OMB No 1545-0047

Return of Organization Exempt From Income Tax

Department of the Treasury Internal Revenue Service

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.

▶ Information about Form 990 and its instructions is at www.irs.gov/form990. A For the 2016 calendar year, or tax year beginning 07/01/16, and ending 06/30/17

2016 Open to Public Inspection

В	Check if applicable	C Name of organization			1	D Employer	identification number				
	Address change	«Kidwatch Plus,	Inc.								
П	Name change	Doing business as Number and street (or P O box if mail is not delivered to street			Room/suite		658785				
\Box	Initial return	E Telephone	993-0536								
님	Final return/	Final return/ City or town, state or province, country, and ZIP or foreign postal code									
\sqcup	terminated		0641-4184				1 060 600				
	Amended return	F Name and address of principal officer	7041-4104			G Gross rece	ipts\$ 1,068,688				
	Application pending	Kathryn Barnaby			H(a) Is this a gro	up return for su	bordinates? Yes X No				
		Raciniyii Barilaby			H(b) Are all sub	ordinates inclu	ded? Yes No				
							see instructions)				
$\overline{}$	Tax-exempt status	X 501(c)(3) 501(c) () ◀ (insert no)	4947(a)(1) or 52	77		•	· · · · · · · · · · · · · · · · · · ·				
<u>.</u>		ww.kidwatchplus.com	4947(a)(1) or 52	1	H(c) Group exer	nation number					
<u>т</u>	Form of organization	X Corporation Trust Association Other		Vez		000	M State of legal domicile IL				
	- 100 (-100	mmary		, <u>j. 168</u>	i or iorniauon 🔟	<u> </u>	M State of legal domicile 22				
		scribe the organization's mission or most significal	nt activities	·							
æ	l — -	ffer educational programs and		itv car	e for ch	ildren	1				
Š	whil	e their parents are working of					-				
Ĕ		•	.								
Activities & Governance	2 Check the	s box ▶ ☐ If the organization discontinued its op	erations or disposed of more	e than 25%	of its net ass	ets.					
G eq	3 Number of	of voting members of the governing body (Part VI, I				3	6				
BS	4 Number	of independent voting members of the governing bo	•			4	3				
Ě	5 Total nun	nber of individuals employed in calendar year 2016				5	49				
Ę	6 Total nun	6 Total number of volunteers (estimate if necessary)									
		elated business revenue from Part VIII, column (C)), line 12			7a	0				
	b Net unrel	ated business taxable income from Form 990-T, lir	ne 34			7b	0				
			RECEIVED		Prior Yea		Current Year				
9	8 Contribut	ons and grants (Part VIII, line 1h)		0,862 5,384	65,788						
Revenue	9 Program	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) ANY 1 8 2018					991,966				
ě	10 Investme						0				
	11 Other rev	enue (Part VIII, column (A), lines 5, 6d, 8c, 90, 10c	c, and 11e)	├		5,590	6,042				
_		enue – add lines 8 through 11 (must equal Part VII	i, coluini (A), illie iz/ i		1,015	5,537	1,063,796				
		nd similar amounts paid (Part IX, column (A), lines		\			<u> </u>				
	45 000	paid to or for members (Part IX, column (A), time 4)	5,348	679 290							
Expenses	15 Salaties,	other compensation, employee benefits (Part IX, c nal fundraising fees (Part IX, column (A), line 11e)			710	7,340	679,290				
Sen C	b Total fund	fraiting rees (Part IX, column (A), line 11e) fraising expenses (Part IX, column (D), line 25) ▶	0	12	, , , , ,	10,	· / / /				
Ä	17 Other eve	penses (Part IX, column (A), lines 11a–11d, 11f–24	_	F	356	5,320	353,286				
	1	enses Add lines 13–17 (must equal Part IX, colum	,			2,668	1,032,576				
		less expenses. Subtract line 18 from line 12	—		7,131	31,220					
5	3			- 1	Beginning of Cur		End of Year				
Net Assets or	20 Total ass	ets (Part X, line 16)				5,184	859,896				
Y Ass	21 Total liab	lities (Part X, line 26)			423	L,383	374,875				
Ž,	22 Net asset	s or fund balances. Subtract line 21 from line 20			453	3,801	485,021				
<u> </u>	Part II Sign	nature Block	<u> </u>								
U	Inder penalties of p	perjury, I declare that I have examined this return, including	ng accompanying schedules an	nd statement	s, and to the be	st of my kno	owledge and belief, it is				
tr	ue, correct, and co	emplete Declaration of preparer (other than officer) is ba	sed on all information of which i	preparer has	s any knowledg	e					
	_	Jahn Bairan	1			<u> </u>	114118				
Sig		gnet(fre of officer	Λ			Date	′ ′				
He		Kathryn Barnaby (<u>) </u>	irect	or						
		/pé or print name and title					T I press				
Pai	I		's signature		Date	Check	If PTIN				
	narer		D. Johnson			/18 self-em					
	e Only			-	F	ırm's EIN ▶	26-3917917				
J31	· 1	1420 Renaissance D					047 750 6100				
Ma	Firm's add		068-1342		Р	hone no	847-759-6100				
		s this return with the preparer shown above? (see	instructions)				X Yes No				

