

PUBLIC DISCLOSURE COPY

Form **990**Department of the Treasury
Internal Revenue Service**Return of Organization Exempt From Income Tax**

OMB No. 1545-0047

2018**Open to Public Inspection**

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.

A For the 2018 calendar year, or tax year beginning <u>07/01</u> , 2018, and ending <u>06/30</u> , 20 <u>19</u>	
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 <u>LIONS CLUBS INTERNATIONAL FOUNDATION</u>
	Doing business as <u>LCIF</u>
	Number and street (or P.O. box if mail is not delivered to street address) Room/suite <u>300 WEST 22ND STREET</u>
	City or town, state or province, country, and ZIP or foreign postal code <u>OAK BROOK, IL 60523-8842</u>
	F Name and address of principal officer: <u>REBECCA DAOU</u> <u>SAME AS C ABOVE</u>
D Employer identification number <u>23-7030455</u>	
E Telephone number <u>(630) 468-6901</u>	
G Gross receipts \$ <u>346,939,332</u>	
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: ▶ <u>WWW.LCIF.ORG</u>	
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: <u>1968</u>	
M State of legal domicile: <u>IL</u>	

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: <u>TO SUPPORT THE EFFORTS OF LIONS CLUBS WORLDWIDE IN SERVING THEIR LOCAL COMMUNITIES AND THE WORLD COMMUNITY AS THEY CARRY OUT ESSENTIAL HUMANITARIAN SERVICE PROJECTS.</u>
	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 <u>22</u>
	4 Number of independent voting members of the governing body (Part VI, line 1b) 4 <u>22</u>
	5 Total number of individuals employed in calendar year 2018 (Part V, line 2a) 5 <u>77</u>
	6 Total number of volunteers (estimate if necessary) 6 <u>21,598</u>
	7a Total unrelated business revenue from Part VIII, column (C), line 12 7a <u>89,202</u>
b Net unrelated business taxable income from Form 990-T, line 38 7b <u>0</u>	
Revenue	8 Contributions and grants (Part VIII, line 1h) <u>48,057,506</u>
	9 Program service revenue (Part VIII, line 2g) <u>0</u>
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) <u>18,595,126</u>
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) <u>88,059</u>
	12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) <u>66,740,691</u>
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1–3) <u>45,788,474</u>
	14 Benefits paid to or for members (Part IX, column (A), line 4)
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10) <u>5,106,316</u>
	16a Professional fundraising fees (Part IX, column (A), line 11e) <u>558,750</u>
	b Total fundraising expenses (Part IX, column (D), line 25) ▶ <u>10,500,216</u>
	17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e) <u>13,145,266</u>
	18 Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25) <u>64,598,806</u>
19 Revenue less expenses. Subtract line 18 from line 12 <u>2,141,885</u>	
Net Assets or Fund Balances	20 Total assets (Part X, line 16) <u>313,143,351</u>
	21 Total liabilities (Part X, line 26) <u>29,669,258</u>
	22 Net assets or fund balances. Subtract line 21 from line 20 <u>283,474,093</u>

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	Date			
	Type or print name and title <u>REBECCA DAOU, LCIF EXECUTIVE ADMINISTRATOR</u>				
Paid Preparer Use Only	Print/Type preparer's name <u>NICOLE BENCIK</u>	Preparer's signature <i>Nicole Bencik</i>	Date <u>2/5/2020</u>	Check <input type="checkbox"/> if self-employed	PTIN <u>P00756195</u>
	Firm's name ▶ <u>CROWE LLP</u>	Firm's EIN ▶ <u>35-0921680</u>			
	Firm's address ▶ <u>225 WEST WACKER DRIVE, SUITE 2600, CHICAGO, IL 60606-1224</u>	Phone no. <u>(312) 899-7000</u>			

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

For Paperwork Reduction Act Notice, see the separate instructions.

Cat. No. 11282Y

Form **990** (2018)

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

OMB No. 1545-1709

► **File a separate application for each return.**
 ► **Go to www.irs.gov/Form8868 for the latest information.**

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

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

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

		Enter filer's identifying number, see instructions
Type or print File by the due date for filing your return. See instructions.	Name of exempt organization or other filer, see instructions. LIONS CLUBS INTERNATIONAL FOUNDATION	Employer identification number (EIN) or 23-7030455
	Number, street, and room or suite no. If a P.O. box, see instructions. 300 WEST 22ND STREET	Social security number (SSN)
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. OAK BROOK, IL 60523-8842	

Enter the Return Code for the return that this application is for (file a separate application for each return) **0 1**

Application Is For	Return Code	Application Is For	Return Code
Form 990 or Form 990-EZ	01	Form 990-T (corporation)	07
Form 990-BL	02	Form 1041-A	08
Form 4720 (individual)	03	Form 4720 (other than individual)	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

- The books are in the care of ► [REBECCA DAOU](#)

Telephone No. ► [\(630\) 468-6901](#) Fax No. ►

- If the organization does not have an office or place of business in the United States, check this box ► ☐
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If this is for the whole group, check this box ► ☐ . If it is for part of the group, check this box ► ☐ and attach a list with the names and EINs of all members the extension is for.

- 1** I request an automatic 6-month extension of time until [05/15](#), 20 [20](#), to file the exempt organization return for the organization named above. The extension is for the organization's return for:
- ☐ calendar year 20 ____ or
- ☒ tax year beginning [07/01](#), 20 [18](#), and ending [06/30](#), 20 [19](#).

- 2** If the tax year entered in line 1 is for less than 12 months, check reason: ☐ Initial return ☐ Final return
☐ Change in accounting period

3a If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	3a	\$
b If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	3b	\$
c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	3c	\$

Caution: If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

Part III Statement of Program Service AccomplishmentsCheck if Schedule O contains a response or note to any line in this Part III ☐ Yes ☒ No

- 1** Briefly describe the organization's mission:
TO SUPPORT THE EFFORTS OF LIONS CLUBS AND PARTNERS IN SERVING COMMUNITIES LOCALLY AND GLOBALLY,
GIVING HOPE AND IMPACTING LIVES THROUGH HUMANITARIAN SERVICE PROJECTS AND GRANTS.
-
- 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 \$ 21,545,892 including grants of \$ 19,319,133) (Revenue \$ 0)

HUMANITARIAN GRANTS AND PROGRAMS - AS MEMBERS OF THEIR COMMUNITY, LIONS ARE UNIQUELY POSITIONED TO
IDENTIFY LOCAL INITIATIVES THAT WILL IMPROVE THE LIVES OF THE PEOPLE AROUND THEM WHO ARE UNDERSERVED
AND VULNERABLE. EACH YEAR LIONS CLUB MEMBERS DESIGN AND IMPLEMENT PROJECTS THAT IMPROVE THE QUALITY
OF LIFE FOR PEOPLE WITH DISABILITIES, THE ELDERLY, THE CHRONICALLY ILL, AT-RISK YOUTH, AND
ECONOMICALLY DISADVANTAGED MEMBERS OF THEIR COMMUNITIES. LCIF HUMANITARIAN GRANTS ARE COMBINED WITH
LOCALLY RAISED FUNDS, TYPICALLY SUPPORTING CAPITAL CONSTRUCTIONS OR EQUIPMENT NEEDS. IN ADDITION,
LCIF DEVELOPS GLOBAL INITIATIVES AND PARTNERSHIPS BASED ON COMMON LOCAL NEEDS, FOR EXAMPLE THROUGH
THE OPENING EYES PROGRAM WITH SPECIAL OLYMPICS LIONS HAVE SCREENED THE VISION OF MORE THAN 440,000
ATHLETES IN 93 DIFFERENT COUNTRIES. ALSO, THROUGH INVOLVEMENT WITHIN THE MEASLES INITIATIVE AND
GAVI, THE VACCINE ALLIANCE SINCE 2010, LIONS HELPED SUPPORT THE VACCINATION OF MILLIONS OF CHILDREN
IN SEVERAL COUNTRIES.

4b (Code:) (Expenses \$ 14,147,822 including grants of \$ 11,827,355) (Revenue \$ 0)

SIGHTFIRST - ACCORDING TO INTERNATIONAL EXPERTS, 80% OF ALL VISUAL IMPAIRMENT CAN BE AVOIDED.
SIGHTFIRST IS THE FOUNDATION'S PROGRAM WHICH AIMS TO SUSTAINABLY AND SYSTEMATICALLY COMBAT
PREVENTABLE BLINDNESS AND VISUAL IMPAIRMENT AROUND THE WORLD. THROUGH SIGHTFIRST, LCIF FUNDS
PROJECTS THAT BUILD COMPREHENSIVE EYE CARE SYSTEMS TO FIGHT THE MAJOR CAUSES OF BLINDNESS/VISUAL
IMPAIRMENT AND CARE FOR BLIND AND VISUALLY IMPAIRED PERSONS. THE PROGRAM SUPPORTS HIGH QUALITY,
SUSTAINABLE PROJECTS THAT DELIVER EYE CARE SERVICES, TRAIN PERSONNEL, DEVELOP INFRASTRUCTURE AND/OR
PROVIDE REHABILITATION AND EDUCATION IN UNDER SERVED COMMUNITIES. IN SUMMARY, SIGHTFIRST HAS
INVESTED US\$365.45 MILLION IN 1,360 PROJECTS IN 117 COUNTRIES, RESULTING IN:

* OVER 9.3 MILLION CATARACT SURGERIES

*MORE THAN 293 MILLION TREATMENTS TO ELIMINATE ONCHOCERCIASIS

*OVER 178 MILLION TREATMENTS TO HALT THE BLINDING EFFECTS OF TRACHOMA.

(CONTINUED ON SCHEDULE O)

4c (Code:) (Expenses \$ 5,423,921 including grants of \$ 2,937,656) (Revenue \$ 458,319)

LIONS QUEST - GRANTS ARE ALSO AWARDED TO EXPAND A SOCIAL EMOTIONAL LEARNING (SEL) PROGRAM, LIONS
QUEST, WHICH FOCUSES ON DELIVERING LIFE SKILLS TRAINING IN EDUCATIONAL SETTINGS FOR GRADES PRE-K
THROUGH HIGH SCHOOL. MORE THAN 18 MILLION STUDENTS AND 700,000 EDUCATORS IN MORE THAN 109
COUNTRIES HAVE BEEN POSITIVELY IMPACTED THROUGH THIS PROGRAM.

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

(Expenses \$ 4,643,499 including grants of \$ 4,643,499) (Revenue \$ 0)

4e Total program service expenses **▶** 45,761,134

Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1 ✓	
2 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	✓
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3	✓
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	✓
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 Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5	✓
6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6	✓
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7	✓
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8	✓
9 Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9	✓
10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10 ✓	
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a ✓	
b Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b ✓	
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? If "Yes," complete Schedule D, Part VIII	11c	✓
d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	✓
e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e ✓	
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f ✓	
12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a ✓	
b Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	✓
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	✓
14a Did the organization maintain an office, employees, or agents outside of the United States?	14a ✓	
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV.	14b ✓	
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15 ✓	
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV.	16	✓
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17	✓
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	✓
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19	✓
20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a	✓
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	
21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21 ✓	

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

Part V Statements Regarding Other IRS Filings and Tax ComplianceCheck 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	1a	26
b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	0
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	

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	77
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	✓
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	✓
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b	✓
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	✓
b	If "Yes," enter the name of the foreign country: IN, JA 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	✓
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b	✓
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	✓
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	✓
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	✓
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	✓
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f	✓
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	✓
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in 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 instructions and file Form 4720, Schedule N.	15	✓
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	✓

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

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

Section A. Governing Body and Management

	Yes	No
1a Enter the number of voting members of the governing body at the end of the tax year 1a 22		
If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.		
b Enter the number of voting members included in line 1a, above, who are independent 1b 22		
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	<input checked="" type="checkbox"/>
3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person?	3	<input checked="" type="checkbox"/>
4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4	<input checked="" type="checkbox"/>
5 Did the organization become aware during the year of a significant diversion of the organization's assets?	5	<input checked="" type="checkbox"/>
6 Did the organization have members or stockholders?	6	<input checked="" type="checkbox"/>
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	<input checked="" type="checkbox"/>
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	<input checked="" type="checkbox"/>
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a The governing body?	8a	<input checked="" type="checkbox"/>
b Each committee with authority to act on behalf of the governing body?	8b	<input checked="" type="checkbox"/>
9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9	<input checked="" type="checkbox"/>

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	<input checked="" type="checkbox"/>
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	<input checked="" type="checkbox"/>
b Describe in 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	<input checked="" type="checkbox"/>
b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	<input checked="" type="checkbox"/>
c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	<input checked="" type="checkbox"/>
13 Did the organization have a written whistleblower policy?	13	<input checked="" type="checkbox"/>
14 Did the organization have a written document retention and destruction policy?	14	<input checked="" type="checkbox"/>
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	<input checked="" type="checkbox"/>
b Other officers or key employees of the organization	15b	<input checked="" type="checkbox"/>
If "Yes" to line 15a or 15b, describe the process in 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	<input checked="" type="checkbox"/>
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 ► [AL, AR, AZ, CA, \(CONTINUED ON SCHEDULE O\)](#)

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 in Schedule O)

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

20 State the name, address, and telephone number of the person who possesses the organization's books and records ►
[REBECCA DAOU, 300 WEST 22ND STREET, OAK BROOK, IL 60523-8842, \(630\) 468-6901](#)

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent ContractorsCheck if Schedule O contains a response or note to any line in this Part VII ☐**Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees****1a** Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

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

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

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

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

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

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

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) DR. NARESH AGGARWAL LCIF CHAIRPERSON	20.0 20.0	✓		✓				0	0	0
(2) ROBERT CORLEW VICE CHAIRPERSON	2.0 0.0	✓		✓				0	4,650	0
(3) VIJAY KUMAR RAJU SECRETARY	2.0 0.0	✓		✓				0	0	0
(4) SHINJI KAYAMORI TREASURER	2.0 0.0	✓		✓				0	0	0
(5) GUDRUN YNGVADOTTIR LCI INTERNATIONAL PRESIDENT	5.0 35.0	✓						0	0	0
(6) CLEMENT F KUSIAK TRUSTEE	2.0 0.0	✓						0	0	0
(7) GARNET E DAVIS TRUSTEE	2.0 0.0	✓						0	0	0
(8) RAMIRO VELA VILLARREAL TRUSTEE	2.0 0.0	✓						0	0	0
(9) PHILIPPE GERONDAL TRUSTEE	2.0 0.0	✓						0	0	0
(10) BARRY J PALMER TRUSTEE	2.0 0.0	✓						0	0	0
(11) ALEXIS VINCENT GOMÈS TRUSTEE	2.0 0.0	✓						0	0	0
(12) ROBERT S LITTLEFIELD TRUSTEE	2.0 0.0	✓						0	0	0
(13) ARUNA ABHEY OSWAL TRUSTEE	2.0 0.0	✓						0	0	0
(14) CHING-LI LEE TRUSTEE	2.0 0.0	✓						0	0	0

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(15) CHIKAO SUZUKI TRUSTEE	2.0 0.0	<input checked="" type="checkbox"/>						0	0	0
(16) IN-KYO OH TRUSTEE	2.0 0.0	<input checked="" type="checkbox"/>						0	0	0
(17) JAMES E ERVIN TRUSTEE	2.0 0.0	<input checked="" type="checkbox"/>						0	0	0
(18) DR. JITSUHIRO YAMADA TRUSTEE	2.0 0.0	<input checked="" type="checkbox"/>						0	0	0
(19) FÁBIO DE ALMEIDA TRUSTEE	2.0 0.0	<input checked="" type="checkbox"/>						0	0	0
(20) JUNG-YUL CHOI FIRST VICE PRESIDENT	5.0 35.0	<input checked="" type="checkbox"/>						0	0	0
(21) HAYNES H TOWNSEND SECOND VICE PRESIDENT	5.0 35.0	<input checked="" type="checkbox"/>						0	3,900	0
(22) BRIAN E SHEEHAN THIRD VICE-PRESIDENT	5.0 35.0	<input checked="" type="checkbox"/>						0	0	0
(23) REBECCA DAOU LCIF EXECUTIVE ADMINISTRATOR	40.0 0.0			<input checked="" type="checkbox"/>				210,818	0	58,405
(24) JOHNNY COOPER CHIEF OF PHILANTHROPY	40.0 0.0					<input checked="" type="checkbox"/>		127,454	0	16,037
(25)										
1b Sub-total								338,272	8,550	74,442
c Total from continuation sheets to Part VII, Section A								0	0	0
d Total (add lines 1b and 1c)								338,272	8,550	74,442

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **2**

- 3** Did the organization list any **former** officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual **3** ☒
- 4** For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual **4** ☒
- 5** Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person **5** ☒

Section B. Independent Contractors

- 1** Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation
INTERNATIONAL ASSOCIATION OF LIONS CLUBS , 300 W. 22ND STREET , OAK BROOK, IL 60523	PROFESSIONAL SERVICES	2,845,003
COMMUNITY COUNSELLING SERVICES, 155 N WACKER DRIVE, SUITE 1790, CHICAGO, IL 60606	FUNDRAISING LOAN STAFF SERVICES	1,366,978
WORLD HEALTH ORGANIZATION, 20 AVENUE APPIA, 1211 GENEVA 27, SZ	TECHNICAL SUPPORT	645,767
CHANGING OUR WORLD, INC. , 220 EAST 42ND STREET, 5TH FLOOR, NEW YORK, NY 10017	CONSULTING SERVICES	526,999
AURA INNOVATIVE TECHNOLOGY, 223 W JACKSON BLVD, SUITE 975, CHICAGO, IL 60606	PROFESSIONAL SERVICES	203,090
2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization 15		

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	1a	Federated campaigns	1a				
	b	Membership dues	1b				
	c	Fundraising events	1c				
	d	Related organizations	1d				
	e	Government grants (contributions)	1e				
	f	All other contributions, gifts, grants, and similar amounts not included above	1f	50,960,795			
	g	Noncash contributions included in lines 1a-1f: \$		61,520			
	h	Total. Add lines 1a-1f		50,960,795			
Program Service Revenue	Business Code						
	2a						
	b						
	c						
	d						
	e						
	f	All other program service revenue .		0	0	0	0
	g	Total. Add lines 2a-2f		0			
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts)		3,955,184		89,202	3,865,982
	4	Income from investment of tax-exempt bond proceeds					
	5	Royalties					
		(i) Real	(ii) Personal				
	6a	Gross rents					
	b	Less: rental expenses					
	c	Rental income or (loss)		0	0		
	d	Net rental income or (loss)					
		(i) Securities	(ii) Other				
	7a	Gross amount from sales of assets other than inventory		291,404,800			
	b	Less: cost or other basis and sales expenses		259,657,065			
	c	Gain or (loss)		31,747,735	0		
	d	Net gain or (loss)		31,747,735			31,747,735
	8a	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					
	9a	Gross income from gaming activities. See Part IV, line 19					
	b	Less: direct expenses					
	c	Net income or (loss) from gaming activities					
	10a	Gross sales of inventory, less returns and allowances		742,472			
	b	Less: cost of goods sold		323,358			
	c	Net income or (loss) from sales of inventory		419,114	419,114		
Miscellaneous Revenue			Business Code				
11a	CURRENCY EXCHANGE LOSS		900099	(166,297)		(166,297)	
b	LIONS QUEST TRAINING WORKSHOPS, NET OF COSTS		900099	39,205	39,205		
c							
d	All other revenue		900099	3,173	0	3,173	
e	Total. Add lines 11a-11d			(123,919)			
12	Total revenue. See instructions			86,958,909	458,319	89,202	35,450,593

