test - 2022. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization | <input type="checkbox"/> | | |
| 17a 10% -facts-and-circumstances test - 2023. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization | <input type="checkbox"/> | | |
| b 10% -facts-and-circumstances test - 2022. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization | <input type="checkbox"/> | | |
| 18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions | <input type="checkbox"/> | | |

Schedule A (Form 990) 2023

Schedule A (Form 990) 2023

SHELTER FOR LIFE INTERNATIONAL, INC.

39-1657081 Page 3

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 performed, 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 business under section 513 | | | | | | |
| 4 Tax revenues levied for the organization'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

| 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.) | | | | | | |
| 14 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here | | | | | | <input type="checkbox"/> |

Section C. Computation of Public Support Percentage

| | | |
|--|----|---|
| 15 Public support percentage for 2023 (line 8, column (f), divided by line 13, column (f)) | 15 | % |
| 16 Public support percentage from 2022 Schedule A, Part III, line 15 | 16 | % |

Section D. Computation of Investment Income Percentage

| | | |
|---|----|---|
| 17 Investment income percentage for 2023 (line 10c, column (f), divided by line 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 not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization ☐

b 33 1/3% support tests - 2022. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization ☐

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ☐

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

| | Yes | No |
|---|-----|----|
| 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.) | | |

Schedule A (Form 990) 2023

SHELTER FOR LIFE INTERNATIONAL, INC.

39-1657081 Page 5

Part IV Supporting Organizations (continued)

| | Yes | No |
|--|-----|----|
| 11 Has the organization accepted a gift or contribution from any of the following persons? | | |
| a 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? | | |
| b A family member of a person described on line 11a above? | | |
| c 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. | | |

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. | | |
| 2 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization. | | |

Section C. Type II Supporting Organizations

| | Yes | No |
|---|-----|----|
| 1 Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s). | | |

Section D. All Type III Supporting Organizations

| | Yes | No |
|---|-----|----|
| 1 Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided? | | |
| 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). | | |
| 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 played in this regard. | | |

Section E. Type III Functionally Integrated Supporting Organizations

| | | |
|--|-----|----|
| 1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions). | | |
| a <input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below. | | |
| b <input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below. | | |
| c <input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see instructions). | | |
| 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. | Yes | No |
| 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. | | |

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

- 1 ☐ Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (*explain in Part VI*). See instructions.
All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

| Section A - Adjusted Net Income | | (A) Prior Year | (B) Current Year (optional) |
|---------------------------------|--|----------------|-----------------------------|
| 1 | Net short-term capital gain | 1 | |
| 2 | Recoveries of prior-year distributions | 2 | |
| 3 | Other gross income (see instructions) | 3 | |
| 4 | Add lines 1 through 3. | 4 | |
| 5 | Depreciation and depletion | 5 | |
| 6 | Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions) | 6 | |
| 7 | Other expenses (see instructions) | 7 | |
| 8 | Adjusted Net Income (subtract lines 5, 6, and 7 from line 4) | 8 | |

| Section B - Minimum Asset Amount | | (A) Prior Year | (B) Current Year (optional) |
|----------------------------------|---|----------------|-----------------------------|
| 1 | Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year): | | |
| a | Average monthly value of securities | 1a | |
| b | Average monthly cash balances | 1b | |
| c | Fair market value of other non-exempt-use assets | 1c | |
| d | Total (add lines 1a, 1b, and 1c) | 1d | |
| e | Discount claimed for blockage or other factors (<i>explain in detail in Part VI</i>): | | |
| 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 | Net value of non-exempt-use assets (subtract line 4 from line 3) | 5 | |
| 6 | Multiply line 5 by 0.035. | 6 | |
| 7 | Recoveries of prior-year distributions | 7 | |
| 8 | Minimum Asset Amount (add line 7 to line 6) | 8 | |

| Section C - Distributable Amount | | | Current Year |
|----------------------------------|---|---|--------------|
| 1 | Adjusted net income for prior year (from Section A, line 8, column A) | 1 | |
| 2 | Enter 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-functionally integrated Type III supporting organization (see instructions).

Schedule A (Form 990) 2023

Schedule A (Form 990) 2023

SHELTER FOR LIFE INTERNATIONAL, INC.

39-1657081 Page 7

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

| Section D - Distributions | | Current Year |
|---------------------------|---|--------------|
| 1 | Amounts paid to supported organizations to accomplish exempt purposes | 1 |
| 2 | Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity | 2 |
| 3 | Administrative expenses paid to accomplish exempt purposes of supported organizations | 3 |
| 4 | Amounts paid to acquire exempt-use assets | 4 |
| 5 | Qualified set-aside amounts (prior IRS approval required - <i>provide details in Part VI</i>) | 5 |
| 6 | Other distributions (<i>describe in Part VI</i>). See instructions. | 6 |
| 7 | Total annual distributions. Add lines 1 through 6. | 7 |
| 8 | Distributions to attentive supported organizations to which the organization is responsive (<i>provide details in Part VI</i>). See instructions. | 8 |
| 9 | Distributable amount for 2023 from Section C, line 6 | 9 |
| 10 | Line 8 amount divided by line 9 amount | 10 |

| Section E - Distribution Allocations (see instructions) | (i) Excess Distributions | (ii) Underdistributions Pre-2023 | (iii) Distributable Amount for 2023 |
|---|---|--|---|
| 1 | Distributable amount for 2023 from Section C, line 6 | | |
| 2 | Underdistributions, if any, for years prior to 2023 (reasonable cause required - <i>explain in Part VI</i>). 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: \$ | | |
| a | 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, <i>explain in Part VI</i> . See instructions. | | |
| 6 | Remaining underdistributions for 2023. Subtract lines 3h and 4b from line 1. For result greater than zero, <i>explain in Part VI</i> . See instructions. | | |
| 7 | Excess distributions carryover to 2024. Add lines 3j 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

Part VI

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

SCHEDULE A, PART II, LINE 10, EXPLANATION FOR OTHER INCOME:

GAIN ON FOREIGN CURRENCY TRANSLATION

2022 AMOUNT: \$ 73,157.

2023 AMOUNT: \$ 7,557.

MISCELLANEOUS REVENUE

2020 AMOUNT: \$ 3,250.

2021 AMOUNT: \$ 3,600.

2022 AMOUNT: \$ 3,161.

Schedule B

(Form 990)

Department of the Treasury
Internal Revenue Service

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

Name of the organization

Employer identification number

SHELTER FOR LIFE INTERNATIONAL, INC.

39-1657081

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

☒ 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

☒ 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 \$

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 (Form 990) (2023)

Schedule B (Form 990) (2023)

Page 2

Name of organization

Employer identification number

SHELTER FOR LIFE INTERNATIONAL, INC.

39-1657081

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 |
|------------|-----------------------------------|----------------------------|---|
| 1 | | \$ 110,000. | Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.) |
| 2 | | \$ 3,357,151. | Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.) |
| 3 | | \$ 724,437. | Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.) |
| | | \$ | Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.) |
| | | \$ | Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.) |
| | | \$ | Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.) |

Name of organization

Employer identification number

SHELTER FOR LIFE INTERNATIONAL, INC.

39-1657081

Part II

Noncash Property

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

| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (See instructions.) | (d) Date received |
|------------------------------|--|---|----------------------|
| | | \$ _____ | _____ |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (See instructions.) | (d) Date received |
| | | \$ _____ | _____ |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (See instructions.) | (d) Date received |
| | | \$ _____ | _____ |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (See instructions.) | (d) Date received |
| | | \$ _____ | _____ |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (See instructions.) | (d) Date received |
| | | \$ _____ | _____ |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (See instructions.) | (d) Date received |
| | | \$ _____ | _____ |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (See instructions.) | (d) Date received |
| | | \$ _____ | _____ |

Schedule B (Form 990) (2023)

Page 4

Name of organization

Employer identification number

SHELTER FOR LIFE INTERNATIONAL, INC.**39-1657081**

Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info. once.) \$ _____

Use duplicate copies of Part III if additional space is needed.

| (a) No. from Part I | (b) Purpose of gift | (c) Use of gift | (d) Description of how gift is held |
|---------------------------|---|-----------------|--|
| | | | |
| | | | |
| | | | |
| | (e) Transfer of gift | | |
| | Transferee's name, address, and ZIP + 4 | | Relationship of transferor to transferee |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | (e) Transfer of gift | | |
| | Transferee's name, address, and ZIP + 4 | | Relationship of transferor to transferee |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | (e) Transfer of gift | | |
| | Transferee's name, address, and ZIP + 4 | | Relationship of transferor to transferee |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | (e) Transfer of gift | | |
| | Transferee's name, address, and ZIP + 4 | | Relationship of transferor to transferee |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |

SCHEDULE D
(Form 990)Department of the Treasury
Internal Revenue Service**Supplemental Financial Statements**Complete if the organization answered "Yes" on Form 990,
Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.
Attach to Form 990.Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2023Open to Public
Inspection

Name of the organization

SHELTER FOR LIFE INTERNATIONAL, INC.

Employer identification number

39-1657081

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

| | (a) Donor advised funds | (b) Funds and other accounts |
|---|-------------------------|------------------------------|
| 1 Total number at end of year | | |
| 2 Aggregate value of contributions to (during year) | | |
| 3 Aggregate value of grants from (during year) | | |
| 4 Aggregate value at end of year | | |

5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No

6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? ☐ Yes ☐ No

Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply).