orm 990 (2016)	Kidwatch Plus, I	nc. 36-	3658785	Page 2
		rice Accomplishments s a response or note to any line in this	Part III	, <u> </u>
To offe		ograms and to provide que working or attending so		ildren
pnor Form If "Yes," de	990 or 990-EZ? escribe these new services on Sche			Yes X No
services?	panization cease conducting, or mainescribe these changes on Schedule	ke significant changes in how it conducts, any p O.	rogram	Yes X No
4 Describe the expenses	ne organization's program service a	ccomplishments for each of its three largest pro panizations are required to report the amount of		
program	re for infants, pr ms for primary scl	98,288 including grants of \$ re-school programs and a nool children of working Fing pre-kindergarten pr	g parents.	991,966
4b (Code:) (Expenses \$	including grants of \$) (Revenue \$	
4c (Code) (Expenses \$	including grants of \$) (Revenue \$	
4d Other prog	gram services (Describe in Schedul	e O.)	(Revenue \$)
	ram service expenses	898,288	(
)AA	<u> </u>			Form 990 (2016

. <u>01111 000 (</u>			<u> </u>			<u>, </u>	_ :
777227777777777777777777777777777777777	"						
22 D 544/11	122	Char	.bliet c	of Daa	uuirad	Schod	ulae
Part IV	2	CHEC	vviior r	JI INEU	luli eu	Sched	uico

1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"
	complete Schedule A

- Is the organization required to complete Schedule B. Schedule of Contributors (see instructions)?
- 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
- 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
- 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,
- 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
- 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
- 8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III
- 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
- 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
- 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
 - Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI
 - 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
 - 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
 - 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
 - Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X
 - 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
- Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII
 - 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
- 13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E
- 14a Did the organization maintain an office, employees, or agents outside of the United States?
 - 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
- 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
- 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
- 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)
- Did the organization report more than \$15,000 total of fundraising event gross income and contributions on 18 Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II
- 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

		Yes	No
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}	1_ 2_	<u> </u>	X _
ľ			
1	3		<u>X</u> _
ļ	4		<u>X</u>
	5		х
	6		_x_
	7		x
	8		x
	9		x
	10		x
		1	
	11a	X	
	11b		x
	11c		x
	11d		x
	11e	X	<u> </u>
	11f		x
	12a	х	
	12b		x
	13	X	 •
	14a	-	X
	14b		x
	15		x
	16	<u> </u>	x
	17	_	x
•	18	<u> </u>	х
	19		x
		m 99	0 (2016)

Pa	art IV Checklist of Required Schedules (continued)	۹		
			Yes	No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	_20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated	1		
	employees? If "Yes," complete Schedule J	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b			
	through 24d and complete Schedule K If "No," go to line 25a	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b	<u> </u>	
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year		1	
	to defease any tax-exempt bonds?	24c		<u> </u>
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d	<u> </u>	<u> </u>
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit		l	
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a	<u> </u>	X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior			
	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?			
	If "Yes," complete Schedule L, Part I	25b	<u> </u>	X
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any			1
	current or former officers, directors, trustees, key employees, highest compensated employees, or			İ
	disqualified persons? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,		ļ	
	substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			ļ
	entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27	ļ	X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,	l	•	1 .
	Part IV instructions for applicable filing thresholds, conditions, and exceptions):	} ~	1	
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			
	Schedule L, Part IV	28b	<u> </u>	X
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		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	<u> </u>	X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified	İ	1	
	conservation contributions? If "Yes," complete Schedule M	30	<u> </u>	X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			
	Part I	31	ļ	X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"			İ
	complete Schedule N, Part II	32	<u> </u>	X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33	ļ	X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III,			1
	or IV, and Part V, line 1	34	<u> </u>	X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	<u> </u>	X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a			
	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		<u> </u>
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	<u> </u>	X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,			{
	Part VI	37	<u> </u>	X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and	1	1	
	19? Note. All Form 990 filers are required to complete Schedule O.	38	1	X