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	6,389,855	6,389,855		
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	32,337,788	32,337,788		
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	315,732	221,012	47,360	47,360
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	4,040,816	1,713,650	1,203,166	1,124,000
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	704,502	294,069	215,087	195,346
9 Other employee benefits	580,085	242,136	177,102	160,847
10 Payroll taxes	309,009	109,283	91,696	108,030
11 Fees for services (non-employees):				
a Management				
b Legal	31,878		21,755	10,123
c Accounting	65,857		65,857	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees	581,728		581,728	
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)	7,672,186	2,876,380	1,661,279	3,134,527
12 Advertising and promotion	227,845	178,633		49,212
13 Office expenses	1,223,955	80,593	215,695	927,667
14 Information technology				
15 Royalties				
16 Occupancy				
17 Travel	3,640,973	981,047	746,196	1,913,730
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	101,959	30,336		71,623
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	143,542	97,189	46,353	
23 Insurance				
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a RECOGNITION	2,848,937	82,607	11,159	2,755,171
b				
c				
d				
e All other expenses	134,989	126,556	5,853	2,580
25 Total functional expenses. Add lines 1 through 24e	61,351,636	45,761,134	5,090,286	10,500,216
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)				

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		1	
	2 Savings and temporary cash investments	15,158,714	2	5,098,637
	3 Pledges and grants receivable, net	6,740,198	3	9,217,751
	4 Accounts receivable, net	109,494	4	67,609
	5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L	0	5	0
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L		6	0
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	1,204,969	9	1,110,058
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 5,056,266		
	b Less: accumulated depreciation	10b 4,554,373	459,990	10c 501,893
	11 Investments—publicly traded securities	187,147,200	11	281,447,395
	12 Investments—other securities. See Part IV, line 11	101,466,467	12	20,409,676
	13 Investments—program-related. See Part IV, line 11	0	13	0
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11	856,319	15	1,036,730
16 Total assets. Add lines 1 through 15 (must equal line 34)	313,143,351	16	318,889,749	
Liabilities	17 Accounts payable and accrued expenses	511,441	17	560,954
	18 Grants payable	27,441,104	18	25,726,013
	19 Deferred revenue		19	
	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 current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	0
	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	1,716,713	25	1,619,166
	26 Total liabilities. Add lines 17 through 25	29,669,258	26	27,906,133
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	224,787,866	27	239,427,311
	28 Temporarily restricted net assets	58,186,227	28	50,540,430
	29 Permanently restricted net assets	500,000	29	1,015,875
	Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds		30	
	31 Paid-in or capital surplus, or land, building, or equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
	33 Total net assets or fund balances	283,474,093	33	290,983,616
	34 Total liabilities and net assets/fund balances	313,143,351	34	318,889,749

Form **990** (2018)

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	86,958,909
2	Total expenses (must equal Part IX, column (A), line 25)	2	61,351,636
3	Revenue less expenses. Subtract line 2 from line 1	3	25,607,273
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	283,474,093
5	Net unrealized gains (losses) on investments	5	(19,586,263)
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	1,488,513
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	290,983,616

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 in 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		✓
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	✓	
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 in Schedule O.	✓	
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? . . .		✓
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 in Schedule O and describe any steps taken to undergo such audits.		

Form **990** (2018)

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

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

► Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2018

Open to Public Inspection

Name of the organization

LIONS CLUBS INTERNATIONAL FOUNDATION

Employer identification number

23-7030455

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

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

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

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

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

Cat. No. 11285F

Schedule A (Form 990 or 990-EZ) 2018

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) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	39,796,459	39,484,613	39,060,376	48,057,506	50,960,795	217,359,749
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0
3 The value of services or facilities furnished by a governmental unit to the organization without charge						0
4 Total. Add lines 1 through 3	39,796,459	39,484,613	39,060,376	48,057,506	50,960,795	217,359,749
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)						0
6 Public support. Subtract line 5 from line 4						217,359,749

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
7 Amounts from line 4	39,796,459	39,484,613	39,060,376	48,057,506	50,960,795	217,359,749
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	6,044,616	5,680,240	4,103,311	3,409,693	3,865,982	23,103,842
9 Net income from unrelated business activities, whether or not the business is regularly carried on	0	0	0	0	0	0
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	4,897	5,015	4,921	33,028	3,173	51,034
11 Total support. Add lines 7 through 10						240,514,625
12 Gross receipts from related activities, etc. (see instructions)					12	3,676,801
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here						<input type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2018 (line 6, column (f) divided by line 11, column (f))	14	90.37 %
15 Public support percentage from 2017 Schedule A, Part II, line 14	15	87.16 %
16a 33 1/3% support test—2018. 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—2017. 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—2018. 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—2017. 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"/>	

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) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(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) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(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 in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						
14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

15 Public support percentage for 2018 (line 8, column (f), divided by line 13, column (f))	15	%
16 Public support percentage from 2017 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2018 (line 10c, column (f), divided by line 13, column (f))	17	%
18 Investment income percentage from 2017 Schedule A, Part III, line 17	18	%
19a 33 1/3% support tests—2018. 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 <input type="checkbox"/>		
b 33 1/3% support tests—2017. 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 <input type="checkbox"/>		
20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions <input type="checkbox"/>		

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

	Yes	No
1 Are all of the organization's supported organizations listed by name in the organization's governing documents? <i>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.</i>		
2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>		
3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer (b) and (c) below.</i>		
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)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>		
c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>		
4a Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.</i>		
b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>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.</i>		
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)? <i>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.</i>		
5a Did the organization add, substitute, or remove any supported organizations during the tax year? <i>If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).</i>		
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? <i>If "Yes," provide detail in Part VI.</i>		
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? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
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))? <i>If "Yes," provide detail in Part VI.</i>		
b Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If "Yes," provide detail in Part VI.</i>		
c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? <i>If "Yes," provide detail in Part VI.</i>		
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)? <i>If "Yes," answer 10b below.</i>		
b Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)</i>		

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 in (b) and (c) below, the governing body of a supported organization?		
b A family member of a person described in (a) above?		
c A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI .		

Section B. Type I Supporting Organizations

	Yes	No
1 Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.		
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 in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.		

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 government entity (see instructions).			
2 Activities Test. Answer (a) and (b) below.			
a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.			
b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.			
3 Parent of Supported Organizations. Answer (a) and (b) 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? 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 (explain in detail in Part VI):			
2 Acquisition indebtedness applicable to non-exempt-use assets	2		
3 Subtract line 2 from line 1d.	3		
4 Cash deemed held for exempt use. Enter 1-1/2% 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 .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 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 <input type="checkbox"/> 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 or 990-EZ) 2018

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		
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity		
3	Administrative expenses paid to accomplish exempt purposes of supported organizations		
4	Amounts paid to acquire exempt-use assets		
5	Qualified set-aside amounts (prior IRS approval required)		
6	Other distributions (describe in Part VI). See instructions.		
7	Total annual distributions. Add lines 1 through 6.		
8	Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.		
9	Distributable amount for 2018 from Section C, line 6		
10	Line 8 amount divided by line 9 amount		

Section E—Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2018	(iii) Distributable Amount for 2018
1 Distributable amount for 2018 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2018 (reasonable cause required—explain in Part VI). See instructions.			
3 Excess distributions carryover, if any, to 2018			
a From 2013			
b From 2014			
c From 2015			
d From 2016			
e From 2017			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2018 distributable amount			
i Carryover from 2013 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4 Distributions for 2018 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2018 distributable amount			
c Remainder. Subtract lines 4a and 4b from 4.			
5 Remaining underdistributions for years prior to 2018, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI . See instructions.			
6 Remaining underdistributions for 2018. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI . See instructions.			
7 Excess distributions carryover to 2019. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2014 . . .			
b Excess from 2015 . . .			
c Excess from 2016 . . .			
d Excess from 2017 . . .			
e Excess from 2018 . . .			

Schedule A (Form 990 or 990-EZ) 2018

Part VI

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.)

Return Reference - Identifier	Explanation						
SCHEDULE A, PART II, LINE 10 - OTHER INCOME	Description	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
	MISCELLANEOUS	4,897	5,015	4,921	33,028	3,173	51,034
	Total	4,897	5,015	4,921	33,028	3,173	51,034

**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

2018

**Open to Public
Inspection**

Name of the organization

LIONS CLUBS INTERNATIONAL FOUNDATION

Employer identification number

23-7030455

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?		<input type="checkbox"/> Yes <input type="checkbox"/> 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?		<input type="checkbox"/> Yes <input type="checkbox"/> 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). <input type="checkbox"/> Preservation of land for public use (e.g., recreation or education) <input type="checkbox"/> Preservation of a historically important land area <input type="checkbox"/> Protection of natural habitat <input type="checkbox"/> Preservation of a certified historic structure <input type="checkbox"/> 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 in (a)	2c
d Number of conservation easements included in (c) acquired after 7/25/06, 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?	<input type="checkbox"/> Yes <input type="checkbox"/> 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 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?	<input type="checkbox"/> Yes <input type="checkbox"/> 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 SFAS 116 (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 SFAS 116 (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 SFAS 116 (ASC 958) relating to these items: a Revenue included on Form 990, Part VIII, line 1 ▶ \$ b Assets included in Form 990, Part X ▶ \$	

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 are a 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 programs
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 on 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	606,700	584,508	525,768	524,607	670,990
b Contributions	515,876				
c Net investment earnings, gains, and losses	29,557	55,322	58,740	1,161	3,617
d Grants or scholarships	12,660	33,130			150,000
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance	1,139,473	606,700	584,508	525,768	524,607

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

- a** Board designated or quasi-endowment ☐ 0.00 %
b Permanent endowment ☐ 89.20 %
c Temporarily restricted endowment ☐ 10.80 %

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:

	Yes	No
(i) unrelated organizations	3a(i)	<input checked="" type="checkbox"/>
(ii) related organizations	3a(ii)	<input checked="" type="checkbox"/>
b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?	3b	<input type="checkbox"/>

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		5,056,266	4,554,373	501,893
e Other				
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				501,893

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) HEDGE FUNDS	13,940,989	END OF YEAR MARKET VALUE
(B) PRIVATE EQUITY FUNDS	6,468,687	END OF YEAR MARKET VALUE
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.) ►	20,409,676	

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. (Column (b) must equal Form 990, Part X, col. (B) line 13.) ►		

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, col. (B) line 15.) ►	

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) CHARITABLE GIFT ANNUITIES	135,012	
(3) DUE TO THE INTERNATIONAL ASSOCIATION OF LIONS CLUBS	1,484,154	
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ►	1,619,166	

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 FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII ☒

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	66,790,918
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains (losses) on investments	2a	(19,586,263)
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII.)	2d	0
e	Add lines 2a through 2d	2e	(19,586,263)
3	Subtract line 2e from line 1	3	86,377,181
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	581,728
b	Other (Describe in Part XIII.)	4b	0
c	Add lines 4a and 4b	4c	581,728
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12.)	5	86,958,909

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	59,281,395
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	(1,488,513)
e	Add lines 2a through 2d	2e	(1,488,513)
3	Subtract line 2e from line 1	3	60,769,908
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	581,728
b	Other (Describe in Part XIII.)	4b	0
c	Add lines 4a and 4b	4c	581,728
5	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18.)	5	61,351,636

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.

[SEE STATEMENT](#)

Part XIII

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.

Return Reference - Identifier	Explanation	
SCHEDULE D, PART XII, LINE 2(D) - OTHER EXPENSES IN AUDITED FINANCIAL STATEMENTS NOT IN FORM 990	(a) Description	(b) Amount
	RECOVERIES OF PRIOR YEAR GRANTS - NETTED AGAINST GRANT EXPENSE ON AUDITED FINANCIAL STATEMENTS	- 1,488,513

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.

Return Reference - Identifier	Explanation
SCHEDULE D, PART V, LINE 4 - INTENDED USES OF ENDOWMENT FUNDS	THE FOUNDATION HAS TWO ENDOWMENT FUNDS. ONE IS FOR THE TREATMENT AND PREVENTION OF BLINDNESS IN THE STATE OF LOUISIANA, AND THE OTHER IS FOR THE BENEFIT OF THE BLIND.
SCHEDULE D, PART X, LINE 2 - FIN 48 (ASC 740) FOOTNOTE	<p>THE FOUNDATION HAS RECEIVED A FAVORABLE DETERMINATION LETTER FROM THE INTERNAL REVENUE SERVICE, STATING THAT IT IS EXEMPT FROM FEDERAL INCOME TAXES UNDER THE PROVISIONS OF SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE (IRC) OF 1986, AS AMENDED, EXCEPT FOR INCOME TAXES PERTAINING TO UNRELATED BUSINESS INCOME. THE FINANCIAL ACCOUNTING STANDARDS BOARD ISSUED GUIDANCE THAT REQUIRES TAX EFFECTS FROM UNCERTAIN TAX POSITIONS TO BE RECOGNIZED IN THE FINANCIAL STATEMENTS ONLY IF THE POSITION IS MORE LIKELY THAN NOT TO BE SUSTAINED IF THE POSITION WERE TO BE CHALLENGED BY A TAXING AUTHORITY.</p> <p>MANAGEMENT HAS DETERMINED THAT THERE ARE NO MATERIAL UNCERTAIN POSITIONS THAT REQUIRE RECOGNITION IN THE FINANCIAL STATEMENTS. ADDITIONALLY, NO PROVISION FOR INCOME TAXES IS REFLECTED IN THESE FINANCIAL STATEMENTS, AS THE FOUNDATION'S UNRELATED BUSINESS TAXABLE INCOME IS EXPECTED TO BE OFFSET BY NET OPERATING LOSSES CARRIED FORWARD FROM PRIOR YEARS. THERE IS NO INTEREST OR PENALTIES RECOGNIZED IN THE FINANCIAL STATEMENTS.</p>

**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

2018

**Open to Public
Inspection**

Name of the organization

LIONS CLUBS INTERNATIONAL FOUNDATION

Employer identification number

23-7030455

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
(1) CENTRAL AMERICA AND THE CARIBBEAN	0	0	PROGRAM SERVICES	GRANTMAKING	338,404
(2) EAST ASIA AND THE PACIFIC	0	0	PROGRAM SERVICES	GRANTMAKING	9,155,449
(3) EUROPE (INCLUDING ICELAND AND GREENLAND)	0	0	PROGRAM SERVICES	GRANTMAKING	2,990,316
(4) MIDDLE EAST AND NORTH AFRICA	0	0	PROGRAM SERVICES	GRANTMAKING	272,265
(5) NORTH AMERICA (CANADA & MEXICO ONLY)	0	0	PROGRAM SERVICES	GRANTMAKING	704,300
(6) RUSSIA AND NEIGHBORING STATES	0	0	PROGRAM SERVICES	GRANTMAKING	616,206
(7) SOUTH AMERICA	0	0	PROGRAM SERVICES	GRANTMAKING	2,191,818
(8) SOUTH ASIA	1	6	PROGRAM SERVICES	GRANTMAKING	6,631,231
(9) SUB-SAHARAN AFRICA	0	0	PROGRAM SERVICES	GRANTMAKING	9,437,799
(10) CENTRAL AMERICA AND THE CARIBBEAN	0	1	PROGRAM SERVICES	PROJECT CONSULTING	20,175
(11) EAST ASIA AND THE PACIFIC	0	2	PROGRAM SERVICES	PROJECT CONSULTING	24,959
(12) SOUTH AMERICA	0	2	PROGRAM SERVICES	PROJECT CONSULTING	48,432
(13) SOUTH ASIA	0	6	PROGRAM SERVICES	PROJECT CONSULTING	136,081
(14) SUB-SAHARAN AFRICA	0	2	PROGRAM SERVICES	PROJECT CONSULTING	58,075
(15) EUROPE (INCLUDING ICELAND AND GREENLAND)	0	0	INVESTMENTS		1,948,978
(16) EAST ASIA AND THE PACIFIC	0	3	ADMINISTRATIVE SUPPORT		145,142
(17)					
3a Subtotal	1	22			34,719,630
b Total from continuation sheets to Part I	0	0			0
c Totals (add lines 3a and 3b)	1	22			34,719,630

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

Cat. No. 50082W

Schedule F (Form 990) 2018

[illegible]

2	Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter	0
3	Enter total number of other organizations or entities	452

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.

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of noncash assistance	(g) Description of noncash assistance	(h) Method of valuation (book, FMV, appraisal, other)
(1)							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							
(13)							
(14)							
(15)							
(16)							
(17)							
(18)							

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 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 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 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 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 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 Instructions for Form 5713; don't file with Form 990)* ☐ **Yes** ☒ **No**

Schedule F (Form 990) 2018

Part II
Grants and Other Assistance to Organizations or Entities Outside the United States (continued)

(a) Name of Organization	(b) IRS code section and EIN	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)		CENTRAL AMERICA AND THE CARIBBEAN	LIONS QUEST - UNODC - EL SALVADOR 2018	149,160	WIRE			
(2)		CENTRAL AMERICA AND THE CARIBBEAN	LIONS CLUBS COMMUNITY SERVICE PROJECTS-II	89,036	WIRE			
(3)		CENTRAL AMERICA AND THE CARIBBEAN	LIONS CLUBS COMMUNITY SERVICE PROJECTS	60,208	WIRE			
(4)		CENTRAL AMERICA AND THE CARIBBEAN	SAN PEDRO ACADEMY FROM DAVIS TRUST	10,000	CHECK			
(5)		CENTRAL AMERICA AND THE CARIBBEAN	FLOOD RELIEF	10,000	WIRE			
(6)		CENTRAL AMERICA AND THE CARIBBEAN	EARTHQUAKE RELIEF	10,000	WIRE			
(7)		CENTRAL AMERICA AND THE CARIBBEAN	SEED GRANT - CONSEJO DE IGLESIAS DE CUBA (CIC) - CHILD HEALTH & SAFETY	10,000	WIRE			
(8)		EAST ASIA AND THE PACIFIC	SFCA IV YEAR ONE	1,248,090	WIRE			
(9)		EAST ASIA AND THE PACIFIC	WESTERN JAPAN FLOODING	300,000	CHECK			
(10)		EAST ASIA AND THE PACIFIC	HOKKAIDO JAPAN EARTHQUAKE RELIEF	292,479	CHECK			
(11)		EAST ASIA AND THE PACIFIC	SPECIAL OLYMPICS-NIPPON WINTER NATIONAL GAMES	289,388	CHECK			
(12)		EAST ASIA AND THE PACIFIC	WESTERN JAPAN FLOODING	223,389	CHECK			
(13)		EAST ASIA AND THE PACIFIC	WESTERN JAPAN FLOODING	163,513	CHECK			
(14)		EAST ASIA AND THE PACIFIC	PURCHASE VISION EQUIPMENT FOR RURAL TIBET DISTRICT	100,000	WIRE			
(15)		EAST ASIA AND THE PACIFIC	CENTRAL SULAWESI INDONESIA EARTHQUAKE & TSUNAMI	100,000	WIRE			
(16)		EAST ASIA AND THE PACIFIC	MCAT - HOKKAIDO EARTHQUAKE IN JAPAN	100,000	CHECK			
(17)		EAST ASIA AND THE PACIFIC	SPECIAL OLYMPICS JAPAN (2018-2019)	100,000	ELECTRONIC			
(18)		EAST ASIA AND THE PACIFIC	EQUIP DIALYSIS CENTER IN MALAYSIA	100,000	WIRE			
(19)		EAST ASIA AND THE PACIFIC	CONSTRUCT CENTER FOR AT-RISK YOUTH	100,000	CHECK			
(20)		EAST ASIA AND THE PACIFIC	PURCHASE VISION SCREENING PROGRAM FOR SENIORS	100,000	CHECK			
(21)		EAST ASIA AND THE PACIFIC	PURCHASE & EQUIP TWO	100,000	CHECK			