☐ Preservation of land for public use (for example, recreation or education) ☐ Preservation of a historically important land area

☐ Protection of natural habitat ☐ Preservation of a certified historic structure

☐ Preservation of open space

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

| | Held at the End of the Tax Year |
|--|---------------------------------|
| a Total number of conservation easements | 2a |
| b Total acreage restricted by conservation easements | 2b |
| c Number of conservation easements on a certified historic structure included on line 2a | 2c |
| d Number of conservation easements included on line 2c acquired after July 25, 2006, and not on a historic structure listed in the National Register | 2d |

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year

4 Number of states where property subject to conservation easement is located

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? ☐ Yes ☐ No

6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year

8 Does each conservation easement reported on line 2d above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? ☐ Yes ☐ No

9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

1a If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items.

b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items.

(i) Revenue included on Form 990, Part VIII, line 1 \$

(ii) Assets included in Form 990, Part X \$

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items:

a Revenue included on Form 990, Part VIII, line 1 \$

b Assets included in Form 990, Part X \$

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

Schedule D (Form 990) 2023

332051 09-28-23

Schedule D (Form 990) 2023

SHELTER FOR LIFE INTERNATIONAL, INC.

39-1657081 Page 2

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

3 Using the organization's acquisition, accession, and other records, check any of the following that make significant use of its collection items (check all that apply).

- a ☐ Public exhibition
 b ☐ Scholarly research
 c ☐ Preservation for future generations
 d ☐ Loan or exchange program
 e ☐ Other _____

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? ☐ Yes ☐ No

Part IV Escrow and Custodial Arrangements Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a Is the organization an agent, trustee, custodian, or other intermediary for contributions or other assets not included on Form 990, Part X? ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIII and complete the following table:

| | Amount |
|---------------------------------|--------|
| c Beginning balance | 1c |
| d Additions during the year | 1d |
| e Distributions during the year | 1e |
| f Ending balance | 1f |

2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII ☐

Part V Endowment Funds Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

| | (a) Current year | (b) Prior year | (c) Two years back | (d) Three years back | (e) Four years back |
|--|------------------|----------------|--------------------|----------------------|---------------------|
| 1a Beginning of year balance | | | | | |
| b Contributions | | | | | |
| c Net investment earnings, gains, and losses | | | | | |
| d Grants or scholarships | | | | | |
| e Other expenditures for facilities and programs | | | | | |
| f Administrative expenses | | | | | |
| g End of year balance | | | | | |

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

- a Board designated or quasi-endowment _____ %
 b Permanent endowment _____ %
 c Term endowment _____ %

The percentages on lines 2a, 2b, and 2c should equal 100%.

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

- (i) Unrelated organizations? _____
 (ii) Related organizations? _____

| | Yes | No |
|--------|-----|----|
| 3a(i) | | |
| 3a(ii) | | |
| 3b | | |

b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? _____

4 Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

| Description of property | (a) Cost or other basis (investment) | (b) Cost or other basis (other) | (c) Accumulated depreciation | (d) Book value |
|--|--------------------------------------|---------------------------------|------------------------------|----------------|
| 1a Land | | | | |
| b Buildings | | | | |
| c Leasehold improvements | | | | |
| d Equipment | | 250,795. | 190,954. | 59,841. |
| e Other | | | | |
| Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, line 10c, column (B)) | | | | 59,841. |

Schedule D (Form 990) 2023

Schedule D (Form 990) 2023

SHELTER FOR LIFE INTERNATIONAL, INC.

39-1657081 Page 3

Part VII Investments - Other Securities

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

| (a) Description of security or category (including name of security) | (b) Book value | (c) Method of valuation: Cost or end-of-year market value |
|---|----------------|---|
| (1) Financial derivatives | | |
| (2) Closely held equity interests | | |
| (3) Other | | |
| (A) | | |
| (B) | | |
| (C) | | |
| (D) | | |
| (E) | | |
| (F) | | |
| (G) | | |
| (H) | | |
| Total. (Col. (b) must equal Form 990, Part X, line 12, col. (B)) | | |

Part VIII Investments - Program Related.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

| (a) Description of investment | (b) Book value | (c) Method of valuation: Cost or end-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 11d. See Form 990, Part X, line 15.

| (a) Description | (b) Book value |
|---|----------------|
| (1) | |
| (2) | |
| (3) | |
| (4) | |
| (5) | |
| (6) | |
| (7) | |
| (8) | |
| (9) | |
| Total. (Column (b) must equal Form 990, Part X, line 15, col. (B)) | |

Part X Other Liabilities

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

| 1. (a) Description of liability | (b) Book value |
|---|----------------|
| (1) Federal income taxes | |
| (2) LEASE LIABILITY | 25,111. |
| (3) | |
| (4) | |
| (5) | |
| (6) | |
| (7) | |
| (8) | |
| (9) | |
| Total. (Column (b) must equal Form 990, Part X, line 25, col. (B)) | 25,111. |

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII ☒

Schedule D (Form 990) 2023

Schedule D (Form 990) 2023

SHELTER FOR LIFE INTERNATIONAL, INC.

39-1657081 Page 4

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

| | | | |
|---|---|----|------------|
| 1 | Total revenue, gains, and other support per audited financial statements | 1 | 7,087,021. |
| 2 | Amounts included on line 1 but not on Form 990, Part VIII, line 12: | | |
| a | Net unrealized gains (losses) on investments | 2a | |
| b | Donated services and use of facilities | 2b | |
| c | Recoveries of prior year grants | 2c | |
| d | Other (Describe in Part XIII.) | 2d | |
| e | Add lines 2a through 2d | 2e | 0. |
| 3 | Subtract line 2e from line 1 | 3 | 7,087,021. |
| 4 | Amounts included on Form 990, Part VIII, line 12, but not on line 1: | | |
| a | 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 | 0. |
| 5 | Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) | 5 | 7,087,021. |

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

| | | | |
|---|--|----|------------|
| 1 | Total expenses and losses per audited financial statements | 1 | 7,101,486. |
| 2 | Amounts included on line 1 but not on Form 990, Part IX, line 25: | | |
| a | Donated services and use of facilities | 2a | |
| b | Prior year adjustments | 2b | |
| c | Other losses | 2c | |
| d | Other (Describe in Part XIII.) | 2d | |
| e | Add lines 2a through 2d | 2e | 0. |
| 3 | Subtract line 2e from line 1 | 3 | 7,101,486. |
| 4 | Amounts included on Form 990, Part IX, line 25, but not on line 1: | | |
| a | 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 | 0. |
| 5 | Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) | 5 | 7,101,486. |

Part XIII Supplemental Information

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

PART X, LINE 2:

THE ORGANIZATION IS QUALIFIED AS A TAX-EXEMPT ORGANIZATION UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE AND APPLICABLE STATE STATUTES AND GENERALLY IS NOT SUBJECT TO INCOME TAXES.

THE ORGANIZATION FOLLOWS GUIDANCE IN THE INCOME TAX STANDARD REGARDING THE RECOGNITION AND MEASUREMENT OF UNCERTAIN TAX POSITIONS. THE ORGANIZATION'S TAX RETURNS ARE SUBJECT TO REVIEW BY FEDERAL AND STATE AUTHORITIES. THE ORGANIZATION IS NOT AWARE OF ANY ACTIVITIES THAT WOULD JEOPARDIZE ITS TAX-EXEMPT STATUS.

Part XIII Supplemental Information (continued)

This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

**SCHEDULE F
(Form 990)**Department of the Treasury
Internal Revenue Service**Statement of Activities Outside the United States**

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

Attach to Form 990.

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

OMB No. 1545-0047

2023Open to Public
Inspection

Name of the organization

Employer identification number

SHELTER FOR LIFE INTERNATIONAL, INC.

39-1657081

Part I General Information on Activities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 14b.

1 For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ☐ Yes ☐ No

2 For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States.

3 Activities per Region. (The following Part I, line 3 table can be duplicated if additional space is 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, program services, investments, grants to recipients located in the region) | (e) If activity listed in (d) is a program service, describe specific type of service(s) in the region | (f) Total expenditures for and investments in the region |
|---|-------------------------------------|--|--|--|--|
| SUB-SAHARAN AFRICA | 3 | 61 | PROGRAM SERVICES | VARIOUS PROGRAMS WERE CONDUCTED IN 2023 IN SENEGAL AND GAMBIA. SEE PART III FOR DETAILS. | 3,573,012. |
| CENTRAL ASIA | 9 | 366 | PROGRAM SERVICES | VARIOUS PROGRAMS WERE CONDUCTED IN 2023 IN AFGANISTAN. SEE PART III FOR DETAILS. | 2,804,575. |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| 3 a Subtotal | 12 | 427 | | | 6,377,587. |
| b Total from continuation sheets to Part I | 0 | 0 | | | 0. |
| c Totals (add lines 3a and 3b) | 12 | 427 | | | 6,377,587. |

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

Schedule F (Form 990) 2023

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.

| 1 (a) Name of organization | (b) IRS code section and EIN (if applicable) | (c) Region | (d) Purpose of grant | (e) Amount of cash grant | (f) Manner of cash disbursement | (g) Amount of noncash assistance | (h) Description of noncash assistance | (i) Method of valuation (book, FMV, appraisal, other) |
|-------------------------------|--|------------|----------------------|--------------------------|---------------------------------|----------------------------------|---------------------------------------|---|
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |

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

3 Enter total number of other organizations or entities

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.

Part III can be duplicated if additional space is needed.

[illegible]

Part IV Foreign Forms

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

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 HAS INTERNAL CONTROL PROCEDURES: TO APPROVE GRANT
EXPENDITURES, TO REVIEW GRANT EXPENDITURES MADE, AND TO EVALUATE PROJECT
PROGRESS AND WORK COMPLETED, ACCORDING TO THE GRANT BUDGET AND COMPLIANCE
REQUIREMENTS.