®₽a	Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part	+ V			П
	Check it Schedule O contains a response of flote 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 2			1
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	1b 0	16/3		
С	Did the organization comply with backup withholding rules for reportable payments to vendors and	<u></u>		199	
	reportable gaming (gambling) winnings to prize winners?		1c		X
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax	1 1		((32)	
	Statements, filed for the calendar year ending with or within the year covered by this return	2a 49			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax re	etums?	2b	X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instruction	ons)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?		3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedu	ile O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other	er authority			
	over, a financial account in a foreign country (such as a bank account, securities account, or other	financial			1
	account)?		4a		X
b	If "Yes," enter the name of the foreign country ▶			274 h	
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financia	al Accounts		100	
	(FBAR).		93	9, 37 9, , , , 4	133
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	7	5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter trans	saction?	5b		X
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?		5c		Ļ
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did	d the			
	organization solicit any contributions that were not tax deductible as charitable contributions?		6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contribu	utions or			1
	gifts were not tax deductible?		6b	 y y .	ļ
7	Organizations that may receive deductible contributions under section 170(c).		1	1 3)
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for	or goods	2	1,7	1
	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		₩
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it	was	Ì		1
	required to file Form 8282?	1 1	7c	12175 - 22	11111111
d	If "Yes," indicate the number of Forms 8282 filed during the year			1 2	1
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit		7e		\vdash
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit co		7f		\vdash
g	If the organization received a contribution of qualified intellectual property, did the organization file		7g		\vdash
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organ		7h		,,3
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund mainta	ined by the	\ "		* **
	sponsoring organization have excess business holdings at any time during the year?		8	ļ	
9	Sponsoring organizations maintaining donor advised funds.				1
a h	Did the sponsoring organization make any taxable distributions under section 4966? Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		9a 9b		
ь 10	Section 501(c)(7) organizations. Enter.		30		
а	Initiation fees and capital contributions included on Part VIII, line 12	10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b	 -		
11	Section 501(c)(12) organizations. Enter				
	Gross income from members or shareholders	11a	· · · · · · ·	,	133
b	Gross income from other sources (Do not net amounts due or paid to other sources	1.0	 }		19
-	against amounts due or received from them)	11b	12		
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Fo		12a	ĺ	1
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b	,,,_,		1
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	L I	— ,		1
а	Is the organization licensed to issue qualified health plans in more than one state?		13a	Ī	T
-	Note. See the instructions for additional information the organization must report on Schedule O.			7.7	177
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		10	
С	Enter the amount of reserves on hand	13c	7	•	ľ
14a	Did the organization receive any payments for indoor tanning services during the tax year?		14a		X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Scheen	dule O	14b		
			-		_