(a) Name of Organization	(b) IRS code section and EIN	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
			MOBILE BATH UNIT FOR DISABLED & SENIORS					
(22)		EAST ASIA AND THE PACIFIC	EQUIP MUSIC PROGRAM FOR VISUALLY IMPAIRED & DISABLED STUDENTS	100,000	CHECK			
(23)		EAST ASIA AND THE PACIFIC	PURCHASE & EQUIP MOBILE BLOOD DONATION VEHICLE	100,000	CHECK			
(24)		EAST ASIA AND THE PACIFIC	PURCHASE & EQUIP MOBILE BLOOD DONATION VEHICLE	100,000	CHECK			
(25)		EAST ASIA AND THE PACIFIC	EQUIP FOOD BANK	100,000	CHECK			
(26)		EAST ASIA AND THE PACIFIC	EQUIP CENTER FOR DISABLED	100,000	CHECK			
(27)		EAST ASIA AND THE PACIFIC	PURCHASE MOBILE DIABETES & FOOT CARE SCREENING VEHICLE	100,000	CHECK			
(28)		EAST ASIA AND THE PACIFIC	PURCHASE & EQUIP MOBILE VISION SCREENING VEHICLE	100,000	CHECK			
(29)		EAST ASIA AND THE PACIFIC	PURCHASE TRANSPORT VEHICLE FOR DISABLED	100,000	CHECK			
(30)		EAST ASIA AND THE PACIFIC	PURCHASE & EQUIP MOBILE BLOOD DONATION VEHICLE	100,000	CHECK			
(31)		EAST ASIA AND THE PACIFIC	PURCHASE 12 TRANSPORT VEHICLES FOR DISABLED	100,000	CHECK			
(32)		EAST ASIA AND THE PACIFIC	PURCHASE 5 TRANSPORT VEHICLES FOR DISABLED	100,000	CHECK			
(33)		EAST ASIA AND THE PACIFIC	CONSTRUCT INFIRMARY IN GUINEA	100,000	CHECK			
(34)		EAST ASIA AND THE PACIFIC	PURCHASE 15 TRANSPORT VEHICLES FOR DISABLED & SENIORS	98,000	CHECK			
(35)		EAST ASIA AND THE PACIFIC	DIABETES SCREENING AND PREVENTION PROJECT	95,000	CHECK			
(36)		EAST ASIA AND THE PACIFIC	PURCHASE 7 TRANSPORT VEHICLES FOR DISABLED & SENIORS	95,000	CHECK			
(37)		EAST ASIA AND THE PACIFIC	EFFECTIVENESS OF TEACHER-LED SCHOOL-BASED EYE HEALTH PROGRAMS	94,160	CHECK			
(38)		EAST ASIA AND	DIABETES	90,200	CHECK			

(a) Name of Organization	(b) IRS code section and EIN	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		THE PACIFIC	COMMUNITY EDUCATORS AND SCREENING					
(39)		EAST ASIA AND THE PACIFIC	J & J SIGHT FOR KIDS - THAILAND 2018	89,897	WIRE			
(40)		EAST ASIA AND THE PACIFIC	EQUIP FOUR HOSPITALS IN THAILAND	83,119	WIRE			
(41)		EAST ASIA AND THE PACIFIC	EQUIP HOSPITAL IN THAILAND	82,500	WIRE			
(42)		EAST ASIA AND THE PACIFIC	PURCHASE COMPUTERS FOR CHILDREN AT 76 WELFARE CENTERS	82,000	CHECK			
(43)		EAST ASIA AND THE PACIFIC	EQUIP HOSPITAL IN BUSAN	80,285	CHECK			
(44)		EAST ASIA AND THE PACIFIC	PURCHASE FOOD TRUCK FOR FEEDING PROGRAM	80,000	CHECK			
(45)		EAST ASIA AND THE PACIFIC	PURCHASE 6 TRANSPORT VEHICLES FOR DISABLED & SENIORS	79,372	CHECK			
(46)		EAST ASIA AND THE PACIFIC	EQUIP TWO HOSPITALS IN THAILAND	79,300	WIRE			
(47)		EAST ASIA AND THE PACIFIC	PURCHASE & EQUIP TWO MOBILE DIABETES SCREENING VEHICLES	75,000	CHECK			
(48)		EAST ASIA AND THE PACIFIC	EQUIP TWO HOSPITALS IN THAILAND	72,500	WIRE			
(49)		EAST ASIA AND THE PACIFIC	EQUIP HOSPITAL IN THAILAND	66,000	WIRE			
(50)		EAST ASIA AND THE PACIFIC	RENOVATE & EQUIP WELLNESS CENTER	65,957	WIRE			
(51)		EAST ASIA AND THE PACIFIC	PURCHASE 13 TRANSPORT VEHICLES FOR DISABLED & SENIORS	63,751	CHECK			
(52)		EAST ASIA AND THE PACIFIC	PURCHASE & EQUIP MOBILE HEALTH SCREENING VEHICLE	63,500	CHECK			
(53)		EAST ASIA AND THE PACIFIC	EQUIP HOSPITAL IN THAILAND	62,500	WIRE			
(54)		EAST ASIA AND THE PACIFIC	EQUIP VISION SCREENING PROGRAM	61,635	CHECK			
(55)		EAST ASIA AND THE PACIFIC	PURCHASE 10 TRANSPORT VEHICLES FOR DISABLED	61,022	CHECK			
(56)		EAST ASIA AND THE PACIFIC	WATER WELLS IN THE PHILIPPINES	60,000	WIRE			
(57)		EAST ASIA AND THE PACIFIC	EQUIP HOSPITAL IN THAILAND	60,000	WIRE			
(58)		EAST ASIA AND THE PACIFIC	CAMBODIA TRAINING CENTER	59,097	CHECK			
(59)		EAST ASIA AND THE PACIFIC	PURCHASE MOBILE WOMEN'S CANCER	58,388	CHECK			

(a) Name of Organization	(b) IRS code section and EIN	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
			SCREENING UNIT					
(60)		EAST ASIA AND THE PACIFIC	PURCHASE 4 TRANSPORT VEHICLES FOR DISABLED AND UNDER-SERVED	58,343	CHECK			
(61)		EAST ASIA AND THE PACIFIC	PURCHASE 4 TRANSPORT VEHICLES FOR DISABLED & SENIORS	54,082	CHECK			
(62)		EAST ASIA AND THE PACIFIC	PURCHASE 6 TRANSPORT VEHICLES FOR DISABLED, SENIORS, & LOW-INCOME	53,133	CHECK			
(63)		EAST ASIA AND THE PACIFIC	RENOVATE VOCATIONAL TRAINING CENTER FOR DISABLED	53,000	CHECK			
(64)		EAST ASIA AND THE PACIFIC	LOMBOK INDONESIA EARTHQUAKE	50,000	WIRE			
(65)		EAST ASIA AND THE PACIFIC	KRAKATAU TSUNAMI IN INDONESIA	50,000	WIRE			
(66)		EAST ASIA AND THE PACIFIC	CANCER ERADICATION SUMMIT IN JAPAN	50,000	CHECK			
(67)		EAST ASIA AND THE PACIFIC	EXPAND LIONS QUEST	50,000	CHECK			
(68)		EAST ASIA AND THE PACIFIC	EXPAND LIONS QUEST	50,000	CHECK			
(69)		EAST ASIA AND THE PACIFIC	EXPAND SOCIAL WELFARE CENTER IN CAMBODIA	50,000	CHECK			
(70)		EAST ASIA AND THE PACIFIC	RENOVATE & EQUIP VOCATIONAL TRAINING CENTER FOR DISABLED	50,000	CHECK			
(71)		EAST ASIA AND THE PACIFIC	KIDS CANCER GENOME PROJECT	47,231	CHECK			
(72)		EAST ASIA AND THE PACIFIC	PURCHASE THREE TRANSPORT VEHICLES FOR SOCIAL SERVICE ORGANIZATIONS	46,145	CHECK			
(73)		EAST ASIA AND THE PACIFIC	PURCHASE TRANSPORT VEHICLES FOR 3 SOCIAL SERVICE ORGANIZATIONS	44,466	CHECK			
(74)		EAST ASIA AND THE PACIFIC	PURCHASE & EQUIP VACCINE TRANSPORT VEHICLE	42,000	CHECK			
(75)		EAST ASIA AND THE PACIFIC	EQUIP VOCATIONAL TRAINING PROGRAM FOR DISABLED	41,483	CHECK			
(76)		EAST ASIA AND THE PACIFIC	LIONS QUEST	37,200	CHECK			
(77)		EAST ASIA AND THE PACIFIC	PURCHASE VISION SCREENERS FOR CHILDREN	35,680	WIRE			

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(78)		EAST ASIA AND THE PACIFIC	URBAN REFORESTATION PROJECT	34,104	CHECK			
(79)		EAST ASIA AND THE PACIFIC	PURCHASE FOOD TRUCK FOR FEEDING PROGRAM (LOCAL MATCH)	32,863	CHECK			
(80)		EAST ASIA AND THE PACIFIC	FOOD FOR THE UNDERSERVED	31,370	CHECK			
(81)		EAST ASIA AND THE PACIFIC	EXPAND & REPAIR ELEMENTARY SCHOOL IN THE PHILIPPINES	30,500	CHECK			
(82)		EAST ASIA AND THE PACIFIC	SCHOLARSHIP PROGRAM	29,900	CHECK			
(83)		EAST ASIA AND THE PACIFIC	PURCHASE TRANSPORT VEHICLE FOR DISABLED	27,929	CHECK			
(84)		EAST ASIA AND THE PACIFIC	COMPUTER DONATION TO WELFARE CENTER	27,857	CHECK			
(85)		EAST ASIA AND THE PACIFIC	EQUIP TAINAN CITY GOVERNMENT FIRE BUREAU	27,266	CHECK			
(86)		EAST ASIA AND THE PACIFIC	EXPAND LIONS QUEST	26,750	CHECK			
(87)		EAST ASIA AND THE PACIFIC	EQUIP TWO SERVICE ORGANIZATIONS FOR DISABLED	25,637	CHECK			
(88)		EAST ASIA AND THE PACIFIC	LOMBOK INDONESIA EARTHQUAKE	25,576	WIRE			
(89)		EAST ASIA AND THE PACIFIC	ELEVATOR FOR WELFARE CENTER	25,528	CHECK			
(90)		EAST ASIA AND THE PACIFIC	DIABETES CAMPAIGN	25,095	CHECK			
(91)		EAST ASIA AND THE PACIFIC	EXPAND LIONS QUEST	25,000	CHECK			
(92)		EAST ASIA AND THE PACIFIC	EXPAND LIONS QUEST	25,000	CHECK			
(93)		EAST ASIA AND THE PACIFIC	LIONS QUEST PROGRAM	25,000	CHECK			
(94)		EAST ASIA AND THE PACIFIC	EQUIP KAOHSIUNG FOOD BANK	23,783	CHECK			
(95)		EAST ASIA AND THE PACIFIC	PROVIDING CARTS FOR SENIOR CITIZENS' RECYCLING ACTIVITIES	22,413	CHECK			
(96)		EAST ASIA AND THE PACIFIC	EXPAND LIONS QUEST	22,300	CHECK			
(97)		EAST ASIA AND THE PACIFIC	EXPAND LIONS QUEST	21,983	CHECK			
(98)		EAST ASIA AND THE PACIFIC	EQUIP VISION SCREENING PROGRAM FOR CHILDREN & ADULTS	21,724	CHECK			
(99)		EAST ASIA AND THE PACIFIC	EQUIP UNIVERSITY HOSPITAL	21,278	CHECK			
(100)		EAST ASIA AND THE PACIFIC	SECURITY SYSTEMS FOR SCHOOLS	20,026	CHECK			

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(101)		EAST ASIA AND THE PACIFIC	EXPAND LIONS QUEST	20,000	CHECK			
(102)		EAST ASIA AND THE PACIFIC	DIABETES STRIDES CAMPAIGN, SEOUL	20,000	CHECK			
(103)		EAST ASIA AND THE PACIFIC	SUPPORTING MARRIAGE CEREMONIES	19,576	CHECK			
(104)		EAST ASIA AND THE PACIFIC	LIONS QUEST	19,500	CHECK			
(105)		EAST ASIA AND THE PACIFIC	PURCHASE TRANSPORT VEHICLE FOR DISABLED & SENIORS	19,500	CHECK			
(106)		EAST ASIA AND THE PACIFIC	EQUIP CHILDREN'S HOSPITAL	19,487	CHECK			
(107)		EAST ASIA AND THE PACIFIC	VEHICLE FOR CITY IN DISASTER	18,807	CHECK			
(108)		EAST ASIA AND THE PACIFIC	CANCER SEQUENCER AND SEMINAR	18,700	CHECK			
(109)		EAST ASIA AND THE PACIFIC	PURCHASE VEHICLE FOR CHILD DEVELOPMENT SUPPORT CENTER	18,469	CHECK			
(110)		EAST ASIA AND THE PACIFIC	EXPAND LIONS QUEST	18,000	CHECK			
(111)		EAST ASIA AND THE PACIFIC	DIABETIC COOKING CONTEST	17,500	CHECK			
(112)		EAST ASIA AND THE PACIFIC	LIVING FACILITIES FOR THE DISABLED	17,402	CHECK			
(113)		EAST ASIA AND THE PACIFIC	FIRE TRUCK	16,749	CHECK			
(114)		EAST ASIA AND THE PACIFIC	SCHOLARSHIP PROGRAM	16,589	CHECK			
(115)		EAST ASIA AND THE PACIFIC	EQUIP GUEST HOUSE FOR FAMILIES OF CHILDHOOD CANCER PATIENTS	16,126	CHECK			
(116)		EAST ASIA AND THE PACIFIC	EXPAND LIONS QUEST	16,027	CHECK			
(117)		EAST ASIA AND THE PACIFIC	SCHOLARSHIP PROJECT	15,550	CHECK			
(118)		EAST ASIA AND THE PACIFIC	FOOD & BASIC NECESSITIES	15,169	CHECK			
(119)		EAST ASIA AND THE PACIFIC	LIONS QUEST COMMUNITY PARTNERSHIP GRANT 2018	15,000	ELECTRONIC			
(120)		EAST ASIA AND THE PACIFIC	EXPAND LIONS QUEST	15,000	CHECK			
(121)		EAST ASIA AND THE PACIFIC	TREE PLANTING ACTIVITY	15,000	CHECK			
(122)		EAST ASIA AND THE PACIFIC	CATARACT OPERATIONS IN BANGLADESH	14,300	CHECK			
(123)		EAST ASIA AND THE PACIFIC	EXPAND & REPAIR ELEMENTARY SCHOOL IN LAOS	13,973	CHECK			
(124)		EAST ASIA AND THE PACIFIC	FANS FOR SENIORS	13,965	CHECK			
(125)		EAST ASIA AND THE PACIFIC	STONE	13,523	CHECK			

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			MONUMENT					
(126)		EAST ASIA AND THE PACIFIC	SCHOLARSHIP PROJECT	13,381	CHECK			
(127)		EAST ASIA AND THE PACIFIC	CENTRAL SULAWESI INDONESIA EARTHQUAKE & TSUNAMI	12,862	WIRE			
(128)		EAST ASIA AND THE PACIFIC	PURCHASE TRANSPORT VEHICLE FOR CHILDREN'S HOME	12,541	CHECK			
(129)		EAST ASIA AND THE PACIFIC	EQUIP HOSPITAL IN THAILAND	12,254	WIRE			
(130)		EAST ASIA AND THE PACIFIC	COMPUTERS FOR SIX SCHOOLS IN THAILAND	11,536	WIRE			
(131)		EAST ASIA AND THE PACIFIC	SCHOLARSHIP PROGRAM	11,415	CHECK			
(132)		EAST ASIA AND THE PACIFIC	PURCHASE FOOD DELIVERY TRUCK	11,390	CHECK			
(133)		EAST ASIA AND THE PACIFIC	DIABETES AWARENESS PROJECT	11,143	CHECK			
(134)		EAST ASIA AND THE PACIFIC	VEHICLE FOR SOCIAL SERVICES	10,404	CHECK			
(135)		EAST ASIA AND THE PACIFIC	CHARITY LECTURE	10,280	CHECK			
(136)		EAST ASIA AND THE PACIFIC	WHEELCHAIR DONATION	10,268	CHECK			
(137)		EAST ASIA AND THE PACIFIC	KIDNEY AND EYE BANK PROJECT	10,230	CHECK			
(138)		EAST ASIA AND THE PACIFIC	PURCHASE VISION SCREENING EQUIPMENT	10,170	CHECK			
(139)		EAST ASIA AND THE PACIFIC	PURCHASE EQUIPMENT FOR DISABLED CHILDREN	10,108	CHECK			
(140)		EAST ASIA AND THE PACIFIC	DIABETES WALK	10,050	CHECK			
(141)		EAST ASIA AND THE PACIFIC	FLOODING RELIEF	10,000	CHECK			
(142)		EAST ASIA AND THE PACIFIC	WILDFIRE RELIEF	10,000	CHECK			
(143)		EAST ASIA AND THE PACIFIC	EARTHQUAKE RELIEF	10,000	WIRE			
(144)		EAST ASIA AND THE PACIFIC	EARTHQUAKE RELIEF	10,000	WIRE			
(145)		EAST ASIA AND THE PACIFIC	TYPE 1 DIABETES CAMP, YOKOTE CITY	10,000	CHECK			
(146)		EAST ASIA AND THE PACIFIC	DISASTER PREPAREDNESS	10,000	CHECK			
(147)		EAST ASIA AND THE PACIFIC	FLOODING RELIEF	10,000	CHECK			
(148)		EAST ASIA AND THE PACIFIC	RENOVATE & EQUIP FAMILY ROOM FOR FAMILIES PEDIATRIC CANCER PATIENTS	10,000	CHECK			
(149)		EAST ASIA AND THE PACIFIC	KEDAH DIABETES AWARENESS PROGRAM	10,000	WIRE			
(150)		EAST ASIA AND THE PACIFIC	DISASTER PREPAREDNESS	10,000	CHECK			