PART I, LINE 3:

ACCRUAL

**SCHEDULE J
(Form 990)**Department of the Treasury
Internal Revenue Service**Compensation Information**

For certain Officers, Directors, Trustees, Key Employees, and Highest
Compensated Employees
Complete if the organization answered "Yes" on Form 990, Part IV, line 23.
Attach to Form 990.
Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2023Open to Public
Inspection

Name of the organization

SHELTER FOR LIFE INTERNATIONAL, INC.

Employer identification number

39-1657081

Part I Questions Regarding Compensation

1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.

- | | |
|--|--|
| <input type="checkbox"/> First-class or charter travel | <input type="checkbox"/> Housing allowance or residence for personal use |
| <input type="checkbox"/> Travel for companions | <input type="checkbox"/> Payments for business use of personal residence |
| <input type="checkbox"/> Tax indemnification and gross-up payments | <input type="checkbox"/> Health or social club dues or initiation fees |
| <input type="checkbox"/> Discretionary spending account | <input type="checkbox"/> Personal services (such as maid, chauffeur, chef) |

b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain

2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?

3 Indicate which, if any, of the following the organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.

- | | |
|--|---|
| <input checked="" type="checkbox"/> Compensation committee | <input type="checkbox"/> Written employment contract |
| <input type="checkbox"/> Independent compensation consultant | <input checked="" type="checkbox"/> Compensation survey or study |
| <input type="checkbox"/> Form 990 of other organizations | <input checked="" type="checkbox"/> Approval by the board or compensation committee |

4 During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:

a Receive a severance payment or change-of-control payment?

b Participate in or receive payment from a supplemental nonqualified retirement plan?

c Participate in or receive payment from an equity-based compensation arrangement?

If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.

Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.

5 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:

a The organization?

b Any related organization?

If "Yes" on line 5a or 5b, describe in Part III.

6 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:

a The organization?

b Any related organization?

If "Yes" on line 6a or 6b, describe in Part III.

7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III

8 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III

9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

Yes No

1b

2

4a

4b

4c

5a

5b

6a

6b

7

8

9

X

X

X

X

X

X

X

X

X

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

Schedule J (Form 990) 2023

| | |
|----------------|---|
| Part II | Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed. |
|----------------|---|

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that aren't listed on Form 990, Part VII.

Note: The sum of columns (B)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

[illegible]

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

[illegible]

SCHEDULE O
(Form 990)Department of the Treasury
Internal Revenue Service**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.

OMB No. 1545-0047

2023Open to Public
Inspection

Name of the organization

SHELTER FOR LIFE INTERNATIONAL, INC.

Employer identification number

39-1657081

FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS:

THE LIFFT CASHEW PROJECT IN SENEGAL, DURING THE FY'24, THE MARKET ACCESS COMPONENT (C3:A5), THE TOTAL TARGET OF TWENTY-FOUR (24) COOPERATIVES HAS BEEN REACHED AT 100% OF THE LOP SINCE FISCAL 2023. THE CMA TEAM CONTINUED PROVIDING COOPERATIVES WITH TECHNICAL ASSISTANCE AND CAPACITY BUILDING, INCLUDING KNOWLEDGE OF IMPROVED FARM MANAGEMENT PRACTICES (FFPR-STD-03), LEADERSHIP CAPACITIES, AND ORGANIZATIONAL DYNAMICS. FOR IMPROVED OPERATIONAL CAPACITY OF COOPERATIVES, TWO COMPUTERS AND AN INTERNET CONNECTION KIT COMPOSED OF A LIVE BOX MODEM AND ROUTER WERE PROVIDED TO TWO COOPERATIVES. OTHER GRANT PROJECTS FOR TRICYCLES, MOTORCYCLES, OFFICE FURNITURE, AND SHELLING MACHINES HAVE BEEN DRAWN UP. THEY ARE BEING VALIDATED BY THE PROJECT FOR COOPERATIVES AND COOPERATIVE FEDERATIONS TO IMPROVE THEIR COMMERCIAL ACTIVITIES IN THE CASHEW NUT TRADE AND BOOST MEMBERS' INCOMES. THE TEAM CONTINUED ENCOURAGING NEW MEMBERS TO JOIN THE COOPERATIVES, WITH GOOD RESULTS DURING THE REPORTING PERIOD: 1,203 NEW MEMBERS REGISTERED IN SENEGAL. ADDITIONALLY, SFL ALSO FACILITATED THE SIGNING OF 34 SALES CONTRACTS WITH TRADERS/EXPORTERS AND THE 8 COOPERATIVES IN SENEGAL. THE CONTRACTS COVER 20,564 MT OF RCN FOR AN ESTIMATED VALUE OF USD 19,490,000. IN ADDITION TO PROMOTE COLLECTIVE SALES, SFL ISSUE A GRANT OF USD 5,000 TO EACH COOPERATIVE. THE COOPERATIVES HAVE RETURNED WITH SUCESS THE AMOUNTS RECEIVED.

TO ENSURE GOOD PRODUCTION AND NUT QUALITY, 4,834 PRODUCERS WERE TRAINED IN GOOD AGRICULTURAL PRACTICES, AND THE NEW TECHNIQUES APPLIED WERE MAINLY RELATED TO THE PRUNNING, THINNING, INTERCROPPING, AND

ESTABLISHMENT OF NEW PLANTATIONS. OVERALL, 36,800 SEEDLINGS AND 27 TONS

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

Schedule O (Form 990) 2023

LHA 332211 11-14-23

Schedule O (Form 990) 2023

Page 2

| | |
|--------------------------------------|--------------------------------|
| Name of the organization | Employer identification number |
| SHELTER FOR LIFE INTERNATIONAL, INC. | 39-1657081 |

OF ORGANIC FERTILIZER WERE DISTRIBUTED TO PRODUCERS, AN APPLIED OVER 368 HA. A TOTAL OF 3,364 PRODUCERS APPLIED GAPS OVER 7,300 HA. TO PROMOTE GROUP SALES AT THE COOPERATIVES LEVEL, 2 WAREHOUSES WITH A CAPACITY OF 1,377 CUBIC METERS WAS REHABILITATED (AN 100% INCREASE), AND 3 WAREHOUSES WITH A CAPACITY OF 2,320 CUBIC METERS WAS BUILT (A 56% INCREASE) IN THE LOP TARGET. 513 SFL SUPPORTED FARMER-PRODUCERS WHO ARE PARTNERING WITH SCPL PROCESSORS HAVE BEEN CERTIFIED ON ORGANIC CASHEW PRODUCTION.

DURING THE PERIOD, 496 INDIVIDUALS BENEFITED FROM FINANCIAL SERVICES, OFTEN AS DIRECT OR INDIRECT BENEFICIARIES OF GRANTS MADE TO COOPERATIVES OR AS INDIRECT BENEFICIARIES OF FUNDS GRANTED TO PROCESSORS. THESE FUNDS FACILITATED THE COLLECTION OF 20,564 TONS OF CASHEW AND FOSTERED PARTNERSHIPS BETWEEN BENEFICIARY PROCESSORS AND COOPERATIVES. CONSULTATIVE MEETINGS WERE HELD TO DISCUSS PROPOSED INCENTIVES FOR THE CASHEW VALUE CHAIN IN SENEGAL. THESE MEASURES AIM TO BOOST CASHEW PRODUCTION, COMPETITIVENESS, AND VALUE CHAIN DEVELOPMENT IN THE COUNTRY. SFL CASHEW FUND PROVIDED ASSISTANCE TO 3 PROCESSORS DURING THE CASHEW SEASON WITH OPERATIONAL CAPITAL TO ENABLE THEM FOR PURCHASE AND PROCESS OF CASHEW PRODUCTS. IN ADDITION TO THAT, WITH THE INVOLVEMENT OF LICENSED CONSULTANTS, SFL PROVIDED SUPPORT TO 3 CASHEW PROCESSORS COMPANIES TO OBTAIN HACCP CERTIFICATIONS. SFL, THROUGH ITS LIFFT CASHEW PROJECT TEAM, CONTINUES TO ASSIST PROCESSORS AND PRODUCERS IN SENEGAL, THE GAMBIA AND GUINEA-BISSAU WITH ORGANIC CERTIFICATION AUDITS, PROMOTING SUSTAINABLE AGRICULTURAL PRACTICES AND FACILITATING MARKET ACCESS FOR ORGANIC PRODUCTS.

PRM PROJECT SENEGAL:

A SECOND PROJECT, FUNDED BY THE U.S. DEPARTMENT OF STATE, BUREAU OF POPULATION, REFUGEES AND MIGRATION, AIMS TO INITIATE AND FACILITATE A

332212 11-14-23

Schedule O (Form 990) 2023

Name of the organization

SHELTER FOR LIFE INTERNATIONAL, INC.