***********	990 (2016) Kidwatch Plus, Inc. 36-3658785			age 6
" Pa	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and			
	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. Se	e instru	uction	
	Check if Schedule O contains a response or note to any line in this Part VI			_X_
Sec	tion A. Governing Body and Management			
		122	Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 6	4 4	100	
	If there are material differences in voting rights among members of the governing body, or		4	
	If the governing body delegated broad authority to an executive committee or similar		""	
	committee, explain in Schedule O	1 4		1
b	Enter the number of voting members included in line 1a, above, who are independent	- `		. :
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with	1 - 1	1.	h.
	any other officer, director, trustee, or key employee?	2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct	1.1		
	supervision of officers, directors, or trustees, or key employees to a management company or other person?	3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		<u>x</u> _
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6	Did the organization have members or stockholders?	6		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint	[_ [
	one or more members of the governing body?	7a		X
þ	Are any governance decisions of the organization reserved to (or subject to approval by) members,			
	stockholders, or persons other than the governing body?	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following.	M		-
а	The governing body?	8a	X	<u> </u>
b	Each committee with authority to act on behalf of the governing body?	8b	X	<u> </u>
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		X
<u>Sec</u>	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue C	ode.)		
			Yes	
10a	Did the organization have local chapters, branches, or affiliates?	10a		X_
þ	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		<u> </u>
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	X	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.		<u> </u>	/ //
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	X	<u> </u>
þ	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X	 - -
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"	1 '	ł	l
	describe in Schedule O how this was done	12c		├
13	Did the organization have a written whistleblower policy?	13	X	⊢ —
14	Did the organization have a written document retention and destruction policy?	14	X	ļ
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?		!	
а	The organization's CEO, Executive Director, or top management official	15a	<u> </u>	
b	Other officers or key employees of the organization	15b	ļ	X
	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		1	
	with a taxable entity during the year?	16a	ļ 	X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its		Ī	
	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the			4
	organization's exempt status with respect to such arrangements?	16b		<u> </u>
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ▶ IL			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only)			
	available for public inspection. Indicate how you made these available. Check all that apply			
	Own website Another's website X Upon request Other (explain in Schedule O)			
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			
K	athryn Barnaby 3330 N Lockwood Avenue			
C.	hicago IL 60641 77	73-99	3-0	0536

	16) Kidwatch Plus, Inc.	<u> 36-365</u> 8785	Page 7
Part VII	Compensation of Officers, Directors,	Trustees, Key Employees, Highest Compensated Emp	loyees, and
•	Independent Contractors		
	Check if Schedule O contains a respons	e 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

(A) Name and Title	(B) Average hours per week (list any	age Position per (do not check more than one box, unless person is both an officer and a director/trustee)					an e)	(D) Reportable compensation from the	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation	
	hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization and related organizations	
(1) Mary K. Brophy											
	10.00										
Director	0.00	X		L				19,362	0		
(2) John Kelly										-	
_	1.00										
President	0.00	x						ol	0	(
(3) Bernadette Kania	L										
	1.00	1									
Secretary/Treasurer	0.00	x						l ol	0		
(4) Francis E. Kelly											
7	1.00						i				
Vice President	0.00	x						l ol	0		
(5) Kathryn Barnaby											
	40.00										
Director	0.00			x				22,162	o		
(6) Jeanne M. Prete		Ť									
	40.00					l					
Director	0.00			X				13,462	o		
(7)											
(8)											
(9)											
10)											
11)										, ···	

Form 990 (2016)

Form 990 (2016) Kidwatch Plus, Inc. Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued) Part VII (F) (A) (B) (C) (D) Name and title Reportable Reportable Estimated Average Position compensation from amount of (do not check more than one compensation hours per box, unless person is both an from related other week officer and a director/trustee) the organizations compensation (list any (W-2/1099-MISC) from the hours for organization organization related Individual trustee or director institutional trustee Key employee (W-2/1099-MISC) lighest compensated imployee and related organizations organizations below dotted line) 54,986 1b Sub-total Total from continuation sheets to Part VII, Section A Total (add lines 1b and 1c) 54,986 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ▶ 0 Yes No 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 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 4 individual 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 **Section B. Independent Contractors** 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 (C) Compensation (B) Description of services (A)
Name and business address Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ▶ 0

Form 990 (2016) Kidwatch Plus, Inc. 36-3658785 Page 9 Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII (C) Unrelated (D) (A) excluded from tax exempt husiness function 512-514 revenue , Grants 1a Federated campaigns 1a b Membership dues 1b c Fundraising events 1c d Related organizations 1d Contributions, and Other Simi 62,040 e Government grants (contributions) 1e f All other contributions, gifts, grants, and similar amounts not included above 3,748 3,748 g Noncash contributions included in lines 1a-1f h Total. Add lines 1a-1f 65,788 Program Service Revenue Busn. Code 991,966 991,966 2a Tuition b f All other program service revenue 14 991,966 g Total. Add lines 2a-2f ▶ Investment income (including dividends, interest, and other similar amounts) Income from investment of tax-exempt bond proceeds Royalties (II) Personal (ı) Real 6a Gross rents **b** Less rental exps c Rental inc or (loss) d Net rental income or (loss) Gross amount from (i) Secunties (II) Other sales of assets other than inventor **b** Less cost or other basis & sales exps c Gain or (loss) d Net gain or (loss) ▶ 8a Gross income from fundraising events Other Revenue (not including \$ of contributions reported on line 1c) 10,868 See Part IV, line 18 4,892 **b** Less direct expenses 5,976 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 b Less cost of goods sold c Net income or (loss) from sales of inventory Þ Miscellaneous Revenue **Busn Code** 66 66 11a Miscellaneous b C