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(151)		EAST ASIA AND THE PACIFIC	DISASTER PREPAREDNESS	10,000	CHECK			
(152)		EAST ASIA AND THE PACIFIC	DISASTER PREPAREDNESS	10,000	CHECK			
(153)		EAST ASIA AND THE PACIFIC	FLOOD RELIEF	10,000	CHECK			
(154)		EAST ASIA AND THE PACIFIC	FLOOD RELIEF	10,000	CHECK			
(155)		EAST ASIA AND THE PACIFIC	FLOOD RELIEF	10,000	CHECK			
(156)		EAST ASIA AND THE PACIFIC	FLOOD RELIEF	10,000	CHECK			
(157)		EAST ASIA AND THE PACIFIC	FLOODING RELIEF	10,000	WIRE			
(158)		EAST ASIA AND THE PACIFIC	TYPHOON RELIEF	10,000	CHECK			
(159)		EAST ASIA AND THE PACIFIC	FLOODING RELIEF	10,000	CHECK			
(160)		EAST ASIA AND THE PACIFIC	FOREST FIRE RELIEF	10,000	CHECK			
(161)		EAST ASIA AND THE PACIFIC	EQUIP HOSPITAL IN RUSSIA	10,000	CHECK			
(162)		EAST ASIA AND THE PACIFIC	FLOOD RELIEF	10,000	WIRE			
(163)		EAST ASIA AND THE PACIFIC	IMPROVE PEDESTRIAN SAFETY AT SCHOOLS	9,960	CHECK			
(164)		EAST ASIA AND THE PACIFIC	EQUIP TALKING BOOK & BRAILLE LIBRARY	9,910	CHECK			
(165)		EAST ASIA AND THE PACIFIC	GLOBAL CAUSE AWARENESS EVENT	9,600	CHECK			
(166)		EAST ASIA AND THE PACIFIC	FOOD BANK REFRIGERATOR & FREEZER	9,168	CHECK			
(167)		EAST ASIA AND THE PACIFIC	DRUG PREVENTION HEALTH FAIR	9,069	CHECK			
(168)		EAST ASIA AND THE PACIFIC	SUPPORT FOR NATIONAL ATHLETIC EVENT	8,500	CHECK			
(169)		EAST ASIA AND THE PACIFIC	EXPAND LIONS QUEST	8,000	CHECK			
(170)		EAST ASIA AND THE PACIFIC	HOSPITAL BED DONATION	7,650	CHECK			
(171)		EAST ASIA AND THE PACIFIC	STUDENT SCHOLARSHIPS	6,930	CHECK			
(172)		EAST ASIA AND THE PACIFIC	FOOD AND STIPEND FOR LOW-INCOME FAMILIES	6,027	CHECK			
(173)		EAST ASIA AND THE PACIFIC	BOOK DONATION TO LIBRARIES	6,000	CHECK			
(174)		EAST ASIA AND THE PACIFIC	WHEELCHAIR DONATION FOR HOSPITALS	6,000	CHECK			
(175)		EAST ASIA AND THE PACIFIC	SCHOOL SUPPLIES FOR CHILDREN	5,775	CHECK			
(176)		EUROPE (INCLUDING ICELAND AND GREENLAND)	VILA CENTRAL HOSPITAL EYE CLINIC OPERATING THEATRE UPGRADE AND EXTENSION	330,043	WIRE			
(177)		EUROPE (INCLUDING ICELAND AND GREENLAND)	HUMANITARIAN AWARD 2018-19	250,000	WIRE			
(178)		EUROPE (INCLUDING	CENTRAL ITALY EARTHQUAKE	153,300	ELECTRONIC			

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		ICELAND AND GREENLAND)	RECONSTRUCTION					
(179)		EUROPE (INCLUDING ICELAND AND GREENLAND)	LIONS QUEST PROGRAM	150,000	ELECTRONIC			
(180)		EUROPE (INCLUDING ICELAND AND GREENLAND)	EXPAND LIONS QUEST	134,923	ELECTRONIC			
(181)		EUROPE (INCLUDING ICELAND AND GREENLAND)	EARLY INTERVENTION FOR CHILDREN WITH VISUAL IMPAIRMENT	116,037	ELECTRONIC			
(182)		EUROPE (INCLUDING ICELAND AND GREENLAND)	EXPAND DAY CARE CENTER FOR DISABLED	100,000	ELECTRONIC			
(183)		EUROPE (INCLUDING ICELAND AND GREENLAND)	EQUIP STROKE REHABILITATION CENTER	100,000	ELECTRONIC			
(184)		EUROPE (INCLUDING ICELAND AND GREENLAND)	EXPAND GUIDE DOG TRAINING FACILITY	100,000	WIRE			
(185)		EUROPE (INCLUDING ICELAND AND GREENLAND)	EQUIP ONCOLOGY LAB AT HOSPITAL	100,000	WIRE			
(186)		EUROPE (INCLUDING ICELAND AND GREENLAND)	RENOVATE & EQUIP OPERATING ROOM AT PEDIATRIC HOSPITAL	96,591	ELECTRONIC			
(187)		EUROPE (INCLUDING ICELAND AND GREENLAND)	EXPAND LIONS PROGRAM SERVING FAMILIES IN NEED	86,207	ELECTRONIC			
(188)		EUROPE (INCLUDING ICELAND AND GREENLAND)	CONSTRUCT CENTER FOR ASSISTANCE DOGS	75,400	ELECTRONIC			
(189)		EUROPE (INCLUDING ICELAND AND GREENLAND)	LIONS QUEST PROGRAM	75,000	ELECTRONIC			
(190)		EUROPE (INCLUDING ICELAND AND GREENLAND)	LIONS QUEST PROGRAM	65,813	WIRE			
(191)		EUROPE (INCLUDING ICELAND AND GREENLAND)	EQUIP WORKSHOP TO REPAIR BARRIER FREE DEVICES	59,460	WIRE			
(192)		EUROPE (INCLUDING ICELAND AND GREENLAND)	ESTABLISH PRECISION MEDICINE LAB AT CHILDREN'S HOSPITAL	57,800	ELECTRONIC			
(193)		EUROPE (INCLUDING ICELAND AND GREENLAND)	PURCHASE AMBULANCE FOR HOSPITAL	56,500	ELECTRONIC			
(194)		EUROPE (INCLUDING ICELAND AND GREENLAND)	RENOVATE & FURNISH CENTER FOR DISABLED	55,000	ELECTRONIC			
(195)		EUROPE (INCLUDING ICELAND AND GREENLAND)	AGRICULTURE PROJECT IN SENEGAL	53,700	WIRE			
(196)		EUROPE (INCLUDING ICELAND AND GREENLAND)	LIONS QUEST	50,000	ELECTRONIC			
(197)		EUROPE (INCLUDING ICELAND AND GREENLAND)	LIONS QUEST	50,000	ELECTRONIC			
(198)		EUROPE (INCLUDING ICELAND AND GREENLAND)	FURNISH HOME FOR DISABLED ADULTS	47,694	ELECTRONIC			
(199)		EUROPE	PLAYGROUND	47,147	WIRE			

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		(INCLUDING ICELAND AND GREENLAND)	FOR THE DISABLED					
(200)		EUROPE (INCLUDING ICELAND AND GREENLAND)	PURCHASE AMBULANCE FOR LOCAL RED CROSS	46,500	ELECTRONIC			
(201)		EUROPE (INCLUDING ICELAND AND GREENLAND)	LATRINE PROJECT IN THE DEMOCRATIC REPUBLIC OF CONGO	45,670	ELECTRONIC			
(202)		EUROPE (INCLUDING ICELAND AND GREENLAND)	RENOVATE OBSTETRICS UNIT AT HOSPITAL IN DRC	39,600	ELECTRONIC			
(203)		EUROPE (INCLUDING ICELAND AND GREENLAND)	LIONS QUEST	37,309	ELECTRONIC			
(204)		EUROPE (INCLUDING ICELAND AND GREENLAND)	ESTABLISH PEDIATRIC CANCER FOLLOW-UP PROGRAM	36,900	WIRE			
(205)		EUROPE (INCLUDING ICELAND AND GREENLAND)	ESTABLISH MOBILE HEALTH CLINIC	28,409	ELECTRONIC			
(206)		EUROPE (INCLUDING ICELAND AND GREENLAND)	EXPAND SENSORY GARDEN FOR THE DISABLED	24,615	WIRE			
(207)		EUROPE (INCLUDING ICELAND AND GREENLAND)	EQUIP SENSORY ROOM FOR CHILDREN WITH AUTISM	22,748	WIRE			
(208)		EUROPE (INCLUDING ICELAND AND GREENLAND)	EXPAND AND IMPROVE HOME FOR GIRLS	19,000	ELECTRONIC			
(209)		EUROPE (INCLUDING ICELAND AND GREENLAND)	PURCHASE TRANSPORT VEHICLE FOR SCHOOL FOR THE BLIND	18,484	ELECTRONIC			
(210)		EUROPE (INCLUDING ICELAND AND GREENLAND)	TYPE 1 DIABETES LIONS YOUTH CAMP	17,180	ELECTRONIC			
(211)		EUROPE (INCLUDING ICELAND AND GREENLAND)	RENOVATE & FURNISH SCHOOL FOR VISUALLY IMPAIRED	17,143	ELECTRONIC			
(212)		EUROPE (INCLUDING ICELAND AND GREENLAND)	ESTABLISH MULTISENSORY GARDEN FOR DISABLED CHILDREN	16,880	ELECTRONIC			
(213)		EUROPE (INCLUDING ICELAND AND GREENLAND)	LIONS QUEST COMMUNITY PARTNERSHIP GRANT 2018	15,000	ELECTRONIC			
(214)		EUROPE (INCLUDING ICELAND AND GREENLAND)	LIONS QUEST COMMUNITY PARTNERSHIP GRANT 2018	15,000	ELECTRONIC			
(215)		EUROPE (INCLUDING ICELAND AND GREENLAND)	LIONS QUEST COMMUNITY PARTNERSHIP GRANT 2018	15,000	ELECTRONIC			
(216)		EUROPE (INCLUDING ICELAND AND GREENLAND)	LIONS QUEST COMMUNITY PARTNERSHIP GRANT 2018	15,000	ELECTRONIC			
(217)		EUROPE (INCLUDING ICELAND AND GREENLAND)	EQUIP FIRST RESPONDERS UNIT	11,384	ELECTRONIC			

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(218)		EUROPE (INCLUDING ICELAND AND GREENLAND)	RENOVATE & EQUIP CHILDREN'S HOSPICE	10,600	ELECTRONIC			
(219)		EUROPE (INCLUDING ICELAND AND GREENLAND)	EARTHQUAKE RELIEF	10,000	WIRE			
(220)		EUROPE (INCLUDING ICELAND AND GREENLAND)	FLOOD RELIEF	10,000	WIRE			
(221)		EUROPE (INCLUDING ICELAND AND GREENLAND)	DISASTER PREPAREDNESS	10,000	ELECTRONIC			
(222)		EUROPE (INCLUDING ICELAND AND GREENLAND)	RENOVATE HEALTH CLINIC IN DRC	10,000	ELECTRONIC			
(223)		EUROPE (INCLUDING ICELAND AND GREENLAND)	WILDFIRE RELIEF	10,000	WIRE			
(224)		EUROPE (INCLUDING ICELAND AND GREENLAND)	HYDRO-AMBULANCE PROJECT	10,000	ELECTRONIC			
(225)		EUROPE (INCLUDING ICELAND AND GREENLAND)	FLOOD RELIEF	10,000	WIRE			
(226)		EUROPE (INCLUDING ICELAND AND GREENLAND)	FLOOD RELIEF	10,000	WIRE			
(227)		EUROPE (INCLUDING ICELAND AND GREENLAND)	WILDFIRE RELIEF	6,113	ELECTRONIC			
(228)		EUROPE (INCLUDING ICELAND AND GREENLAND)	PLAYGROUND EQUIPMENT	6,098	ELECTRONIC			
(229)		EUROPE (INCLUDING ICELAND AND GREENLAND)	STAR CHEF BOOK	5,916	ELECTRONIC			
(230)		EUROPE (INCLUDING ICELAND AND GREENLAND)	LIONS SPECTACLE RECYCLING PROGRAM	5,068	ELECTRONIC			
(231)		MIDDLE EAST AND NORTH AFRICA	PURCHASE CT SCANNER FOR HOSPITAL	100,000	WIRE			
(232)		MIDDLE EAST AND NORTH AFRICA	PURCHASE DIALYSIS MACHINES FOR HOSPITAL	61,987	WIRE			
(233)		MIDDLE EAST AND NORTH AFRICA	PURCHASE SURGICAL EQUIPMENT FOR UNIVERSITY HOSPITAL	44,250	WIRE			
(234)		MIDDLE EAST AND NORTH AFRICA	EQUIP NEUROLOGICAL REHAB CENTER	23,881	ELECTRONIC			
(235)		MIDDLE EAST AND NORTH AFRICA	FLOOD RELIEF	10,000	WIRE			
(236)		MIDDLE EAST AND NORTH AFRICA	FLOOD RELIEF	10,000	WIRE			
(237)		MIDDLE EAST AND NORTH AFRICA	WILDFIRE RELIEF	10,000	WIRE			
(238)		MIDDLE EAST AND NORTH AFRICA	FLOOD RELIEF	10,000	WIRE			
(239)		NORTH AMERICA (CANADA & MEXICO ONLY)	EQUIP MISSISSAUGA HOSPITAL OF ONTARIO	100,000	WIRE			
(240)		NORTH AMERICA (CANADA & MEXICO ONLY)	SURGICAL NAVIGATION SYSTEM FOR	100,000	CHECK			

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			HOSPITAL					
(241)		NORTH AMERICA (CANADA & MEXICO ONLY)	EQUIP BC CHILDREN'S HOSPITAL	88,382	ELECTRONIC			
(242)		NORTH AMERICA (CANADA & MEXICO ONLY)	LIONS QUEST COMMUNITY PARTNERSHIP GRANT 2018	60,000	ELECTRONIC			
(243)		NORTH AMERICA (CANADA & MEXICO ONLY)	EQUIP LONDON CHILDREN'S HOSPITAL	53,030	WIRE			
(244)		NORTH AMERICA (CANADA & MEXICO ONLY)	RETINAL IMAGING EQUIPMENT FOR CHILDREN'S HOSPITAL	51,775	ELECTRONIC			
(245)		NORTH AMERICA (CANADA & MEXICO ONLY)	LIONS FOR GROVES DIABETES PATIENT AND EDUCATION CENTRE	50,000	ELECTRONIC			
(246)		NORTH AMERICA (CANADA & MEXICO ONLY)	EQUIP LIONS VISION CLINIC	43,235	WIRE			
(247)		NORTH AMERICA (CANADA & MEXICO ONLY)	PLAYGROUND FOR THE DISABLED	37,878	ELECTRONIC			
(248)		NORTH AMERICA (CANADA & MEXICO ONLY)	T1D CAMPS IN NEW BRUNSWICK AND PRINCE EDWARD ISLAND	20,000	ELECTRONIC			
(249)		NORTH AMERICA (CANADA & MEXICO ONLY)	DISASTER PREPAREDNESS	10,000	ELECTRONIC			
(250)		NORTH AMERICA (CANADA & MEXICO ONLY)	TORNADO RELIEF	10,000	ELECTRONIC			
(251)		NORTH AMERICA (CANADA & MEXICO ONLY)	FLOOD RELIEF	10,000	ELECTRONIC			
(252)		NORTH AMERICA (CANADA & MEXICO ONLY)	FLOOD RELIEF	10,000	ELECTRONIC			
(253)		NORTH AMERICA (CANADA & MEXICO ONLY)	FLOOD RELIEF	10,000	WIRE			
(254)		NORTH AMERICA (CANADA & MEXICO ONLY)	FLOOD RELIEF	10,000	WIRE			
(255)		NORTH AMERICA (CANADA & MEXICO ONLY)	FLOOD RELIEF	10,000	WIRE			
(256)		NORTH AMERICA (CANADA & MEXICO ONLY)	HURRICANE RELIEF	10,000	WIRE			
(257)		NORTH AMERICA (CANADA & MEXICO ONLY)	HURRICANE RELIEF	10,000	WIRE			
(258)		NORTH AMERICA (CANADA & MEXICO ONLY)	FLOOD RELIEF	10,000	WIRE			
(259)		RUSSIA AND NEIGHBORING STATES	LIONS QUEST PROGRAM	148,200	WIRE			
(260)		RUSSIA AND NEIGHBORING STATES	EXPANDING COMPREHENSIVE EYE CARE SERVICES, LIONS EYE CLINIC TBILISI	145,945	WIRE			
(261)		RUSSIA AND NEIGHBORING STATES	EQUIP SENSORY ROOMS IN ORPHANAGES	75,000	WIRE			
(262)		RUSSIA AND NEIGHBORING STATES	EQUIP SENSORY ROOMS IN ORPHANAGES	75,000	WIRE			
(263)		RUSSIA AND NEIGHBORING STATES	EXPAND LIONS QUEST	69,450	WIRE			
(264)		RUSSIA AND NEIGHBORING STATES	NATIONWIDE EPIDEMIOLOGICA	64,011	WIRE			

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			L SURVEY USING RAPID ASSESSMENT OF AVOIDABLE BLINDNESS (RAAB) METHODOLOGY					
(265)		RUSSIA AND NEIGHBORING STATES	EQUIP SENSORY ROOM IN ORPHANAGE	38,600	WIRE			
(266)		SOUTH AMERICA	COMPREHENSIVE DIABETIC RETINOPATHY PROGRAM IN SAO PAULO, BRAZIL	335,282	ELECTRONIC			
(267)		SOUTH AMERICA	LIONS QUEST PROGRAM	138,253	WIRE			
(268)		SOUTH AMERICA	EXPAND LIONS EYE HOSPITAL	100,000	ELECTRONIC			
(269)		SOUTH AMERICA	EQUIP DENTAL CENTER IN BOGOTA	100,000	WIRE			
(270)		SOUTH AMERICA	CONSTRUCT NUTRITION CENTERS FOR NEEDY COMMUNITIES IN GUAJIRA	100,000	WIRE			
(271)		SOUTH AMERICA	EXPAND AND EQUIP EYE CLINIC IN ASUNCION	97,500	WIRE			
(272)		SOUTH AMERICA	LOW VISION PROJECT GUTIERREZ CHILDREN'S HOSPITAL	77,632	WIRE			
(273)		SOUTH AMERICA	EQUIPMENT AND FACILITY UPDATES AT HOSPITAL IN RIO GRANDE DO SUL	75,000	ELECTRONIC			
(274)		SOUTH AMERICA	BUILD VOCATIONAL SCHOOL FOR THE DEAF	75,000	ELECTRONIC			
(275)		SOUTH AMERICA	EQUIPMENT AND FACILITY UPDATES AT HOSPITAL VERA CRUZ	74,400	ELECTRONIC			
(276)		SOUTH AMERICA	ESTABLISH KIDSIGHT VISION SCREENING PROGRAM IN COLOMBIA	69,022	WIRE			
(277)		SOUTH AMERICA	DIABETES PROMOTION, PREVENTION AND TREATMENT EDUCATION	64,852	WIRE			
(278)		SOUTH AMERICA	TESA TESAI EYE HEALTH, ITAPUA	62,729	WIRE			
(279)		SOUTH AMERICA	EQUIP HOSPITAL WITH DIGITAL RADIOLOGY EQUIPMENT	50,174	ELECTRONIC			
(280)		SOUTH AMERICA	ESTABLISH CAFETERIA FOR MENTAL HEALTH FACILITY	49,709	ELECTRONIC			
(281)		SOUTH AMERICA	PURCHASE OF LAPAROSCOPIC EQUIPMENT FOR HOSPITAL IN	48,153	ELECTRONIC			