Employer identification number

39-1657081

REPLICABLE PROCESS FOR THE RETURN OF DISPLACED POPULATIONS TO THEIR COMMUNITIES OF ORIGIN. SINCE 2018, SFL HAS FACILITATED THE CONSTRUCTION OF 2,050 DURABLE SHELTERS, BUILT 1,900 LATRINES AND CONSTRUCTED AND INSTALLED 78 DRINKING WATER WELLS. SINCE 2021, SFL HAS ALSO DISTRIBUTED 900 HYGIENE KITS TO RETURNEE FAMILIES. IN 2024, SFL ASSISTED 300 FAMILIES IN THE CONSTRUCTION OF THEIR SHELTERS, EACH OF THESE FAMILIES BENEFITED FROM A LATRINE; 15 NEW MINI-SOLAR BOREHOLES WERE BUILT TO FACILITATE THEIR ACCESS TO DRINKING WATER. THESE 300 HOUSEHOLDS ALSO RECEIVED HYGIENE KITS AND HAND-WASHING STATIONS AND 1,200 MENSTRUAL HYGIENE KITS WERE DISTRIBUTED. PROJECT BENEFICIARIES ARE SELECTED FROM AMONG THE MOST VULNERABLE FAMILIES OF FORMER REFUGEES AND INTERNALLY DISPLACED POPULATIONS, WHO HAVE RETURNED TO THEIR HOME VILLAGES IN CASAMANCE. THE PROJECT HAS HAD A DIRECT IMPACT ON MORE THAN 20,700 PEOPLE IN SOUTHERN CASAMANCE, THE SOUTHERN REGION OF SENEGAL.

LIFFT CASHEW GUINEA BISSAU PROGRAM

SHELTER FOR LIFE INTERNATIONAL BEGAN WORKING IN GUINEA BISSAU IN 2019. FOLLOWING YEARS OF POLITICAL INSTABILITY AND INTERNAL CONFLICT, GUINEA BISSAU'S ECONOMY HAS STAGNATED. GUINEA BISSAU IS ONE OF THE MAJOR CASHEW PRODUCERS IN WEST AFRICA, AND THE QUALITY OF ITS CASHEWS IS CONSIDERED MORE DESIRABLE IN GLOBAL MARKETS, BUT BECAUSE IT IS CONSIDERED A FRAGILE STATE, THE COUNTRY HAS HAD DIFFICULTY ATTRACTING INVESTMENT IN THE HARVESTING, PROCESSING, AND TRADE OF CASHEWS TO GLOBAL MARKETS. GUINEA BISSAU ACCOUNTS FOR MORE THAN 60% OF CASHEW NUTS PRODUCTION WITHIN SEGABI REGION. SFL'S WORK IN GUINEA BISSAU IS PART OF ITS REGIONAL CASHEW VALUE CHAIN PROGRAM, FUNDED BY THE U.S. DEPARTMENT OF AGRICULTURE.

DURING THE FISCAL YEAR 2024, A TOTAL OF 1,553 CUBIC METERS OF INFRASTRUCTURE (STORAGE SPACE) WERE REHABILITATED IN GUINEA-BISSAU AS

Schedule O (Form 990) 2023

Page 2

Name of the organization

SHELTER FOR LIFE INTERNATIONAL, INC.

Employer identification number

39-1657081

PART OF EFFORTS TO ENHANCE THE CASHEW VALUE CHAIN. A

BUSINESS-TO-BUSINESS (B2B) EVENT WAS ORGANIZED TO FACILITATE

COLLABORATION AMONG ALL STAKEHOLDERS INVOLVED IN THE INDUSTRY.

FINANCIAL SERVICES RECEIVED A BOOST WITH THE DISBURSEMENT OF \$1,000,000

FROM THE CASHEW FUNDS TO TWO PROCESSORS IN GUINEA-BISSAU.

THESE INVESTMENTS, ALONG WITH PRE-FINANCING ARRANGEMENTS BETWEEN

PROCESSORS, TRADERS AND COOPERATIVES, RESULTED IN THE PROCUREMENT OF

91,902 METRIC TONS WICH TRANSLATED TO A VALUE OF USD 74,413,393 OF

CASHEWS BY THE PROCESSORS AND TRADERS FROM PRODUCER COOPERATIVES

SUPPORTED BY SFL.

THIS ACHIEVEMENT REPRESENTS 123% OF THE FY2024 TARGET.

ADDITIONALLY, 535 INDIVIDUALS HAVE BENEFITED FROM FINANCIAL SERVICES

FACICLITATED BY SFL, ACHIEVING 103% OF THE LOP TARGET. 13 COOPERATIVES

RECEIVED GRANTS FOR OFFICE EQUIPMENT AND SUPPLIES. MOREOVER, 1,727

PRODUCERS TRAINED BY SFL HAVE IMPLEMENTED GOOD COOPERATIVE MANAGEMENT

PRACTICES, ACHIEVING 41% OF THE ANNUAL TARGET AND EXCEEDING THE LOP

TARGET BY 310%. IN TERMS OF IMPROVING NUT QUALITY AND PRODUCTIVITY,

1,911 PRODUCERS WERE TRAINED IN GUINEA-BISSAU, ACHIEVING 44% OF THE

ANNUAL TARGET AND 138% OF THE LOP. ADDITIONALLY, 6,238 PRODUCERS HAVE

IMPLEMENTED THESE PRACTICES ON 20,000 HECTARES OF LAND, REACHING 86% OF

THE ANNUAL TARGET AND 196% OF THE LOP.

LIFFT CASHEW THE GAMBIA PROGRAM:

SFL SUCCESSFULLY COMPLETED THE RE-REGISTRATION PROCESS SFL AS A

NON-PROFIT NON-GOVERNMENTAL ORGANIZATION (NGO) AND OBTAINED ITS

CERTIFICATE (EARLIER ACCORDING TO THE GAMBIAN LAW IT WAS REGISTERED AS

CHARITY ORGANIZATION, BECAUSE ELIGIBILITY FOR NGO STATUS REQUIRES TWO

YEARS OF HAVING CHARITY ORGANIZATION).

TO MEASURE THE IMPACT OF THE ROAD CONSTRUCTION IMPLEMENTED BY SFL, AN

332212 11-14-23

Schedule O (Form 990) 2023

Schedule O (Form 990) 2023

Page 2

Name of the organization

SHELTER FOR LIFE INTERNATIONAL, INC.

Employer identification number

39-1657081

EVALUATION WAS CONDUCTED WHICH SHOWED SIGNIFICANT IMPROVEMENTS IN ROAD TRAFFIC VOLUMES ON ROAD N1 EXPERIENCING A 251% INCREASE AND ROAD N3 SEEING A 107% INCREASE. THIS IMPROVEMENT INCREASED ACCESS TO THE MARKET FOR THE PRODUCERS, POSITIVELY IMPACTING THEIR ECONOMIC GROWTH. ADDITIONALLY, A STORAGE WAREHOUSE WITH A CAPACITY OF 2,538 CUBIC METERS WAS CONSTRUCTED THROUGH A GRANT FUND. ACCESS TO FINANCIAL SERVICES WAS ENHANCED, THROUGH SEED FUND PROVIDED TO COOPERATIVES BENEFITING 298 BENEFICIARIES, EITHER THROUGH CREDIT SCORING (ZERO INTEREST) OR JOB CREATION.

SFL ORGANIZED VARIOUS B2B MEETINGS THROUGH A NUMBER OF EVENTS FOR PRODUCERS AND BUYERS BOTH FOR RAW CASHEW NUTS AND KERNEL. THE BUSINESS-TO-BUSINESS (B2B) INITIATIVES FACILITATED TRANSACTIONS, RESULTING IN THE SALE OF 5,070 TONS OF RAW CASHEW NUTS (RCN) FOR \$5,361,886.55.

SFL THROUGH ITS PARTNERSHIP WITH THE AFRICAN CASHEW ALIANCE (ACA) CO-FINANCED THE ANNUAL AFRICAN CASHEW CONFERENCE IN SEPTEMBER 2024 THAT HAS INVOLVED OVER 500 STAKEHOLDERS INCLUDING PRODUCERS, PROCESSORS, BUYERS, SCIENTISTS, MINISTRIES, INTERNATIONAL DONOR AGENCIES, AND OTHERS.

SFL CONDUCTED A NATIONAL STEERING COMMITTEE MEETING, PURSUED THE INTRODUCTION OF THE WAREHOUSE RECEIPT SYSTEM, RECRUITED A CONSULTANT FOR A DIAGNOSTIC STUDY ON CROSS-BORDER RCN TRADE,

FORM 990, PART III, LINE 4B, PROGRAM SERVICE ACCOMPLISHMENTS:

PRACTICES AND IMPROVED AGRICULTURAL TECHNIQUES. COLLABORATION WITH PARTNERS LIKE THE NATIONAL NUTRITION AGENCY WAS ESTABLISHED TO PROMOTE BIO FORTIFIED CROPS SUCH AS ORANGE FLESHED SWEET POTATO AND COWPEA LEONA VARIETY.

| | | |
|----------------------------|--------------------------------------|--|
| Schedule O (Form 990) 2023 | | Page 2 |
| Name of the organization | SHELTER FOR LIFE INTERNATIONAL, INC. | Employer identification number 39-1657081 |

COMPONENT 2, AIMED AT BUILDING FARMER ASSOCIATIONS AND COOPERATIVES, SAW SIGNIFICANT PROGRESS. LETTERS OF AGREEMENT WERE SIGNED WITH 9 COOPERATIVES ACROSS 3 REGIONS, AND 30 COMMUNITY GARDENS WERE MAPPED TO IDENTIFY POTENTIAL BENEFICIARIES FOR INTENSIVE SUPPORT. A GRANTS MANUAL FOR COOPERATIVES AND MSMES WAS DEVELOPED, AND MARKET ACCESS FACILITATION EFFORTS WERE INITIATED THROUGH PARTNERSHIPS WITH CHAMBERS OF COMMERCE AND DIGITAL AGRICULTURAL MARKETING PLATFORMS.

