# Form **990-EZ**

Department of the Treasury

Internal Revenue Service

**Short Form** 

Return of Organization Exempt From Income Tax
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

For organizations with gross receipts less than \$100,000 and total assets less than \$250,000 at the end of the year.

▶ The organization may have to use a copy of this return to satisfy state reporting requirements.

OMB No. 1545-1150

Open to Public Inspection

			ar year	r, or tax year beginning	April i	, 2004, and e	nding	March 3	1	, 20 <b>05</b>	
B	Address	Address change Name change Initial return ch							Employer identification number 30   0125384		
	Initial retu										
									F Group Exemption Number ▶		
	Secti	ion 501(c)(3)		ations and 4947(a)(1) nonex mpleted Schedule A (Form 9		trusts must attach	ı	iting metho specify) <b>&gt;</b>	d:	☐ Cash ☑ Accrual	
	Websit	.c. >		SomethingBack.org			•	equired to a	attac		
				nly one)—			<u> </u>			, 990-EZ, or 990-PF).	
	organiza	ation received	a Form	on's gross receipts are norman 990 Package in the mail, it s	should file a retur	n without financial data	a. Some state	es require a	3 CO	mplete return.	
	art I			ne 9 to determine gross receipts						47,321	
	1			s, grants, and similar amoun						47,292	
	2	Program se	ervice i	revenue including governm	nent fees and co	ontracts		2		77,202	
	4	Investment	•					4	$\top$	29	
	5a	Gross amo	unt fro	m sale of assets other tha	in inventory .	5a					
	b			er basis and sales expense							
ā	C			n sale of assets other than				e). <u>5</u> 0	2		
Revenue	6 a	or contributions									
	b	reported on line 1)  b Less: direct expenses other than fundraising expenses  6a  6b									
		c Net income or (loss) from special events and activities (line 6a less line 6b)							;		
	7a										
	b	Less: cost									
	С	Gross profi	it or (lo	ss) from sales of inventory				. 70	;		
	8	Other revenue (describe Total revenue (add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8).						)			
	9									47,321	
	10 11	Grants and	l simila	r amounts paid (attach sch	nedule)	· · · · · · · ·		11		15,075	
S	12	Benefits paid to or for members									
Expenses	13	Salaries, other compensation, and employee benefits								10,000	
db	14	Professional fees and other payments to independent contractors								10,000	
ய	15	Printing publications postage and chipping						. 14		The state of the s	
	16	Other expenses (describe > PHO UF TATFPAFT WEDGITE SUPPLIES FOR						Fr. 16	-	7,173	
	17	TOTAL CAPC	11000 (0	add lines to through to)				P 17	•	32,248	
ets	18	Excess or (	(deficit)	) for the year (line 9 less lir	ne 17)			. 18		15,073	
Net Assets	19	Net assets	or fun	d balances at beginning of	of year (from lin	ie 27, column (A)) (i	must agree	with		CO 400	
et /	20	Other chan	r tigure iges in	e reported on prior year's re net assets or fund balance	eturn)			. 19		60,198	
Ž	21	Net assets	or fund	d balances at end of year (	es (attach expla (combine lines :	ination) , , , , 18 through 20)		<u>20</u> <b>▶</b> 21		75,271	
Pá	art II	Balance S	Sheets	s—If Total assets on line 2	5, column (B) a	re \$250,000 or more	e, file Form 9	990 instead	d of	Form 990-EZ.	
				See page 40 of the instruct				ning of year	T	(B) End of year	
22	. Cash	n, savings, a						60,198	22	75,271	
23	Land	d and buildin	ngs .						23		
24	Othe	er assets (de	scribe	<b>&gt;</b>		)			24		
25		l assets .						60,198		75,271	
26 27	i lota Net	l liabilities (dassets or fu	pescrib and ha	oe ► lances (line 27 of column	(R) must seen	with line (11)			26	72.004	
	,,,,,,		va	mine at of column	(L) must agree	will mezl) .	1	60,198	21	75,271	