(a) Name of Organization	(b) IRS code section and EIN	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
			VALINHOS					
(282)		SOUTH AMERICA	EQUIP CHILDHOOD INSTITUTE IN PORTO ALEGRE BRAZIL	44,038	ELECTRONIC			
(283)		SOUTH AMERICA	PURCHASE MOBILE EYE UNIT TOCANTINS	43,827	ELECTRONIC			
(284)		SOUTH AMERICA	EQUIP HOSPITAL FOR THE ELDERLY	43,763	ELECTRONIC			
(285)		SOUTH AMERICA	RADIOLOGY EQUIPMENT FOR HOSPITAL IN SAO PAULO BRAZIL	41,997	ELECTRONIC			
(286)		SOUTH AMERICA	EQUIP OPHTHALMOLOGICAL CLINIC	40,614	ELECTRONIC			
(287)		SOUTH AMERICA	EQUIP CENTER FOR PEOPLE WITH DISABILITIES	35,533	WIRE			
(288)		SOUTH AMERICA	CONSTRUCT AWNING FOR SCHOOL	32,776	WIRE			
(289)		SOUTH AMERICA	PURCHASE OF LAPAROSCOPIC EQUIPMENT FOR HOSPITAL IN MACATUBA	31,231	ELECTRONIC			
(290)		SOUTH AMERICA	EXPAND AND EQUIP INFIRMARY FOR THE ELDERLY	26,375	ELECTRONIC			
(291)		SOUTH AMERICA	LIONS QUEST	25,000	ELECTRONIC			
(292)		SOUTH AMERICA	EDUCATIONAL TABLE FOR DISABLED CHILDREN	21,354	ELECTRONIC			
(293)		SOUTH AMERICA	COMMUNITY RECOVERY	20,000	ELECTRONIC			
(294)		SOUTH AMERICA	EQUIP DIABETIC ASSOCIATION	18,969	ELECTRONIC			
(295)		SOUTH AMERICA	THERAPY SUIT FOR DISABLED CHILDREN	18,635	ELECTRONIC			
(296)		SOUTH AMERICA	LIONS QUEST COMMUNITY PARTNERSHIP GRANT 2018	15,000	ELECTRONIC			
(297)		SOUTH AMERICA	LIONS QUEST COMMUNITY PARTNERSHIP GRANT 2018	15,000	ELECTRONIC			
(298)		SOUTH AMERICA	LIONS QUEST COMMUNITY PARTNERSHIP GRANT 2018	15,000	ELECTRONIC			
(299)		SOUTH AMERICA	FLOOD RELIEF	10,000	WIRE			
(300)		SOUTH AMERICA	FLOOD RELIEF	10,000	WIRE			
(301)		SOUTH AMERICA	FLOOD RELIEF	10,000	WIRE			
(302)		SOUTH AMERICA	HAIL STORM RELIEF	10,000	ELECTRONIC			
(303)		SOUTH AMERICA	HAIL STORM RELIEF	10,000	ELECTRONIC			
(304)		SOUTH AMERICA	TORNADO RELIEF	10,000	ELECTRONIC			
(305)		SOUTH AMERICA	FLOOD RELIEF	10,000	ELECTRONIC			
(306)		SOUTH AMERICA	FLOOD RELIEF	10,000	ELECTRONIC			
(307)		SOUTH AMERICA	FLOOD RELIEF	10,000	ELECTRONIC			

(a) Name of Organization	(b) IRS code section and EIN	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(308)		SOUTH AMERICA	FLOOD RELIEF	10,000	ELECTRONIC			
(309)		SOUTH AMERICA	FLOOD RELIEF	10,000	WIRE			
(310)		SOUTH AMERICA	FLOOD RELIEF	10,000	WIRE			
(311)		SOUTH AMERICA	FLOOD RELIEF	10,000	WIRE			
(312)		SOUTH AMERICA	FLOOD RELIEF	10,000	WIRE			
(313)		SOUTH AMERICA	FLOOD RELIEF	10,000	WIRE			
(314)		SOUTH AMERICA	LANDSLIDE RELIEF	10,000	WIRE			
(315)		SOUTH AMERICA	FLOOD RELIEF	10,000	WIRE			
(316)		SOUTH ASIA	UPGRADE AURANGABAD CHIKALTHANA LIONS EYE HOSPITAL	617,143	CHECK			
(317)		SOUTH ASIA	MD-18 KERALA FLOODING HOMES RECONSTRUCTION PROJECT	560,000	CHECK			
(318)		SOUTH ASIA	SPECIAL OLYMPICS - INDIA (2018)	333,333	ELECTRONIC			
(319)		SOUTH ASIA	UPGRADE BHARATPUR EYE HOSPITAL, CHITWAN	215,000	CHECK			
(320)		SOUTH ASIA	UPGRADE LIONS KARNAVATI VISHNUBHAI PATEL EYE HOSPITAL, AHMEDABAD	208,906	CHECK			
(321)		SOUTH ASIA	UPGRADE LIONS EYE HOSPITAL, PALAKOL	187,449	CHECK			
(322)		SOUTH ASIA	UPGRADE LIONS EYE HOSPITAL, GHAZIABAD	159,471	WIRE			
(323)		SOUTH ASIA	UPGRADE LIONS EYE HOSPITAL, JAITU	159,138	WIRE			
(324)		SOUTH ASIA	UPGRADE LIONS EYE HOSPITAL, MANDAWAR	139,041	CHECK			
(325)		SOUTH ASIA	UPGRADE R.M. EYE HOSPITAL, CHIKHODARA	136,483	WIRE			
(326)		SOUTH ASIA	CAPACITY BUILDING FOR COMPREHENSIVE EYE CARE, PANADURA	134,863	CHECK			
(327)		SOUTH ASIA	DIABETES CARE UNIT, SHRI GURUDEO AYURVED COLLEGE AND HOSPITAL	127,315	CHECK			
(328)		SOUTH ASIA	UPGRADE LIONS MIDTOWN DIABETES CARE CENTER, AURANGABAD	122,945	CHECK			
(329)		SOUTH ASIA	COMPREHENSIVE DIABETES MANAGEMENT IN PUNE, MAHARASHTRA	113,628	CHECK			
(330)		SOUTH ASIA	UPGRADE M. RAM REDDY LIONS EYE HOSPITAL	108,361	WIRE			
(331)		SOUTH ASIA	CAPACITY	106,728	CHECK			

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			BUILDING FOR COMPREHENSIVE EYE CARE, RATNAPURA					
(332)		SOUTH ASIA	EXPAND DHULIKHEL HOSPITAL LIONS DIABETES CENTER	105,358	CHECK			
(333)		SOUTH ASIA	LIONS QUEST PROGRAM	100,000	WIRE			
(334)		SOUTH ASIA	LIONS QUEST PROGRAM	100,000	WIRE			
(335)		SOUTH ASIA	LIONS QUEST PROGRAM	100,000	WIRE			
(336)		SOUTH ASIA	LIONS QUEST PROGRAM	100,000	WIRE			
(337)		SOUTH ASIA	LIONS QUEST PROGRAM	100,000	WIRE			
(338)		SOUTH ASIA	EQUIP DIALYSIS CENTER IN TIRUVURU	100,000	CHECK			
(339)		SOUTH ASIA	EXPAND SPECIAL SCHOOL IN SURATHKAL	100,000	CHECK			
(340)		SOUTH ASIA	EQUIP DIALYSIS & DIAGNOSTIC CENTER IN MYLAPORE	100,000	WIRE			
(341)		SOUTH ASIA	IMPROVING THE COMPLIANCE OF PATIENTS WITH DIABETIC RETINOPATHY FOR REGULAR SCREENING AND FOLLOW-UP AFTER TREATMENT OF SIGHT THREATENING DIABETIC RETINOPATHY	100,000	CHECK			
(342)		SOUTH ASIA	CONSTRUCT SCIENCE LABORATORY BUILDING	100,000	CHECK			
(343)		SOUTH ASIA	AURANGABAD BLOOD BANK HOSPITAL EXPANSION	99,638	CHECK			
(344)		SOUTH ASIA	UPGRADE THE MYSORE MEDICAL COLLEGE AND RESEARCH INSTITUTE	98,524	CHECK			
(345)		SOUTH ASIA	EXPAND LIONS SCHOOL AT SHIKARIPURA	85,000	CHECK			
(346)		SOUTH ASIA	EXPAND SCHOOL AT DHARAPURAM	85,000	WIRE			
(347)		SOUTH ASIA	LIONS SCHOOL EXPANSION AT PARVATIPURAM	85,000	CHECK			
(348)		SOUTH ASIA	EQUIP DHADING HOSPITAL	85,000	CHECK			
(349)		SOUTH ASIA	EQUIP NEGOMBO GENERAL HOSPITAL	83,542	CHECK			
(350)		SOUTH ASIA	EQUIP NEPAL HEART FOUNDATION IN BANEPRA	82,266	CHECK			

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(351)		SOUTH ASIA	DIABETES SCREENING, EDUCATION AND AWARENESS IN RUPANDEHI	80,013	CHECK			
(352)		SOUTH ASIA	EQUIP KITCHEN HOSPITAL & BIOGAS PLANT	79,352	CHECK			
(353)		SOUTH ASIA	EXPAND SCHOOL AT HOLEHONNUR	79,042	CHECK			
(354)		SOUTH ASIA	MR CAMPAIGN 2018 - INDIA	75,000	CHECK			
(355)		SOUTH ASIA	RESEARCH TO ASSESS VISUAL IMPAIRMENT AND ASSOCIATED REFRACTIVE ERROR IN SCHOOL CHILDREN IN BHUTAN	74,058	WIRE			
(356)		SOUTH ASIA	BATALA MUNICIPALITY SANITATION EQUIPMENT	73,890	CHECK			
(357)		SOUTH ASIA	STRENGTHENING DIABETIC RETINOPATHY SERVICES, GETA EYE HOSPITAL	70,410	CHECK			
(358)		SOUTH ASIA	UPGRADE CAMILLA SCHOOL FOR THE DISABLED	65,072	CHECK			
(359)		SOUTH ASIA	J & J SIGHT FOR KIDS - KERALA 2018	62,530	CHECK			
(360)		SOUTH ASIA	UPGRADE CHAK16 MATERNAL CLINIC IN PAKISTAN	61,708	WIRE			
(361)		SOUTH ASIA	FLOOD RELIEF	59,948	CHECK			
(362)		SOUTH ASIA	EQUIP PATIALA DEAF & BLIND SCHOOL	57,600	WIRE			
(363)		SOUTH ASIA	EXPAND & EQUIP DIALYSIS CENTER AT CHINCHWAD	53,140	CHECK			
(364)		SOUTH ASIA	LIONS QUEST PROGRAM	50,000	WIRE			
(365)		SOUTH ASIA	J & J SIGHT FOR KIDS - HYDERABAD 2018	34,887	CHECK			
(366)		SOUTH ASIA	EQUIP SAHAJ COMMUNITY HOSPITAL IN NEPAL	30,263	CHECK			
(367)		SOUTH ASIA	DISTRICT 324-B1 BLOOD BANK PROJECT	30,000	WIRE			
(368)		SOUTH ASIA	EQUIP ENT DEPARTMENT AT KEM HOSPITAL	28,841	WIRE			
(369)		SOUTH ASIA	MR CAMPAIGN 2018 - INDIA	25,000	CHECK			
(370)		SOUTH ASIA	COMMUNITY RECOVERY	20,000	CHECK			
(371)		SOUTH ASIA	CONSTRUCT HOSTEL FOR STUDENTS IN NEPAL	13,500	WIRE			
(372)		SOUTH ASIA	PAKISTAN FLOOD	13,484	WIRE			

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			RECONSTRUCTION PROJECT-MD 305					
(373)		SOUTH ASIA	FLOOD RELIEF	10,000	CHECK			
(374)		SOUTH ASIA	FLOOD RELIEF	10,000	CHECK			
(375)		SOUTH ASIA	FLOOD RELIEF	10,000	CHECK			
(376)		SOUTH ASIA	FLOOD RELIEF	10,000	CHECK			
(377)		SOUTH ASIA	FLOOD RELIEF	10,000	CHECK			
(378)		SOUTH ASIA	CYCLONE RELIEF	10,000	CHECK			
(379)		SOUTH ASIA	CYCLONE RELIEF	10,000	CHECK			
(380)		SOUTH ASIA	CYCLONE RELIEF	10,000	CHECK			
(381)		SOUTH ASIA	CYCLONE RELIEF	10,000	CHECK			
(382)		SOUTH ASIA	CYCLONE RELIEF	10,000	CHECK			
(383)		SOUTH ASIA	OMKAR LIONS SCHOOL FOR THE DEAF	10,000	CHECK			
(384)		SOUTH ASIA	SANAN MATERNITY HOSPITAL & NURSING HOME	10,000	CHECK			
(385)		SOUTH ASIA	DENTAL EQUIPMENT PROJECT	10,000	CHECK			
(386)		SOUTH ASIA	STORM RELIEF	10,000	CHECK			
(387)		SOUTH ASIA	CYCLONE RELIEF	10,000	CHECK			
(388)		SOUTH ASIA	LIONS RELIEF PROJECT	10,000	CHECK			
(389)		SOUTH ASIA	RESIDENTIAL BUILDINGS	9,900	CHECK			
(390)		SOUTH ASIA	DRINKING WATER AND SCHOOL EQUIPMENT FOR RURAL VILLAGES	8,025	CHECK			
(391)		SOUTH ASIA	CONSTRUCTION OF CREMATION CENTER	5,686	CHECK			
(392)		SUB-SAHARAN AFRICA	TRACHOMA ELIMINATION IN AMHARA REGIONAL STATE, ETHIOPIA	2,550,000	CHECK			
(393)		SUB-SAHARAN AFRICA	RIVER BLINDNESS ELIMINATION, ETHIOPIA	1,200,000	CHECK			
(394)		SUB-SAHARAN AFRICA	THE QUEEN ELIZABETH DIAMOND JUBILEE TRUST TRACHOMA INITIATIVE	1,000,000	WIRE			
(395)		SUB-SAHARAN AFRICA	LIONS EYE CARE SYSTEM DEVELOPMENT IN OSUN STATE	542,126	WIRE			
(396)		SUB-SAHARAN AFRICA	COMPREHENSIVE EYE CARE PROJECT IN MARITIME REGION	505,466	WIRE			
(397)		SUB-SAHARAN AFRICA	ESTABLISH LIBERIAN OPHTHALMOLOGY RESIDENCY PROGRAM	486,000	WIRE			
(398)		SUB-SAHARAN AFRICA	UNODC LIONS QUEST PARTNERSHIP	222,384	WIRE			
(399)		SUB-SAHARAN AFRICA	DIABETIC RETINOPATHY	178,500	WIRE			

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			SCREENING AND TREATMENT IN SOUTHWESTERN UGANDA					
(400)		SUB-SAHARAN AFRICA	DIABETES SCREENING, EDUCATION AND TREATMENT IN CONAKRY	150,000	WIRE			
(401)		SUB-SAHARAN AFRICA	TRACHOMA ELIMINATION, NIGER	150,000	WIRE			
(402)		SUB-SAHARAN AFRICA	LIONS DIABETES SCREENING AND TREATMENT CENTER IN ADO-EKITI	149,330	WIRE			
(403)		SUB-SAHARAN AFRICA	DIABETES AWARENESS, SCREENING AND TREATMENT IN TESO SUB-REGION	140,986	WIRE			
(404)		SUB-SAHARAN AFRICA	MR CAMPAIGN 2019 - UGANDA	120,000	WIRE			
(405)		SUB-SAHARAN AFRICA	UNCORRECTED REFRACTIVE ERROR SCREENING PROJECT FOR CENTER-WEST AND CENTER-SOUTH REGIONS	110,746	WIRE			
(406)		SUB-SAHARAN AFRICA	CLEAN WATER PROJECT IN TANZANIA	100,000	ELECTRONIC			
(407)		SUB-SAHARAN AFRICA	EXPAND KAANI PRIMARY SCHOOL	100,000	WIRE			
(408)		SUB-SAHARAN AFRICA	EXPAND SCHOOL IN SUSWA KENYA	100,000	WIRE			
(409)		SUB-SAHARAN AFRICA	LION DADA DIALYSIS CENTER IN NIGERIA	100,000	WIRE			
(410)		SUB-SAHARAN AFRICA	TRACHOMA ELIMINATION, MALI	100,000	WIRE			
(411)		SUB-SAHARAN AFRICA	EXPAND PEDIATRIC ONCOLOGY CLINIC AT HOSPITAL	100,000	WIRE			
(412)		SUB-SAHARAN AFRICA	CLEAN WATER PROJECT IN SOMALIA	98,946	WIRE			
(413)		SUB-SAHARAN AFRICA	DIABETIC RETINOPATHY SCREENING USING TELEMEDICINE: CROSS-SECTORAL COORDINATION BENEFITS FOR A VITAL SIGHT-SAVING SERVICES FOR PEOPLE IN RURAL AND REMOTE AREAS	93,579	WIRE			
(414)		SUB-SAHARAN AFRICA	EXPAND CENTER FOR DIABETES	83,723	WIRE			
(415)		SUB-SAHARAN AFRICA	UPGRADE SCHOOL FOR VISUALLY	75,000	WIRE			

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			IMPAIRED					
(416)		SUB-SAHARAN AFRICA	DIABETES SCREENING AND EDUCATION IN MAURITANIA	74,100	WIRE			
(417)		SUB-SAHARAN AFRICA	CONSTRUCT SCHOOL IN KENYA	66,000	CHECK			
(418)		SUB-SAHARAN AFRICA	TRACHOMA ADVOCACY, UGANDA	52,934	WIRE			
(419)		SUB-SAHARAN AFRICA	LIONS QUEST	50,256	WIRE			
(420)		SUB-SAHARAN AFRICA	EXPAND KAANI PRIMARY SCHOOL	50,000	WIRE			
(421)		SUB-SAHARAN AFRICA	MCAT-CYCLONE IDAI	50,000	WIRE			
(422)		SUB-SAHARAN AFRICA	LIONS QUEST PROGRAM	50,000	WIRE			
(423)		SUB-SAHARAN AFRICA	EXPAND LIONS QUEST	49,935	WIRE			
(424)		SUB-SAHARAN AFRICA	LIONS QUEST	49,850	WIRE			
(425)		SUB-SAHARAN AFRICA	TRACHOMA AND ONCHOCERCIASIS ADVOCACY, ETHIOPIA	47,000	CHECK			
(426)		SUB-SAHARAN AFRICA	EQUIP LIGHTNING ROD IN UGANDA	34,656	WIRE			
(427)		SUB-SAHARAN AFRICA	EXPAND THE MP SHAH HOSPITAL LIONS DIABETES CARE CENTER	34,401	WIRE			
(428)		SUB-SAHARAN AFRICA	RENOVATE OPHTHALMOLOGY UNIT	31,238	WIRE			
(429)		SUB-SAHARAN AFRICA	ENERGY UPGRADE TO ZAMBIAN HOSPITAL	27,675	ELECTRONIC			
(430)		SUB-SAHARAN AFRICA	CLEAN WATER PROJECT IN BENIN	25,834	ELECTRONIC			
(431)		SUB-SAHARAN AFRICA	DIABETES SCREENING AND EDUCATION IN SENEGAL	25,579	WIRE			
(432)		SUB-SAHARAN AFRICA	LIONS QUEST PROGRAM	25,000	WIRE			
(433)		SUB-SAHARAN AFRICA	EXPAND HIGH SCHOOL IN BURKINA FASO	19,601	ELECTRONIC			
(434)		SUB-SAHARAN AFRICA	EXPAND ORPHANAGE IN BENIN	15,862	ELECTRONIC			
(435)		SUB-SAHARAN AFRICA	COMMUNITY RECOVERY	15,024	WIRE			
(436)		SUB-SAHARAN AFRICA	LIONS QUEST COMMUNITY PARTNERSHIP GRANT 2018	15,000	ELECTRONIC			
(437)		SUB-SAHARAN AFRICA	RENOVATE CHILD CANCER UNIT IN SOUTH AFRICA	14,482	WIRE			
(438)		SUB-SAHARAN AFRICA	CLEAN WATER PROJECT FOR SCHOOL IN BURKINA FASO	14,216	WIRE			
(439)		SUB-SAHARAN AFRICA	LETORENG PRIMARY SCHOOL	10,000	WIRE			

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(440)		SUB-SAHARAN AFRICA	DIABETES SCREENING AND EDUCATION IN KENYA AND SEYCHELLES	10,000	WIRE			
(441)		SUB-SAHARAN AFRICA	CYCLONE RELIEF	10,000	WIRE			
(442)		SUB-SAHARAN AFRICA	FLOOD RELIEF	10,000	WIRE			
(443)		SUB-SAHARAN AFRICA	FLOOD RELIEF	10,000	WIRE			
(444)		SUB-SAHARAN AFRICA	FLOOD RELIEF	10,000	WIRE			
(445)		SUB-SAHARAN AFRICA	FLOOD RELIEF	10,000	WIRE			
(446)		SUB-SAHARAN AFRICA	FLOOD RELIEF	10,000	WIRE			
(447)		SUB-SAHARAN AFRICA	MEASLES CAMPAIGN 2019 - MADAGASCAR	10,000	WIRE			
(448)		SUB-SAHARAN AFRICA	FLOOD RELIEF	10,000	WIRE			
(449)		SUB-SAHARAN AFRICA	FLOOD RELIEF	10,000	WIRE			
(450)		SUB-SAHARAN AFRICA	CYCLONE RELIEF	10,000	WIRE			
(451)		SUB-SAHARAN AFRICA	STOMA CARE TRAINING	10,000	WIRE			
(452)		SUB-SAHARAN AFRICA	FLOOD RELIEF	9,870	WIRE			

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).