FOR COMPONENT 3, FOCUSING ON THE TRADE ENABLING ENVIRONMENT AND SPS STANDARDS, AN MOU WAS FINALIZED WITH THE FOOD SAFETY AND QUALITY AUTHORITY, AND CURRICULUM DEVELOPMENT FOR SPS TRAINING WAS COMPLETED. THE PROJECT ALSO DEVELOPED A DATABASE OF SMES AND PROCESSORS IN THE HORTICULTURE VALUE CHAIN AND BEGAN PLANNING FOR POST-HARVEST INFRASTRUCTURE IMPROVEMENTS.

CROSS-CUTTING THEMES WERE ADDRESSED THROUGH A GENDER AND BEHAVIOR ANALYSIS, REVEALING 90-99% FEMALE MEMBERSHIP IN COMMUNITY GARDENS. THE BASELINE DATA COLLECTION WAS COMPLETED, AND PROJECT OPERATIONS WERE STRENGTHENED THROUGH MIS IMPROVEMENTS AND CYBERSECURITY TRAINING.

DESPITE INITIAL DELAYS IN FINALIZING THE BASELINE STUDY, THE PROJECT TEAM ADAPTED BY REVISING THE YEAR 1 WORK PLAN AND BUILDING THE GROUND FOR THE IMPLEMENTATION ACTIVITIES ONCE THE BASELINE WAS COMPLETED. STRONG PARTNERSHIPS HAVE BEEN ESTABLISHED WITH VARIOUS STAKEHOLDERS, INCLUDING GOVERNMENT AGENCIES, NGOS, INTERNATIONAL ORGANIZATIONS, AND PRIVATE SECTOR ENTITIES, ENHANCING THE PROJECT'S ABILITY TO CREATE SYNERGIES FOR GREATER IMPACT.

KEY ACHIEVEMENTS

BELOW IS A CONCISE OVERVIEW OF KEY ACHIEVEMENTS:

OVERALL PROJECT STATUS

Schedule O (Form 990) 2023

Page 2

Name of the organization

SHELTER FOR LIFE INTERNATIONAL, INC.

Employer identification number

39-1657081

SUCCESSFULLY ADAPTED TO BASELINE ASSESSMENT DELAYS BY REVISING YEAR 1
WORK PLAN.

COMPLETED BASELINE DATA COLLECTION IN JULY WITH DRAFT REPORT SUBMITTED
IN SEPTEMBER.

ADDRESSED STAFF RECRUITMENT CHALLENGES.

COMPONENT 1: INCREASED HORTICULTURAL PRODUCTIVITY AND MARKETS

CONDUCTED EVALUATIONS OF 30 COMMUNITY GARDENS, IDENTIFYING CRITICAL
INFRASTRUCTURE NEEDS AND DEVELOPING SELECTION CRITERIA FOR FUTURE
UPGRADES

FINALIZED FARMER FIELD SCHOOL (FFS) TRAINING MANUAL WITH DEPARTMENT OF
AGRICULTURE

TRAINED 15 WOMEN IN DRIP IRRIGATION TECHNIQUES, ENHANCING WATER
EFFICIENCY.

COMMENCED GARDEN REHABILITATION, INCLUDING HOOP HOUSES AND GREENHOUSE
UPGRADES ACROSS 15 HECTARES.

PLANNED DELIVERY OF GOOD AGRICULTURAL PRACTICES (GAP) TRAINING TO 300
FARMERS

DEVELOPED FOOD FORTIFICATION TRAINING MANUAL WITH NATIONAL NUTRITION
AGENCY (NANA)

COMPONENT 2: BUILDING FARMER ASSOCIATIONS AND COOPERATIVES

CREATED A COMPREHENSIVE FARMER FIELD SCHOOL CURRICULUM FOCUSING ON
CLIMATE-SMART AGRICULTURE PRACTICES AND IMPROVED TECHNIQUES.

TRAINED 187 COOPERATIVE EXECUTIVES IN LEADERSHIP AND MANAGEMENT.

FINALIZED GRANT MANUALS AND INITIATED PROPOSAL CALLS FOR 24
COOPERATIVES.

FACILITATED MARKET ACCESS PARTNERSHIPS, INCLUDING A \$1,128 SALE FOR
JARRA MADINA WOMEN'S GARDEN.

SELECTED AND SIGNED AGREEMENTS WITH 12 COOPERATIVES ACROSS THREE

Schedule O (Form 990) 2023

Page 2

| | |
|--------------------------------------|--------------------------------|
| Name of the organization | Employer identification number |
| SHELTER FOR LIFE INTERNATIONAL, INC. | 39-1657081 |

REGIONS.

COMPONENT 3: TRADE ENABLING ENVIRONMENT AND SPS

FACILITATED PARTICIPATION OF 50 WOMEN BUSINESSES TO TRADE FAIR.

CONDUCTED SANITARY AND PHYTOSANITARY (SPS) STANDARDS TRAINING FOR KEY OFFICIALS.

EXPLORED POST-HARVEST SOLUTIONS INCLUDING ZERO-ENERGY COOLING CHAMBERS.

FINALIZED MOU WITH FOOD SAFETY AND QUALITY AUTHORITY (FSQA) TO ENHANCE SPS FRAMEWORK.

SIGNED MOUS WITH CHAMBERS OF COMMERCE AND ENTERPRISES TO IMPROVE MARKET ACCESS.

CROSS-CUTTING ACHIEVEMENTS

COMPLETED BASELINE REPORT AND UPDATED PROJECT INDICATORS.

CONDUCTED GENDER ANALYSIS SHOWING 90-99% FEMALE PARTICIPATION IN COMMUNITY GARDENS.

ESTABLISHED PARTNERSHIPS WITH GOVERNMENT AGENCIES, NGOS, AND PRIVATE SECTOR ENTITIES.

KEY SUCCESSES

STRONG MULTI-SECTORAL PARTNERSHIPS ESTABLISHED.

DEMONSTRATED ADAPTIVE MANAGEMENT IN RESPONSE TO CHALLENGES.

COMPLETED CRUCIAL BASELINE DATA COLLECTION.

FORM 990, PART III, LINE 4C, PROGRAM SERVICE ACCOMPLISHMENTS:

THE MAIN OBJECTIVE OF IMPLEMENTED PROJECTS WERE TO IMPROVE FOOD

SECURITY, REDUCTION OF NATURAL DISASTERS, SHORT TERM INCOME, AND

EMPLOYMENT OPPORTUNITIES, REDUCE MIGRATION, EMPOWER RESILIENCE OF

COMMUNITIES AND SUPPORT MOST VULNERABLE AFFECTED FAMILIES ENSURE TO

HAVE ACCESS TO FOOD FOR THEIR SAVING LIFE AND LIVELIHOOD THROUGH:

CONSTRUCTION OF FLOOD MITIGATION AND AGRICULTURAL STRUCTURES,

Schedule O (Form 990) 2023

Page 2

Name of the organization

SHELTER FOR LIFE INTERNATIONAL, INC.

Employer identification number

39-1657081

CONDUCTING TRAINING ON DISASTER RISK REDUCTION, DISTRIBUTION OF FOOD
ITEM IN EXCHANGE TO WORK AND UNCONDITIONAL SEASONAL FOOD SUPPORT TO
MOST VULNERABLE FOOD INSECURE HOUSEHOLDS AND WOMEN HEADED FAMILIES.

RESILIENCE FOOD SYSTEM PROJECT (RFS) BADAKHSHAN, TAKHAR

COVERAGE AREA:

BADAKHSHAN: ARGHUNJ KHAH, TESHKAN, BAHARAK, WARDOJ, KISHEM & FAIZ ABAD
DISTRICTS

BENEFICIARIES ASSISTED: RECIPIENTS/ HOUSEHOLDS FOR SIX MONTHS IN
BADAKHSHAN

CBT: 9,312,000 AFN = 127,561.64 USD (EXCHANGE RATE: 1 USD = 73 AFN)
(485 HHS X3MONTHS)

OVERALL OBJECTIVE:

THE OVERALL OBJECTIVE OF THIS PROJECT IS TO IMPROVE SHORT AND
MEDIUM-TERM FOOD SECURITY, CREATE ASSETS AND TO IMPROVE FOOD SECURITY
AND LIVELIHOOD OPTIONS AMONG HIGHLY VULNERABLE POPULATIONS IN
BADAKHSHAN PROVINCE.

PROJECT ACTIVITIES/ ACHIEVEMENT UNDER FFA

127 METERS OF STONE MASONRY PROTECTION WALL HAS BEEN CONSTRUCTED IN TWO
DISTRICTS.

155 METERS OF STONE MASONRY DITCH HAS BEEN CONSTRUCTED.

14 METERS OF WASH CULVERT HAS BEEN CONSTRUCTED.

9 METERS OF STONE MASONRY CULVERT WITH RCC PALATE HAS BEEN CONSTRUCTED.

7000 METERS OF IRRIGATION CANAL HAS BEEN EXPANDED.

REHABILITATION OF 1700M ROAD IN MOHAMMAD KHEL VILLAGE AND CONSTRUCTION
OF 2 PCS WASH CULVERT 6X4X2M RCC.

620 UNITS OF NEW TRENCH TERRACE HAS BEEN EXCAVATED IN THREE DISTRICTS.

332212 11-14-23

Schedule O (Form 990) 2023

Schedule O (Form 990) 2023

Page 2

Name of the organization

SHELTER FOR LIFE INTERNATIONAL, INC.