Par	t III	Statement of Program Service Acc	complishments (See page	41 of the instruct	ions )		Expenses
		e organization's primary exempt purpose		7, 01 1110 111011001	.0.10.9	(Requ	uired for 501(c)(3)
		(4) organizations 4947(a)(1) trusts;					
		hat was achieved in carrying out the org e services provided, the number of person					nal for others.)
28	The G	lobal Virtual Classroom is a worldwide	e educational & web design	program for prim	ary &		
		dary school students. During its seco	·				
		nts from 57 schools in 21 countries.		(Grants \$	10,250)	28a	27,423
29	GSBI S	Scholarship program is for needy & di	sadvantaged primary & sec		ildren from		
		d the world. Scholarships were awarde					
	Vietna			(Grants \$	4,825)	29a	4,825
30							
	*******			(Grants \$	)	30a	
31 0	Other p	rogram services (attach schedule)		(Grants \$	)	31a	
		rogram service expenses (add lines 28	T##		>	32	32,248
	t IV	List of Officers, Directors, Trustees, and		even if not compensa	ted. See page 4	1 of the	instructions.)
			(B) Title and average	(C) Compensation	(D) Contribution	ons to	(E) Expense
		(A) Name and address	hours per week devoted to position	(If not paid, enter -0)	employee benefit deferred compe		account and other allowances
JoA	nn Pa	trick-Ezzell			<u>.                                     </u>		
		bbean Dr. Sarasota, FL 34231	Chairman	'	0	0	0
	drew E						_
154	8 Caril	bbean Dr. Sarasota, FL 34231	President		0	0	0
		Nardone, PhD.	B				
14	Jay St.	#2 New York, NY	Director	'	0	0	0
Par	t V	Other Information (Note the attack	hment requirement in Ge	neral Instruction	V, page 14.)		Yes No
33	Did the	e organization engage in any activity not previo				h activit	v /
34		ny changes made to the organizing or governing do					
35		organization had income from business a	· ·			•	
•		ported on Form 990-T, attach a statemen	•		, •	•	501
а		e organization have unrelated business gross in					nts?
		s," has it filed a tax return on Form 990		(c) notice, reporting, a	na proxy tax roc	141,01,707	
36		here a liquidation, dissolution, termination,	-	ring the year? /if "Y	· · · · · · · · · · · · · · · · · · ·	 tatemen	nt ) 🗸
		amount of political expenditures, direct of			37a	atomen	"" o
		ne organization file Form 1120-POL for the	•	e mondodona. P			<b>√</b>
		ne organization borrow from, or make ar	•	ctor trustee or key	employee o	· were :	anv
	such			√ V			
b		s," attach the schedule specified in the line	•	•	38b		
		(7) organizations. Enter: a Initiation fees					
		receipts, included on line 9, for public i		39b			
40a	501(c)(	(3) organizations. Enter: Amount of tax impos					
			on 4912 ►		5 ▶		0
b	501(c)	(3) and (4) organizations. Did the organiz				durina	the /
		or did it become aware of an excess ben					
С		nt of tax imposed on organization managers or	•	•	•		_
		Amount of tax on line 40c, above, reim					0
41	List th	e states with which a copy of this return is	s filed. ▶ NONE			***************************************	
42	The b	ooks are in care of ► Andrew Ezzell		Tele	phone no. <b>&gt;</b>	(941)	924-0025
		ed at > 1548 Caribbean Dr. Sarasota	, FL		ZIP + 4 ▶	34231	i-530 <b>4</b>
43	Section	on 4947(a)(1) nonexempt charitable trust:	s filing Form 990-EZ in lieu	of <b>Form 1041—</b> Ch	eck here		
***************************************	and e	nter the amount of tax-exempt interest i					0
		Under penalties of perjury, I declare that I have e and belief, it is true, correct, and complete. Dec	examined this return, including acco	mpanying schedules an	d statements, and	d to the b	est of my knowledge
Plea	se	The state of the s		July 10 Dagota Off all liftle	1/ 1	proparer J	
Sign	1	:			11-1	4-6	<u> </u>
Here		Androw E			Date		
		Andrew Ezzell, President					
		Type or print name and title.	75.	te Check if	7 5	-d- 000	- DTIN (Con Con 10-1 120
Paid	ì	Preparer's signature	Da	self-	г	ei 8 99N 0	r PTIN (See Gen. Inst. W)
•	arer's	Firm's name (or yours \		employe	d ▶ L	1	
Use	Only	if self-employed), address, and ZIP + 4			Phone no ► (	'	