Return Reference - Identifier	Explanation
SCHEDULE F, PART I, LINE 2 - PROCEDURES FOR MONITORING USE OF GRANT FUNDS	GRANT AWARDS ARE SUBJECT TO BOARD APPROVAL AND RECIPIENTS MUST MEET REQUIREMENTS NECESSARY TO RECEIVE SAID GRANT. LCIF STAFF MONITORS THE REQUIREMENTS ON A REGULAR BASIS TO ENSURE ALL AWARDS ARE PROPER. AFTER GRANTS ARE DISBURSED IN PART OR IN FULL, THE RECIPIENT MUST PROVIDE AN INTERIM OR FINAL REPORT, WHICH INCLUDES FINANCIAL DOCUMENTATION OF THE USE OF GRANT FUNDS AND LOCAL MATCHING FUNDS AND A NARRATIVE OF THE ACTIONS TAKEN IN DEVELOPING THE PROJECT. THE INTERIM OR FINAL REPORT IS INITIALLY REVIEWED AND APPROVED BY THE GRANT ADMINISTRATOR. THE REPORT IS THEN REVIEWED AND APPROVED BY THE DISTRICT CABINET (OR MULTIPLE DISTRICT COUNCIL) BEFORE SUBMISSION TO LCIF.
SCHEDULE F, PART I, LINE 3 - METHOD TO ACCOUNT FOR EXPENDITURES ON ORG'S FINANCIAL STATEMENTS	CENTRAL AMERICA AND THE CARIBBEAN: ACCRUAL EAST ASIA AND THE PACIFIC: ACCRUAL EUROPE (INCLUDING ICELAND AND GREENLAND): ACCRUAL MIDDLE EAST AND NORTH AFRICA: ACCRUAL NORTH AMERICA (CANADA & MEXICO ONLY): ACCRUAL RUSSIA AND NEIGHBORING STATES: ACCRUAL SOUTH AMERICA: ACCRUAL SOUTH ASIA: ACCRUAL SUB-SAHARAN AFRICA: ACCRUAL
SCHEDULE F, PART II, LINE 1 - METHOD TO ACCOUNT FOR EXPENDITURES ON ORG'S FINANCIAL STATEMENTS	CENTRAL AMERICA AND THE CARIBBEAN: ACCRUAL EAST ASIA AND THE PACIFIC: ACCRUAL EUROPE (INCLUDING ICELAND AND GREENLAND): ACCRUAL MIDDLE EAST AND NORTH AFRICA: ACCRUAL NORTH AMERICA (CANADA & MEXICO ONLY): ACCRUAL RUSSIA AND NEIGHBORING STATES: ACCRUAL SOUTH AMERICA: ACCRUAL SOUTH ASIA: ACCRUAL SUB-SAHARAN AFRICA: ACCRUAL

**SCHEDULE I
(Form 990)**

Department of the Treasury
Internal Revenue Service

Name of the organization

LIONS CLUBS INTERNATIONAL FOUNDATION

**Grants and Other Assistance to Organizations,
Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

▶ Attach to Form 990.

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

OMB No. 1545-0047

2018

**Open to Public
Inspection**

Employer identification number

23-7030455

Part I General Information on Grants and Assistance

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ☒ Yes ☐ No
- 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) SPECIAL OLYMPICS 1133 19TH ST NW, WASHINGTON, DC 20036	52-0889518	501 (C) 3	1,756,700				(SEE STATEMENT)
(2) (SEE STATEMENT)	13-3471559	501 (C) 3	450,000				(SEE STATEMENT)
(3) MULTIPLE DISTRICT 51 P O BOX 140511, ARECIBO, PR 00614-0511	60-0612118	501 (C) 4	250,000				(SEE STATEMENT)
(4) (SEE STATEMENT)	23-7047794	501 (C) 4	187,509				(SEE STATEMENT)
(5) DISTRICT 20 K2 29 ADELAIDE STREET, FLORAL PARK, NY 11001	11-6032817	501 (C) 4	150,000				LIONS QUEST
(6) MULTIPLE DISTRICT 51 PO BOX 140511, ARECIBO, PR 00614-0511	60-0612118	501 (C) 4	110,000				(SEE STATEMENT)
(7) DISTRICT 20 W PO BOX 674, BROWNVILLE, NY 13615	91-1937957	501 (C) 4	105,500				(SEE STATEMENT)
(8) (SEE STATEMENT)	60-0612118	501 (C) 4	104,395				(SEE STATEMENT)
(9) MULTIPLE DISTRICT 2 PO BOX 1060, RED OAK, TX 75154-1060	23-7118941	501 (C) 4	103,251				(SEE STATEMENT)
(10) DISTRICT 34 C 1407 STATE HIGHWAY 134 W, HEADLAND, AL 36345	47-2090807	501 (C) 4	100,000				(SEE STATEMENT)
(11) DISTRICT 5M 7 19790 JACKIE LANE, ROGERS, MN 55374	41-1361379	501 (C) 4	100,000				(SEE STATEMENT)
(12) (SEE STATEMENT)							

- 2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ▶ 6
- 3 Enter total number of other organizations listed in the line 1 table ▶ 103

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

Cat. No. 50055P

Schedule I (Form 990) (2018)

Part III **Grants and Other Assistance to Domestic Individuals.** Complete if the organization answered "Yes" on Form 990, Part IV, line 22.
Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
1					
2					
3					
4					
5					
6					
7					

Part IV	Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.
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(SEE STATEMENT)

Part II
Grants and Other Assistance to Governments and Organizations in the United States (continued)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(12) DISTRICT 12 N 716 HALES CHAPEL ROAD, GRAY, TN 37615	23-7215448	501 (C) 4	100,000				EQUIP HANDICAPPED ACCESSIBLE PLAYGROUND
(13) DISTRICT 37 301 SKYLINE DRIVE NE, GREAT FALLS, MT 59404	38-3951273	501 (C) 4	100,000				EQUIP MONTANA SCHOOL FOR THE DEAF & BLIND
(14) DISTRICT 30 S 1220 MEADOWOOD, COLUMBIA, MS 39429-2576	26-2492853	501 (C) 4	100,000				EQUIP HANDICAPPED ACCESSIBLE PLAYGROUND
(15) MULTIPLE DISTRICT 31 32564 BRIDGE ROAD, MT PLEASANT, NC 28124-7746	56-0652336	501 (C) 4	100,000				NORTH CAROLINA - HURRICANE FLORENCE RELIEF 2018
(16) MULTIPLE DISTRICT 43 P O BOX 1536, ELIZABETHTOWN, KY 42702	61-6039256	501 (C) 4	100,000				EQUIP KENTUCKY LIONS EYE BANK
(17) MULTIPLE DISTRICT 27 517 SEVEN NATIONS DRIVE, MADISON, WI 53713	39-1626233	501 (C) 4	99,841				EQUIP UNIVERSITY OF WISCONSIN CARBONE CANCER CENTER
(18) DISTRICT 1 D 8104 N SCHEIDER RD, FREEPORT, IL 61032	36-6111501	501 (C) 4	96,880				RENOVATE AND EQUIP VISION CENTER
(19) MULTIPLE DISTRICT 2 612 S TEXAS BLVD, WESLACO, TX 78596-6222	23-7118941	501 (C) 4	92,823				TEXAS LIONS - ROCKPORT PLAYGROUND RESTORATION PROJECT
(20) DISTRICT 11 D2 149 WHITCOMB ST, HARBOR BEACH, MI 48441-1161	38-2127647	501 (C) 4	86,577				EQUIPMENT AND RENOVATIONS FOR LIONS BEAR LAKE CAMP
(21) DISTRICT 4 C5 11323 REID PLACE, GRASS VALLEY, CA 95945	94-2525213	501 (C) 4	75,000				LOW VISION CLINIC EXPANSION
(22) MULTIPLE DISTRICT 33 43 STEWART TERRACE, BELMONT, MA 02478	83-0504460	501 (C) 4	75,000				EQUIP BOSTON CHILDREN'S HOSPITAL
(23) DISTRICT 5M 10 696 ALLAN RD, EMO, ON, P0W 1E0, CA	41-6038971	501 (C) 4	73,075				EQUIP COOK HOSPITAL LABORATORY
(24) DISTRICT 5M 6 3880 MCMENEMY STREET, VADNAIS HEIGHTS, MN 55127	23-7327790	501 (C) 4	70,255				CONSTRUCT MIRACLE LEAGUE FIELD GOLF COURSE
(25) DISTRICT 43 Y 446 WOODLAKE BLVD, TAZEWEEL, TN 37879	61-6025371	501 (C) 4	67,500				BLUEGRASS LIONS DIABETES PROJECT
(26) MULTIPLE DISTRICT 2 P O BOX 1060, RED OAK, TX 75154-1060	23-7118941	501 (C) 4	65,760				PARK VICTORIA BOULEVARD LC PARK PROJECT
(27) DISTRICT 2 S4 PO BOX 214, BLESSING, TX 77419	74-6107079	501 (C) 4	65,000				EQUIP HANDICAPPED ACCESSIBLE PLAYGROUND
(28) DISTRICT 19 H #102, 8560-156TH STREET, SURREY, BC, V3S 5K4, CA	23-7330295	501 (C) 4	57,000				RENOVATE LIONS WHEELCHAIR WAREHOUSE
(29) MIDWEST LIONS DISTRICTS 1119 N DIVISION ST, AUDUBON, IA 50025-1441	22-1205931	501 (C) 4	50,000				MCAT-US MIDWEST FLOODING 2019

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(30) DISTRICT 5M 1 PO BOX 373, PINE ISLAND, MN 55963	41-1786360	501 (C) 4	50,000				EQUIP HANDICAPPED ACCESSIBLE PLAYGROUND
(31) MULTIPLE DISTRICT 2 PO BOX 1060, RED OAK, TX 75154-1060	23-7118941	501 (C) 4	48,300				CONN BROWN HARBOR PIER PROJECT
(32) DISTRICT 5M 8 320 AUGUSTA AVE, PAYNESVILLE, MN 56362	41-1390009	501 (C) 4	47,427				ADAPTIVE BASKETBALL PROJECT FOR THE DISABLED
(33) MULTIPLE DISTRICT 35 217 EAST HIBISCUS AVE, LAKE PLACID, FL 33852	59-1148519	501 (C) 4	46,997				EQUIP SOUTHEASTERN GUIDE DOGS
(34) MULTIPLE DISTRICT 35 12750 SW 15 ST #206 D, PEMBROKE PINES, FL 33027	59-1148519	501 (C) 4	43,000				LIONS QUEST PROGRAM
(35) DISTRICT 22 B 2640 MEADOWBROOK RD, FEDERALSBURG, MD 21632-1844	52-1151659	501 (C) 4	41,000				OPHTHALMOLOGY EQUIPMENT FOR HEALTH CENTER
(36) MULTIPLE DISTRICT 7 74 MCKENZIE DR, BELLA VISTA, AR 72715	23-7052631	501 (C) 4	40,500				RETINAL IMAGING EQUIPMENT FOR REGIONAL CLINICS
(37) DISTRICT 4 L2 6720 DASHWOOD ST, LAKEWOOD , CA 90713	23-7298664	501 (C) 4	37,965				WORLD SIGHT DAY PROJECT - 2018
(38) DISTRICT 35 I 5341 FLINT STREET, ZEPHYRHILLS, FL 33542-3155	65-0718435	501 (C) 4	35,000				EQUIP MOBILE VISION SCREENING PROGRAM
(39) DISTRICT 6 W 20689 COUNTY ROAD 50, FRASER, CO 80442	84-6107261	501 (C) 4	31,875				LIONS CLUB EDUCATIONAL KITCHEN AT MOUNTAIN FAMILY CENTER
(40) DISTRICT 33 N 17 LINCOLN ST, NORTH ANDOVER, MA 01845-2701	51-0173010	501 (C) 4	30,723				PURCHASE MOBILE HEALTH SCREENING UNIT
(41) INDIANA SCHOOL FOR THE BLIND AND VISUALLY IMPAIRED 7725 NORTH COLLEGE AVE, INDIANAPOLIS, IN 46240	35-6000158	501 (C) 4	30,000				ANTHEM-ISBVI KICKOFF EVENT 2018
(42) MULTIPLE DISTRICT 2 P O BOX 1060, RED OAK , TX 75154-1060	23-7118941	501 (C) 4	30,000				PORT ARANSAS PARK & SCHOOL RECOVERY PROJECT
(43) DISTRICT 35 L 8350 SW 93RD LANE UNIT D, OCALA, FL 34481-9483	23-7330297	501 (C) 4	28,858				EQUIP LIONS EYE CLINIC
(44) DISTRICT 26 M5 P O BOX 163, ST. JOSEPH, MO 64502	83-3921401	501 (C) 4	26,585				EQUIP CHILDREN'S CENTER FOR THE VISUALLY IMPAIRED

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(45) LIONS QUEST COMMUNITY PARTNERSHIP GRANT 2018 300 W. 22ND STREET, OAK BROOK , IL 60523	N/A		25,000				LIONS QUEST COMMUNITY PARTNERSHIP GRANT 2018 IS A BLOCK GRANT APPROVED FOR \$250,000; OF THIS AMOUNT, \$225,000 HAS BEEN DISBURSED TO DATE. THE GRANTEE(S) FOR THE REMAINING \$25,000 HAS NOT BEEN DETERMINED YET.
(46) DISTRICT 4 A2 4488 W. HARLAN, RIVERDALE, CA 93656	23-7086254	501 (C) 4	24,000				PARENT ORIENTATION SPACE AT BEARSKIN MEADOW CAMP
(47) DISTRICT 12 I 3102 W END CIR, NASHVILLE, TN 37203	58-1452525	501 (C) 4	21,000				LIONS QUEST
(48) DISTRICT 20 Y 33 BERWIN ST, JOHNSON CITY, NY 13790-1703	82-2262906	501 (C) 4	20,675				DELIVERY VEHICLE AND TRAILER FOR FOOD PANTRY
(49) DISTRICT 14 F 8530 PARSON ROAD, ERIE, PA 16509	23-7326285	501 (C) 4	20,387				MEADVILLE PROJECTS FOR THE BLIND
(50) MULTIPLE DISTRICT 2 612 S TEXAS BLVD, WESLACO, TX 78596-6222	23-7118941	501 (C) 4	20,248				TEXAS LIONS - PORT ARTHUR YMCA RESTORATION PROJECT
(51) DISTRICT 15 P O BOX 284, RAWLINS, WY 82301	83-6009532	501 (C) 4	20,000				COMMUNITY RECOVERY
(52) DISTRICT 49 A 105 LINWOOD LANE, KENAI, AK 99611	92-0168503	501 (C) 4	20,000				COMMUNITY RECOVERY
(53) DISTRICT 16 J 833 IRVINTON AVE, HILLSIDE, NJ 07205	47-1326015	501 (C) 4	19,780				PURCHASE VISION SCREENING EQUIPMENT
(54) MULTIPLE DISTRICT 2 612 S TEXAS BLVD, WESLACO, TX 78596-6222	23-7118941	501 (C) 4	19,300				ARANSAS PASS YOUTH RECREATION PROGRAM
(55) DISTRICT 31 N 894 OLD 30 ROAD, JACKSONVILLE, NC 28546	47-4280673	501 (C) 4	18,750				PURCHASE VISION SCREENING EQUIPMENT
(56) DISTRICT 21 C 2248 WAPITI CIRCLE, OVERGAARD, AZ 85933	23-7305095	501 (C) 4	17,300				PURCHASE VISION SCREENING EQUIPMENT
(57) MULTIPLE DISTRICT 2 612 S TEXAS BLVD, WESLACO, TX 78596-6222	23-7118941	501 (C) 4	16,960				TEXAS LIONS - EQUIP HENDERSON MIDDLE SCHOOL PROJECT
(58) MULTIPLE DISTRICT 12 229 COUNTY ROAD 616, ATHENS, TN 37303	58-1721334	501 (C) 4	16,636				PURCHASE VISION SCREENING EQUIPMENT
(59) DISTRICT 26 M2 167 ST JOHNS ER CHURCH RD, LESLIE, MO 63056	43-6036432	501 (C) 4	15,387				EQUIP VISION SCREENING PROGRAM
(60) DISTRICT 22 D 545 S CARTER RD, SMYRNA, DE 19977	51-0325033	501 (C) 4	15,000				LIONS QUEST COMMUNITY PARTNERSHIP GRANT 2018
(61) DISTRICT 24 L 1412 BISHOP COURT, CULPEPER, VA 22701	83-1219361	501 (C) 4	15,000				LIONS QUEST COMMUNITY PARTNERSHIP GRANT 2018