Employer identification number

39-1657081

5500 METERS OF RURAL ROAD HAS BEEN CONSTRUCTED.

100 UNITS OF HOUSE GARDENS HAS BEEN ESTABLISHED.

60 UNITS OF ORCHARD GARDENS HAS BEEN ESTABLISHED.

50 METERS OF STONE MASONRY PROTECTION WALL HAS BEEN CONSTRUCTED.

FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:

RESILIENCE FOOD SYSTEM PROJECT (RFS) BADAKHSHAN, TAKHAR

COVERAGE AREA:

BADAKHSHAN: ARGHUNJ KHAH, TESHKAN, BAHARAK, WARDOJ, KISHEM & FAIZ ABAD

DISTRICTS

BENEFICIARIES ASSISTED: RECIPIENTS/ HOUSEHOLDS FOR SIX MONTHS IN

BADAKHSHAN

CBT: 9,312,000 AFN = 127,561.64 USD (EXCHANGE RATE: 1 USD = 73 AFN)

(485 HHS X3MONTHS)

OVERALL OBJECTIVE:

THE OVERALL OBJECTIVE OF THIS PROJECT IS TO IMPROVE SHORT AND

MEDIUM-TERM FOOD SECURITY, CREATE ASSETS AND TO IMPROVE FOOD SECURITY

AND LIVELIHOOD OPTIONS AMONG HIGHLY VULNERABLE POPULATIONS IN

BADAKHSHAN PROVINCE.

PROJECT ACTIVITIES/ ACHIEVEMENT UNDER FFA

127 METERS OF STONE MASONRY PROTECTION WALL HAS BEEN CONSTRUCTED IN TWO

DISTRICTS.

155 METERS OF STONE MASONRY DITCH HAS BEEN CONSTRUCTED.

14 METERS OF WASH CULVERT HAS BEEN CONSTRUCTED.

9 METERS OF STONE MASONRY CULVERT WITH RCC PALATE HAS BEEN CONSTRUCTED.

7000 METERS OF IRRIGATION CANAL HAS BEEN EXPANDED.

REHABILITATION OF 1700M ROAD IN MOHAMMAD KHEL VILLAGE AND CONSTRUCTION

Schedule O (Form 990) 2023

Page 2

Name of the organization

SHELTER FOR LIFE INTERNATIONAL, INC.

Employer identification number

39-1657081

OF 2 PCS WASH CULVERT 6X4X2M RCC.

620 UNITS OF NEW TRENCH TERRACE HAS BEEN EXCAVATED IN THREE DISTRICTS.

5500 METERS OF RURAL ROAD HAS BEEN CONSTRUCTED.

100 UNITS OF HOUSE GARDENS HAS BEEN ESTABLISHED.

60 UNITS OF ORCHARD GARDENS HAS BEEN ESTABLISHED.

50 METERS OF STONE MASONRY PROTECTION WALL HAS BEEN CONSTRUCTED.

65 METERS OF STONE MASONRY DITCH HAS BEEN CONSTRUCTED.

30 METERS OF STONE MASONRY PROTECTION WALL HAS BEEN CONSTRUCTED.

15 METERS OF PCC DITCH HAS BEEN CONSTRUCTED.

400 UNITS OF NEW TRENCH TERRACE HAVE BEEN EXCAVATED.

110 UNITS OF KITCHEN GARDENING HAVE BEEN ESTABLISHED.

3 UNITS OF FRUIT NURSERIES HAVE BEEN ESTABLISHED.

7000 METERS OF IRRIGATION CANAL WAS EXPANDED/IMPROVEMENT.

166 METERS OF STONE MASONRY DITCH WAS CONSTRUCTED.

7000 METERS OF IRRIGATION CANAL WAS EXPANDED/IMPROVEMENT.

30 UNITS OF KITCHEN GARDENING WERE ESTABLISHED.

10000 METERS OF SANG -E MUHR IRRIGATION CANAL WAS EXPANDED/IMPROVEMENT.

6000 METERS OF GUNBAD IRRIGATION CANAL WAS EXPANDED/IMPROVEMENT.

50 UNITS OF FRUIT GARDEN/ORCHARDS WERE ESTABLISHED.

6500 METERS OF KORKHO IRRIGATION CANAL WAS EXPANDED/IMPROVEMENT.

50 METERS OF DRY-STONE MASONRY CHECK DAMS WERE CONSTRUCTED.

4000 METERS OF HAMID ABAD IRRIGATION CANAL WAS EXPANDED/IMPROVEMENT.

10000 METERS OF BAHARUSTAN AND IBRAHIM KHALIL IRRIGATION CANALS WERE
EXPANDED/IMPROVEMENT.

PROJECT ACTIVITIES/ ACHIEVEMENT UNDER FFT ACTIVITIES:

TWO VOCATIONAL SKILLS TRAINING CENTERS HAVE BEEN ESTABLISHED IN

BADAKHSHAN AND GHAZNI PROVINCES AND TOTALLY 450 TRAINEES HAVE BEEN

Schedule O (Form 990) 2023

Page 2

Name of the organization

SHELTER FOR LIFE INTERNATIONAL, INC.

Employer identification number

39-1657081

ENGAGED IN TAILORING, BAG MAKING, BALOCHI EMBROIDERY, RAGHZA WEAVING, ENGRAVING, MOBILE REPAIRING AND JEWELRY, METALLIC WORK AND MOTORBIKE REPAIRING ACTIVITIES AND THE INVOLVED TRAINEES HAVE BEEN LEARNING THE MENTIONED ACTIVITIES BY WELL QUALIFIED TRAINERS, DESPITE THE AFOREMENTIONED NUMBERS OF TRAINEES WERE GRADUATED AND CONSIDERED TOOLKITS WERE PROVIDED AND DISTRIBUTED AT THE END PROGRAM IN ORDER TO BEGIN THEIR OWN BUSINESS.

PROJECT ACHIEVEMENT SMALLHOLDER AGRICULTURE MARKET SUPPORT (SAMS): UNDER SAMS ACTIVITIES SHELTER FOR LIFE INTERNATIONAL HAS COVERED 250 - COOPERATIVE FARMERS IN THREE TARGETED BAHARAK, KESHIM, TESHKAN AND NAWA DISTRICTS OF BADAKHSHAN AND GHAZNI PROVINCES. AFOREMENTIONED NUMBERS OF FARMER HAVE BEEN PROVIDED CERTIFIED WHEAT SEEDS, DAP/ UREA AS WELL AS PEST MANAGEMENT TRAININGS AND FOR THE TIME OF BEING THE ENGAGED FARMERS HAVE BEEN FOLLOWING BY AGRONOMIST UNTIL HARVESTING SEASON AND THE INVOLVED FARMERS ASSURED SFL THAT THEY FOLLOW THE APPROACHES WHICH HAS BEEN PROVIDED BY SFL ORGANIZATION.

800 UNITS OF CHICKEN DISTRIBUTED TO 40 WOMEN ESTABLISHMENT OF 50 UNITS OF KITCHEN GARDENING FOR 50 WOMEN-HEADED HOUSEHOLD ESTABLISHMENT OF CASH CROPS (HENG) PLOTS TO 50 WOMEN-HEADED HOUSEHOLDS. DISTRIBUTION OF 20 PCS SOLAR DRYER TO 20 WOMEN HHS. FOR DRYING DAIRY (QOROT) AND FRUITS MULTIPURPOSE USES. DISTRIBUTION OF CERTIFIED WHEAT SEED AND FERTILIZER PACKAGES AND TOOLS (SPRAY AND SAFETY CLOTHS PESTICIDE) FOR 100 FARMERS.

PROJECT OUTCOME:

332212 11-14-23

Schedule O (Form 990) 2023

10120722 131839 A428297

50
2023.06010 SHELTER FOR LIFE INTERNAT A4282971

Schedule O (Form 990) 2023

Page 2

| | |
|--------------------------------------|--------------------------------|
| Name of the organization | Employer identification number |
| SHELTER FOR LIFE INTERNATIONAL, INC. | 39-1657081 |

FOOD SECURITY AND LIVELIHOOD CONDITION IS IMPROVED AMONG TARGETED POPULATIONS.

INCREASED AGRICULTURAL CROPS AND PRODUCTION ACTIVITIES.

HUNDREDS OF HOUSES ARE PROTECTED, AND OTHER NATURAL DISASTERS MITIGATED SUCH (LANDSLIDE, FLOOD ETC.) BY CONSTRUCTION RETAINING STRUCTURES.

JOB OPPORTUNITIES INCREASED FOR YOUTH AND DECREASED MIGRATION.

INCREASED ECONOMIC RESILIENCY AND SELF-SUFFICIENCY IN TARGETED COMMUNITIES.

INCREASED KNOWLEDGE AND PARTICIPATION OF WOMEN IN THE LOCAL LABOR MARKET.

SMALLHOLDER FARMERS IN THE TARGET COMMUNITIES ARE BETTER EQUIPPED TO

MEET THEIR OWN AND THEIR FAMILY'S FOOD AND NUTRITION NEEDS

EXPENSES \$ 0. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0.

RESILIENCE FOOD SYSTEM PROJECT (RFS) GHAZNI PROVINCE:

COVERAGE AREA: GHAZNI

BADAKHSHAN: NAWA DISTRICT

BENEFICIARIES ASSISTED: RECIPIENTS/ HOUSEHOLDS FOR SIX MONTHS IN GHAZNI

CBT: 3,264,000 AFN = 44,712.32 USD (EXCHANGE RATE: 1 USD = 73 AFN) (173

HHS X3MONTHS)

OVERALL OBJECTIVE:

THE OVERALL OBJECTIVE OF THIS PROJECT IS TO IMPROVE SHORT AND

MEDIUM-TERM FOOD SECURITY, CREATE ASSETS AND TO IMPROVE FOOD SECURITY

AND LIVELIHOOD OPTIONS AMONG HIGHLY VULNERABLE POPULATIONS IN GHAZNI

PROVINCE.