## **SCHEDULE A**

(Form 990 or 990-EZ)

## Organization Exempt Under Section 501(c)(3)

(Except Private Foundation) and Section 501(e), 501(f), 501(k), 501(n), or Section 4947(a)(1) Nonexempt Charitable Trust

Supplementary Information—(See separate instructions.)

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization ▶ MUST be completed by the above organizations and attached to their Form 990 or 990-EZ

**Employer identification number** 

	thing Back International Foundation			30 0125384	
Part I	Compensation of the Five High (See page 1 of the instructions. I	est Paid Employees Of List each one. If there ar	ther Than Office e none, enter "N	ers, Directors, a lone.")	nd Trustees
(a) Name a	nd address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
NONE					
T-1-11					
\$50,000	er of other employees paid over	NONE			
Part II	Compensation of the Five High (See page 2 of the instructions. Lis	est Paid Independent ( t each one (whether indiv	Contractors for viduals or firms). I	Professional Se f there are none,	rvices enter "None.")
(a) Na	me and address of each independent contractor	paid more than \$50,000	<b>(b)</b> Type o	of service	(c) Compensation
NONE					
~~~~~					
******					
~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~					
Total number	of others receiving over \$50,000 for				
professional :	services	NONE			

Pa	rt li	Statements About Activities (See page 2 of the instructions.)	Yes	No						
1	att or	iring the year, has the organization attempted to influence national, state, or local legislation, including any tempt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid incurred in connection with the lobbying activities   (Must equal amounts on line 38, rt VI-A, or line i of Part VI-B.)		1						
	Or org	ganizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other ganizations checking "Yes" must complete Part VI-B AND attach a statement giving a detailed description of elobbying activities.								
2	su wit	bstantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or the any taxable organization with which any such person is affiliated as an officer, director, trustee, majority oner, or principal beneficiary? (If the answer to any question is "Yes," attach a detailed statement explaining the insactions.)								
а	Sa	le, exchange, or leasing of property?		✓						
b		nding of money or other extension of credit?		✓						
C		rnishing of goods, services, or facilities?		✓						
d		yment of compensation (or payment or reimbursement of expenses if more than \$1,000)?	ļ	ļ						
e	Tra	ansfer of any part of its income or assets?	<del> </del>	1						
За		you make grants for scholarships, fellowships, student loans, etc.? (If "Yes," attach an explanation of how	1							
		u determine that recipients qualify to receive payments.)	-	1						
b 4a		you have a section 403(b) annuity plan for your employees?		<b>V</b>						
48	On	you maintain any separate account for participating donors where donors have the right to provide advice the use or distribution of funds?		✓						
b		you provide credit counseling, debt management, credit repair, or debt negotiation services?	-	1						
	rt I\									
	orga	anization is not a private foundation because it is: (Please check only ONE applicable box.)								
5 6	H	A church, convention of churches, or association of churches. Section 170(b)(1)(A)(i).  A school. Section 170(b)(1)(A)(ii). (Also complete Part V.)								
7	П	A hospital or a cooperative hospital service organization. Section 170(b)(1)(A)(iii).								
8		A Federal, state, or local government or governmental unit. Section 170(b)(1)(A)(v).								
9		A medical research organization operated in conjunction with a hospital. Section 170(b)(1)(A)(iii). Enter the hospital's and state ▶	name	, city						
0		An organization operated for the benefit of a college or university owned or operated by a governmental unit. Section 17 (Also complete the <b>Support Schedule</b> in Part IV-A.)								
		An organization that normally receives a substantial part of its support from a governmental unit or from the general pu 170(b)(1)(A)(vi). (Also complete the <b>Support Schedule</b> in Part IV-A.)	olic. S	∍ction						
1b  2		A community trust. Section 170(b)(1)(A)(vi). (Also complete the <b>Support Schedule</b> in Part IV-A.)								