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(62) DISTRICT 14 M 1837 WAMBAUGH HOLLOW RD, BERLIN, PA 15530	23-7179780	501 (C) 4	15,000				EQUIP FAYETTE COUNTY ASSOCIATION FOR THE BLIND
(63) DISTRICT 13 OH7 459 CRESTVIEW DRIVE, LANCASTER, OH 43130	23-7303298	501 (C) 4	14,580				PURCHASE VISION SCREENING EQUIPMENT
(64) DISTRICT 26 M4 35271 DIAMOND TRL, SKIDMORE, MO 64487	90-0902852	501 (C) 3	13,970				PURCHASE VISION SCREENING EQUIPMENT
(65) DISTRICT 24 L C/O 12597 FASCIA CT., WOODBRIDGE, VA 22192	83-1219361	501 (C) 4	13,500				LIONS EMPOWERING AND AIDING REGIONAL NURSES IN SCHOOLS
(66) LOUISIANA LIONS EYE FOUNDATION 2020 GRAVIER ST, NEW ORLEANS, LA 70112	23-7384897	501 (C) 3	12,660				BALDRIDGE ENDOWMENT FUND FOR SIGHT
(67) DISTRICT 35 O 169 MONTECITO BLVD, SATELLITE BEACH, FL 32937	23-7332945	501 (C) 4	11,975				PURCHASE VISION SCREENING EQUIPMENT
(68) DISTRICT 2 T2 9101 HOPE AVENUE, LUBBOCK, TX 79424	23-7292338	501 (C) 4	11,460				PURCHASE VISION SCREENING EQUIPMENT
(69) DISTRICT 5M 10 BOX 156, EMO, ON, P0W 1E0, CA	41-6038971	501 (C) 4	11,211				PURCHASE VISION SCREENING EQUIPMENT
(70) DISTRICT 11 A2 29315 TAYLOR STREET, SAINT CLAIR SHORES, MI 48081	23-7148616	501 (C) 4	10,805				EQUIP EVERSIGHT OF MICHIGAN
(71) DISTRICT 43 K 3634 STONE VALLEY DR, HOPKINSVILLE, KY 42240-3634	31-0919835	501 (C) 4	10,635				PURCHASE VISION SCREENING EQUIPMENT
(72) DISTRICT 14 B 3402 FIELDCREST DRIVE, NORTH VERSAILLES, PA 15137	90-0628055	501 (C) 4	10,600				COMMUNITY RECOVERY
(73) DISTRICT 19 C % LACEY SUNRISE LIONS CLUB, OLYMPIA, WA 98513	37-1611850	501 (C) 4	10,000				TORNADO RELIEF
(74) DISTRICT 26 M7 108 E FRANKLIN, OWENSVILLE, MO 65066-1502	N/A		10,000				TORNADO RELIEF
(75) DISTRICT 26 M4 35271 DIAMOND TRL, SKIDMORE, MO 64487	90-0902852	501 (C) 3	10,000				FLOOD RELIEF
(76) DISTRICT 27 D1 3674 SCHNEIDER RD, STOUGHTON, WI 53589	23-7274219	501 (C) 4	10,000				FLOOD RELIEF
(77) DISTRICT 31 N 894 OLD 30 ROAD, JACKSONVILLE, NC 28546	47-4280673	501 (C) 4	10,000				HURRICANE RELIEF
(78) DISTRICT 9 SW 404 W. JACKSON ST., PANORA, IA 50216	33-1205931	501 (C) 4	10,000				FLOOD RELIEF
(79) DISTRICT 13 OH6 4791 BLUE SPRUCE CT, DAYTON, OH 45424-4638	31-1181905	501 (C) 4	10,000				TORNADO RELIEF
(80) DISTRICT 4 L3 1978 CADDINGTON DRIVE, RANCHO PALOS VERDES, CA 90275-2011	23-7305419	501 (C) 4	10,000				PURCHASE VISION SCREENING EQUIPMENT

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(81) DISTRICT 44 N 65 WALLACE ROAD, GOFFSTOWN, NH 03045-1823	22-2484366	501 (C) 4	10,000				EQUIP LIONS CAMP FOR THE DISABLED
(82) DISTRICT 4 C1 3250 COWGILL LANE, REDDING, CA 96003	23-7327243	501 (C) 4	10,000				WILDFIRE RELIEF
(83) DISTRICT 35 O 169 MONTECITO BLVD, SATELLITE BEACH, FL 32937	23-7332945	501 (C) 4	10,000				DISASTER PREPAREDNESS
(84) DISTRICT 2 S4 PO BOX 214, BLESSING, TX 77419	74-6107079	501 (C) 4	10,000				DISASTER PREPAREDNESS
(85) DISTRICT 37 POPLAR PLACE, APT #1, FORSYTH, MT 59327	38-3951273	501 (C) 4	10,000				DISASTER PREPAREDNESS
(86) DISTRICT 4 C1 3250 COWGILL LANE, REDDING, CA 96003	23-7327243	501 (C) 4	10,000				WILDFIRE RELIEF
(87) DISTRICT 11 E1 3972 W HARSH DRIVE, COLEMAN, MI 48618-9529	51-0199789	501 (C) 4	10,000				TORNADO RELIEF
(88) DISTRICT 32 C 714 WOODLAND DRIVE, KINGSTREE, SC 29556-2632	30-0327084	501 (C) 4	10,000				HURRICANE RELIEF
(89) DISTRICT 204 P.O.BOX 20416 GMF, BARRIGADA, GU 96921	66-0634946	501 (C) 4	10,000				TYPHOON RELIEF
(90) DISTRICT 2 A1 3602 SPRINGMONT, MIDLAND, TX 79707-4113	23-7194746	501 (C) 4	10,000				FLOOD RELIEF
(91) DISTRICT 204 P.O.BOX 20416 GMF, BARRIGADA, GU 96921	66-0634946	501 (C) 4	10,000				TYPHOON RELIEF
(92) DISTRICT 2 A1 3602 SPRINGMONT, MIDLAND, TX 79707-4113	23-7194746	501 (C) 4	10,000				FLOOD RELIEF
(93) DISTRICT 4 C1 3250 COWGILL LANE, REDDING, CA 96003	23-7327243	501 (C) 4	10,000				WILDFIRE RELIEF
(94) DISTRICT 4 L1 34404 MABANA RD, AGUA DULCE, CA 91390	95-3287605	501 (C) 4	10,000				WILDFIRE RELIEF
(95) DISTRICT 2 S5 5451 TIMBERWOOD, COLLEGE STATION, TX 77845	74-2549056	501 (C) 4	10,000				TORNADO RELIEF
(96) DISTRICT 17 A 14726 S MURRAY LN, OLATHE, KS 66062	48-0942086	501 (C) 4	10,000				TORNADO RELIEF
(97) DISTRICT 13 OH5 26808 KINGSTON PIKE, CIRCLEVILLE, OH 43113-9715	23-7316782	501 (C) 4	10,000				TORNADO RELIEF
(98) DISTRICT 12 S 745 BEREIA CHURCH ROAD, LEBANON, TN 37087-7927	46-1298726	501 (C) 4	10,000				AUSTIN JENNINGS PROGRAM CENTER FOR YOUTH
(99) DISTRICT 35 L 7543 ROLLING HILLS DR., JACKSONVILLE, FL 32221-6144	23-7330297	501 (C) 4	10,000				HURRICANE RELIEF

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(100) DISTRICT 14 U 3 LACAWAC RD BLDG C, LAKE ARIEL, PA 18436-9736	23-2109286	501 (C) 4	9,887				FLOOD RELIEF
(101) DISTRICT 27 D2 2010 GRUMANN DRIVE, TOMAH, WI 54660	39-1459472	501 (C) 4	9,675				FLOOD RELIEF
(102) DISTRICT 38 O 6078 COUNTY ROAD 31, BLAIR, NE 68008	46-0637028	501 (C) 4	9,263				FLOOD RELIEF
(103) DISTRICT 26 M4 RONALD CAMPBELL, ST. JOSEPH, MO 64502	90-0902852	501 (C) 3	8,905				DISASTER PREPAREDNESS
(104) DISTRICT 4 C5 11323 REID PLACE, GRASS VALLEY, CA 95945	94-2525213	501 (C) 4	8,518				DISASTER PREPAREDNESS
(105) DISTRICT 38 N 17124 LAFAYETTE CR, OMAHA, NE 68118	47-0701627	501 (C) 4	8,056				FLOOD RELIEF
(106) DISTRICT 30 M 107 YOUNG ST, WATER VALLEY, MS 38965-2913	64-6027945	501 (C) 4	7,998				TORNADO RELIEF
(107) DISTRICT 12 I 3102 W END CIR, NASHVILLE, TN 37203	58-1452525	501 (C) 4	6,964				FLOOD RELIEF
(108) DISTRICT 4 C2 6061 DONNA COURT, ROHNERT PARK, CA 94928-5801	23-7151956	501 (C) 4	6,542				WILDFIRE RELIEF
(109) DISTRICT 31 O 4304 WATERBRIDGE CT., GIBSONVILLE, NC 27249	47-4477974	501 (C) 4	5,376				HURRICANE RELIEF

Part IV

Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information.

Return Reference - Identifier	Explanation
SCHEDULE I, PART I, LINE 2 - PROCEDURES FOR MONITORING USE OF GRANT FUNDS.	GRANT AWARDS ARE SUBJECT TO BOARD APPROVAL AND RECIPIENTS MUST MEET REQUIREMENTS NECESSARY TO RECEIVE SAID GRANT. LCIF STAFF MONITORS THE REQUIREMENTS ON A REGULAR BASIS TO ENSURE ALL AWARDS ARE PROPER. AFTER GRANTS ARE DISBURSED IN PART OR IN FULL, THE RECIPIENT MUST PROVIDE AN INTERIM OR FINAL REPORT, WHICH INCLUDES FINANCIAL DOCUMENTATION OF THE USE OF GRANT FUNDS AND LOCAL MATCHING FUNDS AND A NARRATIVE OF THE ACTIONS TAKEN IN DEVELOPING THE PROJECT. THE INTERIM OR FINAL REPORT IS INITIALLY REVIEWED AND APPROVED BY THE GRANT ADMINISTRATOR. THE REPORT IS THEN REVIEWED AND APPROVED BY THE DISTRICT CABINET (OR MULTIPLE DISTRICT COUNCIL) BEFORE SUBMISSION TO LCIF.
SCHEDULE I, PART II, COLUMN A - NAME AND ADDRESS OF ORGANIZATION OR GOVERNMENT	RESEARCH TO PREVENT BLINDNESS, INC. 360 LEXINGTON AVE., 22ND FLOOR, NEW YORK, NY 10017
SCHEDULE I, PART II, COLUMN A - NAME AND ADDRESS OF ORGANIZATION OR GOVERNMENT	MULTIPLE DISTRICT 11 19230 SHARON VALLEY RD, MANCHESTER, MI 48158
SCHEDULE I, PART II, COLUMN A - NAME AND ADDRESS OF ORGANIZATION OR GOVERNMENT	MULTIPLE DISTRICT 51 322V MANSIONES DE BAIROA, CAGUAS, PR 00717-1174
SCHEDULE I, PART II, COLUMN H - PURPOSE OF GRANT OR ASSISTANCE	SPECIAL OLYMPICS: LCI - SPECIAL OLYMPICS PARTNERSHIP
SCHEDULE I, PART II, COLUMN H - PURPOSE OF GRANT OR ASSISTANCE	RESEARCH TO PREVENT BLINDNESS, INC.: RESEARCH TO PREVENT BLINDNESS/LCIF LOW VISION AWARD
SCHEDULE I, PART II, COLUMN H - PURPOSE OF GRANT OR ASSISTANCE	MULTIPLE DISTRICT 51: PUERTO RICO HOMES RECONSTRUCTION- PHASE II
SCHEDULE I, PART II, COLUMN H - PURPOSE OF GRANT OR ASSISTANCE	MULTIPLE DISTRICT 11: MICHIGAN DEFENSE AGAINST DIABETES
SCHEDULE I, PART II, COLUMN H - PURPOSE OF GRANT OR ASSISTANCE	MULTIPLE DISTRICT 51: PUERTO RICO HOMES RECONSTRUCTION
SCHEDULE I, PART II, COLUMN H - PURPOSE OF GRANT OR ASSISTANCE	DISTRICT 20 W: INCREASED ACCESS TO ENHANCED DIABETES EDUCATION
SCHEDULE I, PART II, COLUMN H - PURPOSE OF GRANT OR ASSISTANCE	MULTIPLE DISTRICT 51: HURRICANE MARIA DISASTER RELIEF
SCHEDULE I, PART II, COLUMN H - PURPOSE OF GRANT OR ASSISTANCE	MULTIPLE DISTRICT 2: KINGWOOD HIGH SCHOOL EQUIPMENT REPLACEMENT
SCHEDULE I, PART II, COLUMN H - PURPOSE OF GRANT OR ASSISTANCE	DISTRICT 34 C: EQUIP MIRACLE LEAGUE FIELD OF ALABAMA
SCHEDULE I, PART II, COLUMN H - PURPOSE OF GRANT OR ASSISTANCE	DISTRICT 5M 7: UPGRADES TO MIRACLE LEAGUE FIELD

SCHEDULE J
(Form 990)

Department of the Treasury
Internal Revenue Service

Name of the organization

LIONS CLUBS INTERNATIONAL FOUNDATION

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

2018

Open to Public Inspection

Employer identification number

23-7030455

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 checked="" type="checkbox"/> First-class or charter travel | <input type="checkbox"/> Housing allowance or residence for personal use |
| <input checked="" type="checkbox"/> Travel for companions | <input type="checkbox"/> Payments for business use of personal residence |
| <input checked="" 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 filing 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 type="checkbox"/> Compensation committee | <input checked="" 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

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)(i)–(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.

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)–(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
1	REBECCA DAOU	210,728	0	90	34,460	23,945	269,223	0
	LCIF EXECUTIVE ADMINISTRATOR	0	0	0	0	0	0	0
2								
3								
4								
5								
6								
7								
8								
9								
10								
11								
12								
13								
14								
15								
16								

Part III

Supplemental Information. 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.

Return Reference - Identifier	Explanation
SCHEDULE J, PART I, LINE 1A - FIRST-CLASS OR CHARTER TRAVEL	<p>1. FIRST CLASS AIRFARE IS AUTHORIZED FOR EXECUTIVE OFFICERS, DUE TO THEIR EXTENSIVE TRAVEL REQUIREMENTS, AND IS NOT TAXABLE TO THEM. IT MAY ALSO BE AUTHORIZED FOR THE CHAIRMAN AND VICE CHAIRPERSON OF THE LCIF FUNDRAISING CAMPAIGNS, DUE TO THEIR EXTENSIVE TRAVEL REQUIREMENTS AND IS NOT TAXABLE TO THEM.</p> <p>2. FIRST CLASS AIRFARE IS AUTHORIZED FOR PAST INTERNATIONAL PRESIDENTS AND THEIR COMPANIONS FOR ROUNDTrip TRAVEL EXCEEDING 10 HOURS AND IS TAXABLE TO THEM.</p>
SCHEDULE J, PART I, LINE 1A - TAX INDEMNIFICATION AND GROSS-UP PAYMENTS	<p>THE CHIEF OF PHILANTHROPY WAS HIRED IN MAY 2018 AND HIS JOB OFFER INCLUDED THE REIMBURSEMENT OF MOVING EXPENSES SINCE HE WAS MOVING FROM A DIFFERENT STATE. NEW TAX LAWS, EFFECTIVE JANUARY 1, 2018, SUSPENDED THE EXCLUSION FOR QUALIFIED MOVING EXPENSE REIMBURSEMENT. THEREFORE, THE PAYMENT FOR THE REIMBURSEMENT OF THESE EXPENSES WAS GROSSED UP TO COVER THE RELATED TAX LIABILITY. THE ENTIRE AMOUNT OF THIS PAYMENT WAS INCLUDED AS TAXABLE COMPENSATION TO THE EMPLOYEE.</p>
SCHEDULE J, PART I, LINE 1A - TRAVEL FOR COMPANIONS	<p>TRAVEL EXPENSES FOR A COMPANION ACCOMPANYING THE TWO PRESIDENTIAL APPOINTEES TO THE LCIF BOARD OF TRUSTEES, WHEN ATTENDING THE LCIF EXECUTIVE COMMITTEE MEETINGS THAT IMMEDIATELY PRECEDE THE LCI BOARD OF DIRECTORS MEETINGS, WILL BE REIMBURSED ACCORDING TO LIONS CLUBS INTERNATIONAL FOUNDATION'S GENERAL REIMBURSEMENT RULES IF THE COMPANION IS PRESENT AT SCHEDULED LIONS CLUBS INTERNATIONAL FUNCTIONS AND EVENTS, AND WILL NOT BE TAXABLE TO THEM. REIMBURSEMENT WILL NOT BE PROVIDED IF THE COMPANION DOES NOT ATTEND SCHEDULED FUNCTIONS AND EVENTS.</p> <p>TRAVEL EXPENSES FOR A COMPANION ACCOMPANYING THE LCIF EXECUTIVE ADMINISTRATOR WILL BE REIMBURSED ACCORDING TO LIONS CLUBS INTERNATIONAL FOUNDATION'S GENERAL REIMBURSEMENT RULES AND IS TAXABLE TO THEM.</p> <p>IN ADDITION, THE LCIF CHAIRPERSON MAY AUTHORIZE TRAVEL ON BEHALF OF LCIF, INCLUDING COMPANION TRAVEL, PROVIDED SUCH TRAVEL IS IN ACCORDANCE WITH THE GENERAL REIMBURSEMENT POLICY AND THE EXPENSE IS COVERED WITHIN THE LCIF BUDGET.</p>

SCHEDULE M
(Form 990)

Department of the Treasury
Internal Revenue Service

Noncash Contributions

- ▶ **Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.**
▶ **Attach to Form 990.**
▶ **Go to www.irs.gov/Form990 for instructions and the latest information.**

OMB No. 1545-0047

2018

**Open to Public
Inspection**

Name of the organization

LIONS CLUBS INTERNATIONAL FOUNDATION

Employer identification number

23-7030455

Part I **Types of Property**

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art—Works of art				
2 Art—Historical treasures				
3 Art—Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities—Publicly traded	✓	16	61,520	MARKET VALUE
10 Securities—Closely held stock				
11 Securities—Partnership, LLC, or trust interests				
12 Securities—Miscellaneous				
13 Qualified conservation contribution—Historic structures				
14 Qualified conservation contribution—Other				
15 Real estate—Residential				
16 Real estate—Commercial				
17 Real estate—Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ▶ ()				
26 Other ▶ ()				
27 Other ▶ ()				
28 Other ▶ ()				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement **29** 0

	Yes	No
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period?		✓
b If "Yes," describe the arrangement in Part II.		
31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?	✓	
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?		✓
b If "Yes," describe in Part II.		
33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.		