500 NEW TERRACE EXCAVATION AND 700 TERRACES FOR CLEANING/ REPAIRING:

332212 11-14-23

Schedule O (Form 990) 2023

Schedule O (Form 990) 2023

Page 2

Name of the organization

SHELTER FOR LIFE INTERNATIONAL, INC.

Employer identification number

39-1657081

DURING REPORTING MONTH, 140 MEN LABORS UNDER FFA EXCAVATED 120 UNITS OF NEW TERRACES AND CLEANED 162 OLD TERRACES IN TOTAL DURING 2 MONTHS OF PROJECT PROGRESS, 400 UNITS OF NEW TERRACES AND 770 UNITS OF OLD TERRACES WERE EXCAVATED AND CLEANED FOR IMPROVEMENT OF THE GREEN ENVIRONMENT AT THE TARGETED COMMUNITIES 7000 UNITS NON FRUIT TREES HAVE BEEN PROCURED FROM MYDAN WARDAK NURSERY PLOTS AND PLANTED IN COMMUNITIES WHERE TERRACES WERE EXCAVATED AND IRRIGATION CANAL WERE CONSTRUCTED. THE TABLE BELOW DETAILS THE TYPES OF TREES DISTRIBUTED FOR EACH COMMUNITY. DURING THE PLANTATION, THE SFL TEAM FACILITATED A CEREMONY, AND MEMBERS OF THE COMMUNITIES PARTICIPATED IN THIS SESSION, PLANTING ALL 7000 UNITS OF TREES.

NONAME OF VILLAGESTYPES OF TREES REMARK

| | JUDAS | EXCELSIOR | ACACIAWILLOW | TOTAL |
|---------------------|--------|-----------|--------------|-------|
| 1KHAJA KHAIL 200400 | | 400 | 400 | 1400 |
| 2SADUKHAIL | 100 | 300 | | 200 |
| 200 | 800 | | | |
| 3ANGU | 50 | 50 | | 50 |
| 50 | 200 | | | |
| 4MATA KHAIL | 50 | 50 | | 50 |
| 50 | 200 | | | |
| 5ANDY | 50 | 150 | | 150 |
| 150 | 500 | | | |
| 6MALIKUDDIN 200400 | | 400 | 400 | 1400 |
| 7KUCHNY NAWA 200300 | | 300 | 300 | 1100 |
| 8QALA KHAN | 100200 | 100 | | 100 |
| 500 | | | | |
| 9NAWA CENTER 100300 | | 200 | 300 | 900 |

332212 11-14-23

Schedule O (Form 990) 2023

Schedule O (Form 990) 2023

Page 2

Name of the organization

SHELTER FOR LIFE INTERNATIONAL, INC.

Employer identification number

39-1657081

| | | | |
|-------|----------|------|------|
| TOTAL | 10502150 | 1850 | 1950 |
| 7000 | | | |

SOLAR COOKER (MANUFACTURE/ PRODUCTION/ PROVISION OF TECHNICAL TRAINING):

20 MALE TRAINEES, INCLUDING 4 TRAINEES WITH DISABILITIES, PARTICIPATED IN THEORETICAL AND PRACTICAL TRAINING ON PRODUCING SOLAR COOKERS.

DURING 2 MONTHS OF THE PROJECT PROGRESS, THE TRAINEES WERE ABLE TO SUCCESSFULLY ASSEMBLE 12 PCS OF THE SOLAR COOKER, AND 3 OF THESE SOLAR COOKERS WERE SOLD AT THE COST OF THE MATERIALS USED IN THESE PIECES.

MOST OF THE TRAINEES WERE ABLE TO PRODUCE THIS COOKER WITH THE SUPPORT OF THE TRAINER, THE COMMUNITY IS HIGHLY INTERESTED IN USING AS AN ALTERNATIVE TO COOKING FUEL.

INSTALLATION OF 10-UNIT GREENHOUSE ACTIVITIES FOR THE CULTIVATION OF CASH CROPS (12X4X2.20CM)

DURING REPORTING MONTH 5 GREEN HOUSES HAVE BEEN INSTALLED WITH THE INSTALLATION OF THIS GREENHOUSES ALL 10 GREENHOUSES INSTALLATION COMPLETED AND 10 WOMEN'S WHO ARE GREENHOUSES INSTALLED FOR THEM ARE ALSO RECEIVED VEGETABLE SEED AND TRAINING FOR CULTIVATION AS SEEDLING, INSTALLATION OF IN THIS GREENHOUSES CHANGED THE BEHAVIOR OF COMMUNITIES FROM TRADITIONAL SYSTEM IN TO MODERN AGRICULTURE SYSTEM AND FARMERS ARE NOW PREFERRING TO BEST METHODS OF CULTIVATION.

EXPENSES \$ 0. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0.

PROCUREMENT AND DISTRIBUTION OF IMPROVED WHEAT SEED AND FERTILIZERS AND LASER LAND OF 20-HECTARE LANDS:

DURING REPORTING MONTH CERTIFIED WHEAT SEED AND UREA& DAP FERTILIZER

332212 11-14-23

Schedule O (Form 990) 2023

Schedule O (Form 990) 2023

Page 2

| | |
|--------------------------------------|--------------------------------|
| Name of the organization | Employer identification number |
| SHELTER FOR LIFE INTERNATIONAL, INC. | 39-1657081 |

WERE DISTRIBUTED TO 50 FARMERS UNDER SAMS. FOR EACH FARMER 50KG
 CERTIFIED WHEAT SEED, 50 KG DAP AND 50 KG UREA WERE DISTRIBUTED, THIS
 SEED AND FERTILIZER IS ESTIMATED FOR 2 ACERS OF IRRIGATED LAND AND ALL
 THE FARMERS WERE SELECTED UNDER THIS PROJECT HAD ABOVE 2 ACERS OF LANDS
 FURTHERMORE BEST METHODS OF CULTIVATION TRAINING WERE CONDUCTED FOR
 THIS FARMER. FURTHERMORE, LAND LASER PROCESS IN 2 ACERS LAND OF EACH
 FARMER ARE IN PROGRESS DURING REPORTING MONTH 12 FARMERS LAND ARE
 LEVELED AND AFTER THIS OPERATION THE FARMERS ARE CULTIVATED WHEAT SEED
 AND FERTILIZER THEY RECEIVED

UNCONDITIONAL SEASONAL SUPPORT FOOD KUNDUZ, BAGHLAN, BADAKHSHAN:

BENEFICIARIES ASSISTED: 29615 HHS CBT AND 35897 HHS FOOD. TOTAL=
 65512 HHS

PROJECT ACTIVITIES: GENERAL FOOD DISTRIBUTION, CBT AND
 CONTINGENCY RESPONSE.

PROJECT DURATION: SEP 2024 FEB 2025

FOOD DISTRIBUTED: 9815.069 MT MIXED FOOD

CBT: 315,513,137.9 AFN = 4476125.551 USD (EXCHANGE RATE: 1 USD =
 70.488AFN)

UNCONDITIONAL SEASONAL SUPPORT FOOD -BALKH PROVINCE:

BENEFICIARIES ASSISTED: 32,275 HHS CBT AND 11,004 HHS FOOD. TOTAL=
 43,279 HHS

PROJECT ACTIVITIES: GENERAL FOOD DISTRIBUTION, CBT AND
 CONTINGENCY RESPONSE.

PROJECT DURATION: SEP 2024 FEB 2025

FOOD DISTRIBUTED: 4,344.37 MT MIXED FOOD

CBT: 561,532,800 AFN = 7,966,360.231USD (EXCHANGE RATE: 1 USD =

Schedule O (Form 990) 2023

Page 2

Name of the organization

SHELTER FOR LIFE INTERNATIONAL, INC.

Employer identification number

39-1657081

70.488AFN)

PROJECT OBJECTIVE:

THE OVERALL OBJECTIVE OF THE PROJECT IS TO ASSIST THE MOST VULNERABLE
AFFECTED HHS TO ENSURE THEIR ACCESS TO
FOOD FOR SAVING THEIR LIFE AND LIVELIHOOD FROM FURTHER DETERIORATION.

PROJECT OUTCOME:

REDUCED VULNERABILITY AMONG FAMILIES AFFECTED BY NATURAL DISASTERS OR
INTERNAL CONFLICT.

HIGHLY VULNERABLE RURAL HOUSEHOLDS SHOW IMPROVED FOOD CONSUMPTION
SCORES DURING THE PROJECT PERIOD.

EXPENSES \$ 0. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0.

MATERNAL CHILD BENEFIT PROGRAM (MCBP) BADA KHSHAN

COVERAGE AREA:

BADA KHSHAN: WARDOOJ DISTRICT

BENEFICIARIES ASSISTED: 4152 HOUSEHOLDS

PROJECT ACTIVITIES:

PROJECT DURATION: SEP 2024 FEB 2025

FOOD DISTRIBUTED: 9815.069 MT MIXED FOOD

CBT: 315,513,137.9 AFN = 4476125.551 USD (EXCHANGE RATE: 1 USD =
70.488AFN)

PROJECT ACHIEVEMENT JUNE AUGUST 2024

BENEFICIARY TARGETING AND VERIFICATION HAS BEEN COMPLETED THROUGH MODA
SYSTEM.

SCOPE REGISTRATION WAS COMPLETED, AND ALTOGETHER THERE HAVE BEEN 4152

Schedule O (Form 990) 2023

Page 2

Name of the organization

SHELTER FOR LIFE INTERNATIONAL, INC.

Employer identification number

39-1657081

BENEFICIARIES WILL HAVE BENEFITED FROM THE PROJECT.