2	L	An organization that normally receives: (1) more than 331/3% of its support from contributions, membership fees, ar receipts from activities related to its charitable, etc., functions—subject to certain exceptions, and (2) no more than 3 its support from gross investment income and unrelated business to the latest form or the support from gross investment income and unrelated business to the latest form or the support from gross investment income and unrelated business to the latest form or the support from gross investment income and unrelated business to the latest form or the support from gross investment income and unrelated business to the latest form or the support from contributions, membership fees, are receipts from activities related to its charitable, etc., functions—subject to certain exceptions, and (2) no more than 3								
		its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses aby the organization after June 30, 1975. See section 509(a)(2). (Also complete the <b>Support Schedule</b> in Part IV-A.)								
3		An organization that is not controlled by any disqualified persons (other than foundation managers) and supports of described in: (1) lines 5 through 12 above; or (2) section 501(c)(4), (5), or (6), if they meet the test of section 50 section 509(a)(3).)	rganiz 9(a)(2)	ations . (See						
		Provide the following information about the supported organizations. (See page 5 of the instructions.)								
		(a) Name(s) of supported organization(s)  (b) Line num from about								
4	П	An organization organized and operated to test for public safety. Section 509(a)(4). (See page 5 of the instructions.)								

Part IV-A Support Schedule (Complete only if you checked a box on line 10, 11, or 12.) Use cash method of accounting. Note: You may use the worksheet in the instructions for converting from the accrual to the cash method of accounting.

Cale	endar year (or fiscal year beginning in)	(a) 2003	<b>(b)</b> 2002	(c) 2001	(d) 2000	(e) Total
15	Gifts, grants, and contributions received. (Do not include unusual grants. See line 28.).	4,163	2,210			6,293
16	Membership fees received					
17	Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is related to the organization's charitable, etc., purpose					
18	Gross income from interest, dividends, amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975					
19	Net income from unrelated business activities not included in line 18					
20	Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf.					
21	The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge.					
22	Other income. Attach a schedule. Do not					
	include gain or (loss) from sale of capital assets					
23	Total of lines 15 through 22	4,163	2,130			6,293
24	Line 23 minus line 17	4,163	2,130			6,293
25	Enter 1% of line 23	42	21		1	400
26	Organizations described on lines 10 or 11:	a Enter 2% of	amount in column	n (e), line 24	> 26	ia 126
b	Prepare a list for your records to show the name governmental unit or publicly supported organizamount shown in line 26a. <b>Do not file this list wi</b>	zation) whose tota th your return. Er	gifts for 2000 the	rough 2003 exce these excess am	eded the nounts ▶ 26	
c d	Total support for section 509(a)(1) test: Enter line Add: Amounts from column (e) for lines: 18				>   20	0,200
u					▶ 26	
е	Public support (line 26c minus line 26d total)		20D		26	<u> </u>
	Public support percentage (line 26e (numera	tor) divided by li	ne 26c (denomin		26	
	Organizations described on line 12: a Fo person," prepare a list for your records to show Do not file this list with your return. Enter the	r amounts include the name of, and t	ed in lines 15, 16	6, and 17 that v	vere received f	rom a "disqualified
	(2003) (2002)		(2001)		. (2000)	
b	For any amount included in line 17 that was received show the name of, and amount received for each (Include in the list organizations described in lines the difference between the amount received and amounts) for each year:	ved from each pers year, that was mor 5 through 11, as w	on (other than "die than the <b>larger</b> ( ell as individuals.) I	squalified person of (1) the amount <b>Do not file this li</b>	s"), prepare a lis on line 25 for th st with your ret	st for your records to ne year or (2) \$5,000. urn. After computing
	(2003) (2002)		(2001)		(2000)	
С	Add: Amounts from column (e) for lines: 15		16		▶ 27	c l
d		and line 27b total				
е	Public support (line 27c total minus line 27d to				• • •	