Part II

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

Return Reference - Identifier	Explanation
SCHEDULE M, PART I - EXPLANATIONS OF REPORTING METHOD FOR NUMBER OF CONTRIBUTIONS	SECURITIES - PUBLICLY TRADED - NUMBER OF CONTRIBUTIONS

**SCHEDULE O
(Form 990 or 990-EZ)**Department of 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 990-EZ.
- ▶ Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2018

Open to Public Inspection

Name of the Organization
LIONS CLUBS INTERNATIONAL FOUNDATIONEmployer Identification Number
23-7030455

Return Reference - Identifier	Explanation
FORM 990, PART III, LINE 4B - PROGRAM SERVICE DESCRIPTION	<p>*MORE THAN 898 THOUSAND SIGHT-SAVING SURGERIES TO REVERSE THE ADVANCED STAGE OF TRACHOMA</p> <p>SIGHTFIRST INVESTMENTS HAVE ALSO BEEN CRITICAL IN HELPING THE GOVERNMENTS OF COLOMBIA, ECUADOR, GUATEMALA AND MEXICO ELIMINATE ONCHOCERCIASIS TRANSMISSION AS WELL AS SIGNIFICANTLY REDUCE THE IMPACT OF THE DISEASE IN CAMEROON, ETHIOPIA, MALI AND UGANDA.</p>
FORM 990, PART III, LINE 4D - DESCRIPTION OF OTHER PROGRAM SERVICES	<p>(EXPENSES \$4,643,499 INCLUDING GRANTS OF \$4,643,499)(REVENUE \$0)</p> <p>DISASTER RELIEF - LCIF IMPLEMENTS A GRASSROOTS MODEL OF DISASTER RELIEF THROUGH EMERGENCY AND MAJOR CATASTROPHE GRANTS. THESE GRANTS ARE IMMEDIATELY AVAILABLE TO LOCAL LIONS IN AREAS AFFECTED BY NATURAL DISASTERS, SUCH AS HURRICANES, EARTHQUAKES, AND FLOODS, AND CAN BE USED FIRST FOR IMMEDIATE NEEDS AND LATER FOR LONG-TERM RECONSTRUCTION. IMMEDIATELY AFTER A DISASTER, LIONS QUICKLY ASSESS THE MOST URGENT NEEDS AND USE EMERGENCY GRANT FUNDS TO DELIVER BASICS SUCH AS WATER, FOOD, CLOTHING AND MEDICINE. AFTER IMMEDIATE NEEDS ARE MET, MAJOR CATASTROPHE FUNDS ARE USED TO REBUILD THE LIVES OF THOSE AFFECTED BY PROVIDING KEY INFRASTRUCTURE SUCH AS HOUSING, SCHOOLS, AND OTHER IMPORTANT COMMUNITY BUILDINGS. TO DATE, NEARLY 4,619 EMERGENCY GRANTS HAVE BEEN AWARDED WORLDWIDE.</p>
FORM 990, PART V, LINE 2 - NUMBER OF EMPLOYEES REPORTED ON W-3	<p>THE INTERNATIONAL ASSOCIATION OF LIONS CLUBS (EIN: 36-1263962), A RELATED ORGANIZATION, IS THE COMMON PAYMASTER FOR LIONS CLUBS INTERNATIONAL FOUNDATION; THEREFORE, ALL APPLICABLE IRS TAX COMPLIANCE FILINGS RELATING TO BOTH OF THE ORGANIZATION'S EMPLOYEES ARE REPORTED BY THE ASSOCIATION. THE FOUNDATION HAS 77 EMPLOYEES, THE INTERNATIONAL ASSOCIATION OF LIONS CLUBS, THE COMMON PAYING AGENT, REPORTED 389 EMPLOYEES ON FORM W-3 FOR 2018.</p>
FORM 990, PART VI, LINE 1A - DELEGATE BROAD AUTHORITY TO A COMMITTEE	<p>THE EXECUTIVE COMMITTEE SHALL BE COMPRISED OF NO MORE THAN TEN (10) MEMBERS. THE CHAIRPERSON OF THE FOUNDATION, THE VICE CHAIRPERSON OF THE FOUNDATION, THE TREASURER OF THE FOUNDATION, THE SECRETARY OF THE FOUNDATION, THE EXECUTIVE OFFICERS OF THE INTERNATIONAL ASSOCIATION OF LIONS CLUBS AND TWO LCIF TRUSTEES APPOINTED BY THE PRESIDENT OF THE INTERNATIONAL ASSOCIATION OF LIONS CLUBS SHALL COMPRISE THE EXECUTIVE COMMITTEE OF THE BOARD OF TRUSTEES, BY AND WITH THE APPROVAL OF SAID BOARD OF TRUSTEES, WHICH COMMITTEE MAY ACT FOR AND ON BEHALF OF THE BOARD OF TRUSTEES ONLY WHEN THE MEMBERS OF SAID BOARD ARE NOT ASSEMBLED IN SESSION. NO BOARD ACTION SHALL BE ALTERED, AMENDED OR RESCINDED BY THE EXECUTIVE COMMITTEE. THE PRESENCE OF SIX (6) MEMBERS OF SAID COMMITTEE SHALL CONSTITUTE A QUORUM AT ANY MEETING THEREOF. THE ACT OF A MAJORITY OF SUCH MEMBERS SHALL BE THE ACT OF THE COMMITTEE. SAID COMMITTEE MAY TRANSACT BUSINESS BY TELEPHONE CONFERENCE CALL OR OTHER ELECTRONIC OR SUITABLE MEANS PROVIDED SIX (6) MEMBERS PARTICIPATE THEREIN, AND THE VOTE OF A MAJORITY OF THE MEMBERS PARTICIPATING SHALL BE CONSIDERED THE ACT OF THE COMMITTEE. THE EXECUTIVE COMMITTEE SHALL MEET IMMEDIATELY BEFORE THE OCTOBER/NOVEMBER AND MARCH/APRIL LCI BOARD OF DIRECTORS MEETINGS AND AT OTHER TIMES AS MAY BE NECESSARY, TO PREPARE RECOMMENDATIONS FOR CONSIDERATION AND ACTION BY THE BOARD OF TRUSTEES.</p>
FORM 990, PART VI, LINE 11B - REVIEW OF FORM 990 BY GOVERNING BODY	<p>1. THE LCIF MANAGER OF FINANCIAL PLANNING AND ANALYSIS IS RESPONSIBLE FOR THE TIMELY PREPARATION OF THE FORM 990. THE LIONS CLUBS INTERNATIONAL FOUNDATION EXECUTIVE ADMINISTRATOR AND LIONS CLUBS INTERNATIONAL TREASURER ALSO REVIEW.</p> <p>2. THE LCIF FINANCE COMMITTEE REVIEWS THE DRAFT TAX RETURN AT ITS JANUARY MEETING. ALSO, A COMPLETED FORM 990 WILL BE PROVIDED TO THE FOUNDATION'S BOARD OF TRUSTEES VIA A SECURE WEBSITE. ALL QUESTIONS AND CONCERNS WILL BE ADDRESSED BY STAFF OF LIONS CLUBS INTERNATIONAL FOUNDATION PRIOR TO FILING.</p>

Return Reference - Identifier	Explanation																																												
FORM 990, PART VI, LINE 12C - CONFLICT OF INTEREST POLICY	<p>BY BOARD POLICY, EACH MEMBER OF THE BOARD OF TRUSTEES, INCLUDING APPOINTEES, KEY MANAGEMENT PERSONNEL, AND ALL EMPLOYEES ARE REQUIRED TO SUBMIT AN ANNUAL STATEMENT ACKNOWLEDGING THE CONFLICT OF INTEREST POLICY AND THEIR INDIVIDUAL COMPLIANCE. THE ANNUAL STATEMENT IS SUBMITTED TO THE LIONS CLUBS INTERNATIONAL FINANCE AND HEADQUARTERS OPERATION COMMITTEE FOR REVIEW.</p> <p>PROCEDURES:</p> <p>1. IN CONNECTION WITH ANY ACTUAL OR POSSIBLE CONFLICTS OF INTEREST, THE INTERESTED PERSON (AN INDIVIDUAL THAT HAS A DIRECT OR INDIRECT FINANCIAL INTEREST) MUST DISCLOSE THE EXISTENCE OF HIS OR HER FINANCIAL INTEREST AND MUST BE GIVEN THE OPPORTUNITY TO DISCLOSE ALL MATERIAL FACTS TO THE DIRECTORS AND MEMBERS OF COMMITTEES WITH BOARD DELEGATED POWERS CONSIDERING THE PROPOSED TRANSACTION OR ARRANGEMENT.</p> <p>2. AFTER DISCLOSURE OF THE FINANCIAL INTEREST AND ALL MATERIAL FACTS, AND AFTER ANY DISCUSSION WITH THE INTERESTED PERSON, HE/SHE SHALL LEAVE THE BOARD OR COMMITTEE MEETING WHILE THE DETERMINATION OF A CONFLICT OF INTEREST IS DISCUSSED AND VOTED UPON. THE REMAINING BOARD OR COMMITTEE MEMBERS SHALL DECIDE IF A CONFLICT OF INTEREST EXISTS.</p> <p>3. IF A MORE ADVANTAGEOUS TRANSACTION OR ARRANGEMENT IS NOT REASONABLY ATTAINABLE UNDER CIRCUMSTANCES THAT WOULD NOT GIVE RISE TO A CONFLICT OF INTEREST, THE BOARD OR COMMITTEE SHALL DETERMINE BY A MAJORITY VOTE OF THE DISINTERESTED DIRECTORS WHETHER THE TRANSACTION OR ARRANGEMENT IS IN THE ASSOCIATION'S BEST INTEREST AND FOR ITS OWN BENEFIT AND WHETHER THE TRANSACTION IS FAIR AND REASONABLE TO THE ASSOCIATION AND SHALL MAKE ITS DECISION AS TO WHETHER TO ENTER INTO THE TRANSACTION OR ARRANGEMENT IN CONFORMITY WITH SUCH DETERMINATION.</p>																																												
FORM 990, PART VI, LINE 15A - PROCESS TO ESTABLISH COMPENSATION OF TOP MANAGEMENT OFFICIAL	<p>LIONS CLUBS INTERNATIONAL FOUNDATION'S SALARY ADMINISTRATION (NOTE: SALARY REVIEW IS ADMINISTERED BY LIONS CLUBS INTERNATIONAL ON BEHALF OF LIONS CLUBS INTERNATIONAL FOUNDATION.)</p> <p>1. SALARY SURVEYS ARE CONDUCTED PERIODICALLY TO ASSURE THE SALARY RANGES AND SALARY INCREASE FIGURES USED ARE COMPARABLE TO SALARIES PAID BY THE EXISTING LABOR MARKET.</p> <p>2. A PERFORMANCE REVIEW OF THE EXECUTIVE ADMINISTRATOR IS CONDUCTED ANNUALLY BY THE LIONS CLUBS INTERNATIONAL FOUNDATION EXECUTIVE COMMITTEE. SALARY INCREASE AND/OR BONUS FOR THE EXECUTIVE ADMINISTRATOR SHALL BE DETERMINED INDIVIDUALLY BY THE EXECUTIVE COMMITTEE, ACTING IN CAPACITY OF THE COMPENSATION COMMITTEE.</p> <p>3. THE SALARY REVIEW PROCESS IS CONTEMPORANEOUSLY DOCUMENTED</p>																																												
FORM 990, PART VI, LINE 15B - PROCESS FOR ESTABLISHING COMPENSATION	THE FOUNDATION DOES NOT HAVE ANY OTHER OFFICERS OR KEY EMPLOYEES; THEREFORE, THIS QUESTION HAS BEEN INTENTIONALLY CHECKED "NO."																																												
FORM 990, PART VI, LINE 17 - STATES WITH WHICH A COPY OF THIS FORM 990 IS REQUIRED TO BE FILED	CO, CT, FL, GA, HI, IL, KS, KY, LA, MA, MD, MI, MN, MS, NC, NH, NJ, NM, NY, OH, OR, PA, RI, SC, TN, UT, VA, WI, WV																																												
FORM 990, PART VI, LINE 18 - HOW FORMS ARE MADE AVAILABLE TO THE PUBLIC	<p>LIONS CLUBS INTERNATIONAL FOUNDATION'S FORM 990 IS AVAILABLE BY USING THE SEARCH ENGINE ON THE WEBSITE AT WWW.LCIF.ORG.</p> <p>THE FOUNDATION'S FORM 990-T AND UNSIGNED FORM 1023 ARE AVAILABLE UPON REQUEST.</p> <p>A CURRENT COPY OF THE FOUNDATION'S 501(C)(3) DETERMINATION LETTER FROM THE IRS IS ALSO AVAILABLE UPON REQUEST.</p>																																												
FORM 990, PART VI, LINE 19 - REQUIRED DOCUMENTS AVAILABLE TO THE PUBLIC	<p>LIONS CLUBS INTERNATIONAL FOUNDATION'S AUDITED FINANCIAL STATEMENTS ARE AVAILABLE BY USING THE SEARCH ENGINE ON THE WEBSITE AT WWW.LCIF.ORG.</p> <p>THE FOUNDATION'S GOVERNING DOCUMENTS AND CONFLICT OF INTEREST POLICY ARE NOT MADE AVAILABLE TO THE PUBLIC.</p>																																												
FORM 990, PART IX, LINE 11G - OTHER FEES FOR SERVICES	<table><tr><th>(a) Description</th><th>(b) Total Expenses</th><th>(c) Program Service Expenses</th><th>(d) Management and General Expenses</th><th>(e) Fundraising Expenses</th></tr><tr><td>PROFESSIONAL FEES</td><td>1,747,832</td><td>1,293,921</td><td>53,307</td><td>400,604</td></tr><tr><td>ALLOCATION</td><td>3,637,362</td><td>1,221,947</td><td>1,604,339</td><td>811,076</td></tr><tr><td>LIONS QUEST PROGRAM DEVELOPMENT</td><td>217,456</td><td>217,456</td><td></td><td></td></tr><tr><td>AUXILIARY STAFF EXPENSES</td><td>145,894</td><td></td><td></td><td>145,894</td></tr><tr><td>LIONS QUEST FULFILLMENT/WAREHOUSE SERVICES</td><td>132,046</td><td>132,046</td><td></td><td></td></tr><tr><td>TRANSLATION EXPENSE</td><td>135,596</td><td>11,010</td><td>3,633</td><td>120,953</td></tr><tr><td>FUNDRAISING LOAN STAFF SERVICES</td><td>1,656,000</td><td></td><td></td><td>1,656,000</td></tr></table>					(a) Description	(b) Total Expenses	(c) Program Service Expenses	(d) Management and General Expenses	(e) Fundraising Expenses	PROFESSIONAL FEES	1,747,832	1,293,921	53,307	400,604	ALLOCATION	3,637,362	1,221,947	1,604,339	811,076	LIONS QUEST PROGRAM DEVELOPMENT	217,456	217,456			AUXILIARY STAFF EXPENSES	145,894			145,894	LIONS QUEST FULFILLMENT/WAREHOUSE SERVICES	132,046	132,046			TRANSLATION EXPENSE	135,596	11,010	3,633	120,953	FUNDRAISING LOAN STAFF SERVICES	1,656,000			1,656,000
(a) Description	(b) Total Expenses	(c) Program Service Expenses	(d) Management and General Expenses	(e) Fundraising Expenses																																									
PROFESSIONAL FEES	1,747,832	1,293,921	53,307	400,604																																									
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FUNDRAISING LOAN STAFF SERVICES	1,656,000			1,656,000																																									

Return Reference - Identifier	Explanation	
FORM 990, PART XI, LINE 9 - OTHER CHANGES IN NET ASSETS OR FUND BALANCES	(a) Description	(b) Amount
	RECOVERIES OF PRIOR YEAR GRANTS NETTED AGAINST GRANT EXPENSE ON AUDITED FINANCIAL STATEMENTS	1,488,513

**SCHEDULE R
(Form 990)**

Department of the Treasury
Internal Revenue Service

Name of the organization

LIONS CLUBS INTERNATIONAL FOUNDATION

Related Organizations and Unrelated Partnerships

► Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

► Attach to Form 990.

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

OMB No. 1545-0047

2018

**Open to Public
Inspection**

Employer identification number

23-7030455

Part I Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					

Part II Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related tax-exempt organizations during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No
(1) (SEE STATEMENT)							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							

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

Cat. No. 50135Y

Schedule R (Form 990) 2018

Part III Identification of Related Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a partnership during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512—514)	(f) Share of total income	(g) Share of end-of- year assets	(h) Disproportionate allocations?		(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	
(1)												
(2)												
(3)												
(4)												
(5)												
(6)												
(7)												

Part IV Identification of Related Organizations Taxable as a Corporation or Trust. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a corporation or trust during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?	
								Yes	No
(1) (SEE STATEMENT)									
(2)									
(3)									
(4)									
(5)									
(6)									
(7)									

Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.**Note:** Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

	Yes	No
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II–IV?		
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	1a	✓
b Gift, grant, or capital contribution to related organization(s)	1b	✓
c Gift, grant, or capital contribution from related organization(s)	1c	✓
d Loans or loan guarantees to or for related organization(s)	1d	✓
e Loans or loan guarantees by related organization(s)	1e	✓
f Dividends from related organization(s)	1f	✓
g Sale of assets to related organization(s)	1g	✓
h Purchase of assets from related organization(s)	1h	✓
i Exchange of assets with related organization(s)	1i	✓
j Lease of facilities, equipment, or other assets to related organization(s)	1j	✓
k Lease of facilities, equipment, or other assets from related organization(s)	1k	✓
l Performance of services or membership or fundraising solicitations for related organization(s)	1l	✓
m Performance of services or membership or fundraising solicitations by related organization(s)	1m	✓
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n	✓
o Sharing of paid employees with related organization(s)	1o	✓
p Reimbursement paid to related organization(s) for expenses	1p	✓
q Reimbursement paid by related organization(s) for expenses	1q	✓
r Other transfer of cash or property to related organization(s)	1r	✓
s Other transfer of cash or property from related organization(s)	1s	✓

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.

(a) Name of related organization	(b) Transaction type (a–s)	(c) Amount involved	(d) Method of determining amount involved
THE INTERNATIONAL ASSOCIATION OF LIONS CLUBS	M	3,637,362	COST
(1) THE INTERNATIONAL ASSOCIATION OF LIONS CLUBS	P	5,704,045	COST
(2)			
(3)			
(4)			
(5)			
(6)			

Part VI **Unrelated Organizations Taxable as a Partnership.** Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512–514)	(e) Are all partners section 501(c)(3) organizations?		(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
				Yes	No			Yes	No		Yes	No	
(1)													
(2)													
(3)													
(4)													
(5)													
(6)													
(7)													
(8)													
(9)													
(10)													
(11)													
(12)													
(13)													
(14)													
(15)													
(16)													

Schedule R (Form 990) 2018

Part II**Identification of Related Tax-Exempt Organizations** (continued)

(a) Name, address and EIN of related organization	(b) Primary Activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No
(1) THE INTERNATIONAL ASSOCIATION OF LIONS CLUBS (36-1263962) 300 W. 22ND STREET, OAK BROOK, IL 60523	SERVICE ORGANIZATION	IL	501(C)(4)		N/A		✓
(2) LCIF INDIA 19, NIRLON HOUSE, 4TH FLOOR, 254-B, DR. ANNIE BESANT ROAD, WORLI, MUMBAI, 400030, IN	PROMOTION OF VARIOUS LIONS PROGRAMS IN INDIA AND OTHER COUNTRIES IN THE REGION	INDIA			LIONS CLUBS INTERNATIONAL FOUNDATION	✓	

Part IV**Identification of Related Organizations Taxable as a Corporation or Trust** (continued)

(a) Name, address and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C-corp, S-corp or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?	
								Yes	No
(1) PERPETUAL TRUST (1) BENEFICIAL INTEREST IN DONOR TRUSTS, C/O LCIF 300 WEST 22ND STREET, OAK BROOK, IL 60523	DISTRIBUTION OF TRUST ASSETS TO BENEFICIARIES			TRUST					

Part VII**Supplemental Information.** Provide additional information for responses to questions on Schedule R (see instructions).

Return Reference - Identifier	Explanation
SCHEDULE R, PART V - INTERCOMPANY TRANSACTIONS	THE ASSOCIATION AND THE FOUNDATION ADMINISTER TRANSACTIONS ON BEHALF OF EACH OTHER. THESE TRANSACTIONS INCLUDE LCIF DONATIONS RECEIVED IN AND GRANTS DISBURSED OUT OF BANK ACCOUNTS IN COUNTRIES WHERE LCIF DOES NOT HAVE ITS OWN BANK ACCOUNT. THESE TRANSACTIONS ARE SETTLED PERIODICALLY. AS OF JUNE 30, 2019 THE FOUNDATION HAD A PAYABLE TO THE ASSOCIATION OF \$1,484,154.