COORDINATION MEETINGS WITH PROJECT STAKEHOLDERS (AKHS, UNECIF, HEALTH FACILITIES AND DFA LINE DEPARTMENTS) CONDUCTED SEPARATELY.

THE FIRST PHASE OF THE MCBP PROJECT FINANCIAL DOCUMENTS FOR THREE MONTHS (FEBRUARY TO APRIL 2024) WAS AUDITED BY THE THIRD-PARTY MONITOR AUDIT (TPMA) APPOINTED BY THE WORLD BANK (WB) THAT WAS HELD ON MAY 16TH 2024.

9 FDP BUILDINGS SELECTED FOR CONDUCTING SBCC SESSIONS AND CBT OVERALL THE WARDOJ DISTRICT WHICH ALL THE BENEFICIARIES FROM 13 CLUSTERS WILL ATTEND THE FDPS.

INTERVENTION OBJECTIVES:

THE MCBP IS A SAFETY NET PROGRAMME THAT WILL PROVIDE NUTRITION & FOOD SECURITY BENEFITS FOR WOMEN AND CHILDREN THROUGH A PROVIDING HEALTH AND NUTRITION INFORMATION AND AWARENESS SESSIONS AND MESSAGES, COMPLEMENTED WITH A FINANCIAL INCENTIVE TO ACCESS SERVICES AND SUPPORT ACCESS TO NUTRITIOUS FOODS. THE PROJECT AIMS TO IMPROVE THE NUTRITIONAL STATUS OF VULNERABLE PBW AND CHILDREN UNDER 2, BY COMPLEMENTING HEALTH AND NUTRITION SERVICES PROVIDED UNDER COMPONENT 1 OF HER, THROUGH: QUARTERLY CASH TRANSFERS TO INCREASE ACCESS TO NUTRITIOUS FOODS AND SUPPORT WITH THE COST OF ACCESSING HEALTH FACILITIES. HEALTH AND NUTRITION AWARENESS SESSIONS AND MESSAGES TO INCREASE UTILIZATION OF SERVICES AND IMPROVE PRACTICES RELATED TO HEALTH AND NUTRITION.

ACTIVITIES:

UNDER THIS PROJECT, SFL WILL PROVIDE 15 MONTHS OF CASH PLUS ASSISTANCE ON A QUARTERLY BASIS TO WOMEN WHO ARE PREGNANT, BREASTFEEDING, AND/OR HAS CHILDREN BELOW THE AGE OF 2, IN WARDOJ DISTRICT.

Schedule O (Form 990) 2023

Page 2

| | |
|--------------------------------------|--------------------------------|
| Name of the organization | Employer identification number |
| SHELTER FOR LIFE INTERNATIONAL, INC. | 39-1657081 |

ALONG WITH THE CASH TRANSFER, SFL WILL CONDUCT QUALITY HEALTH AND NUTRITION INFORMATION SESSIONS AND MESSAGING FOR TARGETED BENEFICIARIES.

EXPENSES \$ 0. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0.

FORM 990, PART VI, SECTION A, LINE 1A:

THE BOARD OF DIRECTORS MAY APPOINT THREE OR MORE DIRECTORS TO SERVE AS THE EXECUTIVE COMMITTEE. THE EXECUTIVE COMMITTEE, IF APPOINTED BY THE BOARD, HAS THE AUTHORITY TO TRANSACT SUCH BUSINESS NECESSARY FOR THE ADMINISTRATION AND OPERATION OF THE ORGANIZATION BETWEEN BOARD OF DIRECTORS MEETINGS AND HAS SUCH POWER AS, FROM TIME TO TIME, IS VESTED IN IT BY THE BOARD OF DIRECTORS. IN NO EVENT SHALL THE EXECUTIVE COMMITTEE HAVE AUTHORITY TO:

- (A) AMEND THE ARTICLES OF INCORPORATION OR BYLAWS OF THIS CORPORATION;
- (B) CHANGE THE QUALIFICATIONS AND VOTING RIGHTS OF DIRECTORS OR ELECT OR REMOVE DIRECTORS FROM OFFICE;
- (C) AUTHORIZE THE TRANSFER, GIFT, OR ENCUMBRANCE OF ALL OR SUBSTANTIALLY ALL THE ASSETS OF THE ORGANIZATION IN A SINGLE OR RELATED TRANSACTION;
- (D) AUTHORIZE THE DISSOLUTION, MERGER OR CONSOLIDATION OF THE ORGANIZATION;
- (E) CHANGE THE QUALIFICATIONS OF OFFICERS OR ELECT OR REMOVE OFFICERS FROM OFFICE.

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

THE FORM 990 IS PREPARED BY AN INDEPENDENT ACCOUNTING FIRM AND THE MANAGEMENT TEAM REVIEWS THE FORM 990. A COPY OF THE FORM 990 IS FORWARDED TO THE BOARD FOR REVIEW PRIOR TO FILING WITH THE IRS.

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

332212 11-14-23

Schedule O (Form 990) 2023

Name of the organization

SHELTER FOR LIFE INTERNATIONAL, INC.

Employer identification number

39-1657081

A CONTRACT OR OTHER TRANSACTION BETWEEN THE ORGANIZATION AND ONE OR MORE OF ITS DIRECTORS, OR BETWEEN THE ORGANIZATION AND ANY OTHER ENTITY IN WHICH A DIRECTOR IS A DIRECTOR OR OFFICER OR HAS A MATERIAL FINANCIAL INTEREST - IS VOIDABLE AT THE SOLE ELECTION OF THE ORGANIZATION IF NEITHER OF THE FOLLOWING PROVISIONS ARE SATISFIED:

(A) THE MATERIAL FACTS OF THE TRANSACTION AND THE DIRECTOR'S RELATIONSHIP OR INTEREST WERE DISCLOSED OR KNOWN TO THE BOARD OF DIRECTORS OR A COMMITTEE OF THE BOARD;

(B) THE BOARD OR COMMITTEE AUTHORIZED, APPROVED OR RATIFIED THE TRANSACTION WITHOUT COUNTING THE VOTE OF THE INTERESTED DIRECTOR;

(C) THE TRANSACTION WAS FAIR AND REASONABLE TO THE ORGANIZATION.

COMMON OR INTERESTED DIRECTORS MAY BE COUNTED IN DETERMINING THE PRESENCE OF A QUORUM AT A MEETING OF THE BOARD OF DIRECTORS (OR A COMMITTEE THEREOF) WHICH AUTHORIZES, APPROVES, OR RATIFIES SUCH CONTRACT OR TRANSACTION, BUT MAY NOT VOTE ON SUCH TRANSACTION. PROCEEDINGS ARE DOCUMENTED IN THE MEETING MINUTES.

NO EMPLOYEE SHALL ENGAGE IN ANY OUTSIDE BUSINESS OR FINANCIAL ACTIVITY WHICH INTERFERES WITH HIS OR HER ABILITY TO FULLY PERFORM JOB RESPONSIBILITIES. NO EMPLOYEE WHOSE JOB INCLUDES PURCHASING OR INFLUENCING PURCHASE DECISIONS SHALL HAVE A FINANCIAL INTEREST IN ANY BUSINESS THAT FURNISHES PRODUCTS, MATERIALS, OR SERVICES TO THE ORGANIZATION. ANY SUCH INTEREST IS GROUNDS FOR IMMEDIATE DISMISSAL. THE ONLY EXCEPTION APPLIES TO AN EMPLOYEE WHO OWES LESS THAN FIVE PER CENT OF THE SHARE OF STOCK OF PUBLICLY TRADED COMPANY. NO EMPLOYEE MAY BENEFIT DIRECTLY OR INDIRECTLY FROM A THIRD PARTY WHO FURNISHES PRODUCTS, MATERIALS, OR SERVICES TO THE ORGANIZATION. ANY SUCH BENEFIT IS GROUND FOR IMMEDIATE DISMISSAL.

Schedule O (Form 990) 2023

Page 2

Name of the organization

SHELTER FOR LIFE INTERNATIONAL, INC.

Employer identification number

39-1657081

FINANCIAL INTEREST HELD BY MEMBERS OF AN EMPLOYEE'S IMMEDIATE FAMILY
(SPOUSE, PARENTS, CHILDREN, OR MEMBER OF EMPLOYEE'S HOUSEHOLD) IN COMPANIES
SUPPLYING PRODUCTS, MATERIALS, OR SERVICES TO THE ORGANIZATION SHALL BE
DISCLOSED IMMEDIATELY TO DETERMINE WHETHER A CONFLICT OF INTEREST EXISTS.

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

THE BOARD OF DIRECTOR'S PERSONNEL COMMITTEE REVIEWS THE JOB PERFORMANCE OF
THE CEO. THEY USE APPROPRIATE COMPARABILITY DATA TO DETERMINE THE
COMPENSATION. RAISES FOR EMPLOYEES ARE BASED ON EMPLOYEE EVALUATIONS. THE
LAST EVALUATION WAS DONE FOR CHIEF EXECUTIVE OFFICER, MUSTAFA OMAR IN 2023.

THE CEO REVIEWS THE JOB PERFORMANCE OF THE OFFICERS. THE CEO USES
APPROPRIATE COMPARABILITY DATA TO DETERMINE THE COMPENSATION. RAISES FOR
THE EMPLOYEES ARE BASED ON EMPLOYEES' EVALUATIONS.

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

THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST
POLICY, AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC UPON REQUEST.

FORM 990, PART XII, LINE 2C:

THE PROCESS FOR OVERSIGHT AND SELECTION OF AN INDEPENDENT ACCOUNT HAS
NOT CHANGED FROM THE PRIOR YEAR.