f	Total support for section 509(a)(2) test: Enter a					
g	Public support percentage (line 27e (numera	tor) divided by li	ne 27f (denomin	ator))	> 27	g %
h	Investment income percentage (line 18, colu	mn (e) (numerato	or) divided by lin	e 27f (denomin	ator)) . ▶ 27	h %
28	<b>Unusual Grants:</b> For an organization describe prepare a list for your records to show, for eac description of the nature of the grant. <b>Do not f</b>	ch year, the name	of the contribute	or, the date and	amount of the	e grant, and a brief

Pa	rt VI-A Lobbying Expenditures by El (To be completed ONLY by an					instructions.)	
Che	ck ▶ a ☐ if the organization belongs to an affilia					nd "limited control"	provisions apply.
	Limits on Lobbyi (The term "expenditures" mea	-				(a) Affiliated group totals	(b) To be completed for ALL electing organizations
36	Total lobbying expenditures to influence public	•			36		J. ga
37	Total lobbying expenditures to influence a legis				37		
38	Total lobbying expenditures (add lines 36 and				38		
39					39		
40	Total exempt purpose expenditures (add lines				40		
41	Lobbying nontaxable amount. Enter the amount	•		• • •			
		obbying nontaxa	_				100
		of the amount on		)			
	Over \$500,000 but not over \$1,000,000 . \$100,000	000 plus 15% of th	ne excess over \$5	500,000			and the second
	Over \$1,000,000 but not over \$1,500,000 . \$175,	000 plus 10% of the	e excess over \$1,	000,000	41		
	Over \$1,500,000 but not over \$17,000,000. \$225,0	000 plus 5% of the	e excess over \$1,	500,000			
		0,000					
42	Grassroots nontaxable amount (enter 25% of I				42		
43	Subtract line 42 from line 36. Enter -0- if line 4				43 44		
44	Subtract line 41 from line 38. Enter -0- if line 4	1 is more than lin	ie 38		44		
	Caution: If there is an amount on either line 43	B or line 44, vou n	nust file Form 47	20.			
		eraging Period		······			
	(Some organizations that made a section See the instructions for	n 501(h) election	do not have to d	complete all			elow.
		Lobi	bying Expenditu	ıres During	4-Ye	ar Averaging Pe	riod
	Calendar year (or fiscal year beginning in) ▶	<b>(a)</b> 2004	<b>(b)</b> 2003	(c) 2002		<b>(d)</b> 2001	<b>(e)</b> Total
45	Lobbying nontaxable amount						
46	Lobbying ceiling amount (150% of line 45(e))						
47	Total lobbying expenditures						
48	Grassroots nontaxable amount						
49	Grassroots ceiling amount (150% of line 48(e))	The state of the s					
50	Grassroots lobbying expenditures						
Pa	t VI-B Lobbying Activity by Nonelec	ting Public Ch	narities	<u> </u>			
	(For reporting only by organiza	tions that did r	not complete I	art VI-A) (	See	page 11 of the	e instructions.)
Duri	ng the year, did the organization attempt to influ		· · · · · · · · · · · · · · · · · · ·				
atter	mpt to influence public opinion on a legislative m	natter or referendu	um, through the	use of:	anig a	<sup>ny</sup> Yes No	Amount
а	Volunteers					1	
b	Paid staff or management (Include compensation	on in expenses re	ported on lines	<b>c</b> through <b>h</b>	 .) .   .	✓	
С	No. 13 Process Control of the Contro						
d	Mailings to members, legislators, or the public					. 1	
е	Publications, or published or broadcast statement					. 🗸	
f	Grants to other organizations for lobbying purp					. 🗸	
g	Direct contact with legislators, their staffs, gove					. 🗸	
h	Rallies, demonstrations, seminars, conventions	, speeches, lectur	es, or any other	means .			NONE
I	Total lobbying expenditures (Add lines <b>c</b> through "Yes" to any of the above, also attach a state	JN <b>N.</b> ) , , , , . ement diving a de	tailed description	n of the loh	 hvina	activities	NONE
		Cincin giving a de	ranea descriptio	TO THE TOD	Symid	activities.	

Par	t V				ons and Relationships With Noncharital	ble Exemp
51	Did			11 of the instructions.)	e following with any other organization describ	ned in section
-					tion 527, relating to political organizations?	300 W 000 W
а				to a noncharitable exempt or		Yes No
u		Cash		to a nonchantable exempt of	51a(	<del></del>
		Other assets .			a(ii)	12
h		er transactions:				<u> </u>
b			an of access with a		ration b(i)	√
				noncharitable exempt organiz		
				ritable exempt organization ,	b(iii	
				her assets	b(iv	· /
						<u> </u>
	(v)					
_				ship or fundraising solicitations		
C				sts, other assets, or paid emp		<del>_</del>
d	goo	ds, other assets, o	or services given by	y the reporting organization. If	le. Column (b) should always show the fair market the organization received less than fair market ods, other assets, or services received:	et value of th t value in ar
(a		(b)		(c)	(d)	
Line	no.	Amount involved	Name of non	charitable exempt organization	Description of transfers, transactions, and sharing a	arrangements
			<u></u>			
				3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3		
	•					
	des	cribed in section 50 (es," complete the	01(c) of the Code (	other than section 501(c)(3)) or	one or more tax-exempt organizations in section 527? ▶ ☐ Ye	es 🗹 No
		(a) Name of organiz	ration	(b) Type of organization	(c) Description of relationship	
•••						

2004 Form 990-EZ Schedule A Part III Question 3a

Give Something Back International Foundation

The Give Something Back International Foundation does make grants for scholarships to needy and disadvantaged primary and secondary school students from around the world. We work through existing nonprofit NGO organizations within various countries. We are currently working only in Thailand and Vietnam. We work with the International Support Group in Bangkok, Thailand and with the Saigon Children's Charity in Saigon, Vietnam. The staffs from these organizations interview teachers, students and their families to determine income eligibility and qualifications. We provide scholarships for students that have dropped out of school because of economic hardship.

EIN: 30-0125384

We also provide grants to schools that participate in our Global Virtual Classroom program. We make these grants based upon a panel of international judges that judge the collaborative work of teams of students from around the world that participate in the design of a website. We present up to 9 awards for primary schools and 9 awards for secondary schools annually.

#### Schedule B (Form 990, 990-EZ,

or 990-PF)

Department of the Treasury Internal Revenue Service

### **Schedule of Contributors**

Supplementary Information for line 1 of Form 990, 990-EZ, and 990-PF (see instructions)

OMB No. 1545-0047

2004

Employer identification number Name of organization 30:0125384 **Give Something Back International Foundation** Organization type (check one): Section: Filers of: **✓** 501(c)(**3**) (enter number) organization Form 990 or 990-EZ 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation ☐ 527 political organization 501(c)(3) exempt private foundation Form 990-PF 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 organizations filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. (Complete Parts I and II.) Special Rules-For a section 501(c)(3) organization filing Form 990, or Form 990-EZ, that met the 331/3/8 support test of the regulations under sections 509(a)(1)/170(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the greater of \$5,000 or 2% of the amount on line 1 of these forms. (Complete Parts I and II.) For a section 501(c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that received from any one contributor, during the year, aggregate contributions or bequests of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. (Complete Parts I, II, and 111.) For a section 501(c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that received from any one contributor, during the year, some contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not aggregate to 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. Do not complete any of the Parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year.)

Caution: Organizations that are not covered by the General Rule and/or the Special Rules do not file Schedule B (Form 990, 990-EZ, or 990-PF), but they **must** check the box in the heading of their Form 990, Form 990-EZ, or on line 2 of their Form 990-PF, to certify that they do not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

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Name of organization
Give Something Back International Foundation

Employer identification number 30 0125384

Part I	Contributors (See Specific Instructions.)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
_1_	IDT Foundation 520 Broad Street Newark, NJ 07102	\$ <b>30,000</b>	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		- <b>\$</b>	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		. \$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		. \$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)