66

991,966

1,063,796

6,042

All other revenue

Total, Add lines 11a-11d

Total revenue. See instructions

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 (A) Total expenses (D) (B) Program service Do not include amounts reported on lines 6b, Management and 7b, 8b, 9b, and 10b of Part VIII. expenses general expenses expenses Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 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 Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees 6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 557,763 68,647 626,410 Other salaries and wages Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) Other employee benefits 47,085 5,795 52,880 Payroll taxes 10 Fees for services (non-employees) Management а 150 150 b Legal 11,720 11,720 Accounting ď Lobbying Professional fundraising services See Part IV, line 17 Investment management fees f Other (If line 11g amount exceeds 10% of line 25, column 6,188 6,188 (A) amount, list line 11g expenses on Schedule O) 6,469 2,824 3,645 Advertising and promotion 12 5,738 5,738 Office expenses Information technology 14 15 Rovalties 88,750 79,875 8,875 Occupancy 16 17 Travel Payments of travel or entertainment expenses for any federal, state, or local public officials Conferences, conventions, and meetings 22,213 22,213 20 Interest 21 Payments to affiliates 58,835 52,952 5,883 22 Depreciation, depletion, and amortization 10,636 10,636 Insurance 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) 36,400 Food and Beverage 35,887 513 Repairs and Maintenance 35,504 32,388 3,116 b 33,571 33,571 Classroom Supplies 10,300 Utilities 11,444 1,144 13,695 11,973 <u>25,668</u> All other expenses 1,032,576 898,288 134,288 0 Total functional expenses. Add lines 1 through 24e 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 ▶ following SOP 98-2 (ASC 958-720)

Part X **Balance Sheet** Check if Schedule O contains a response or note to any line in this Part X (A) (B) End of year Beginning of year 7,825 1 49,363 Cash-non-interest bearing Savings and temporary cash investments 2 6,484 3 Pledges and grants receivable, net 7,292Accounts receivable, net 5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. 5 Complete Part II of Schedule L 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 7 Notes and loans receivable, net Inventories for sale or use 10,530 8,120 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment: cost or 946,746 other basis Complete Part VI of Schedule D 10a $158, \overline{478}$ 788,26<u>8</u> 843,053 10b 10c b Less accumulated depreciation 11 11 Investments—publicly traded securities 12 Investments-other securities See Part IV, line 11 12 13 13 Investments—program-related See Part IV, line 11 14 Intangible assets 14 15 15 Other assets See Part IV, line 11 875,184 859,896 16 Total assets. Add lines 1 through 15 (must equal line 34) 16 32,464 31,888 17 Accounts payable and accrued expenses 17 18 18 Grants payable 19 19 Deferred revenue 20 20 Tax-exempt bond liabilities 21 Escrow or custodial account liability Complete Part IV of Schedule D 21 Loans and other payables to current and former officers, directors, Liabilities trustees, key employees, highest compensated employees, and 22 disqualified persons Complete Part II of Schedule L Secured mortgages and notes payable to unrelated third parties 23 314,229 360,519 24 Unsecured notes and loans payable to unrelated third parties Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X 28,400 28,758 of Schedule D 421,383 374,875 26 Total liabilities. Add lines 17 through 25 Organizations that follow SFAS 117 (ASC 958), check here **Assets or Fund Balances** complete lines 27 through 29, and lines 33 and 34. 453,801 485,021 27 Unrestricted net assets Temporarily restricted net assets 28 Permanently restricted net assets 29 Organizations that do not follow SFAS 117 (ASC 958), check here complete lines 30 through 34. 30 Capital stock or trust principal, or current funds 31 Paid-in or capital surplus, or land, building, or equipment fund 31 32 Retained earnings, endowment, accumulated income, or other funds 32 485,021 453,801 33 33 Total net assets or fund balances 859,896 875,184 Total liabilities and net assets/fund balances

orm 990 (2016) Kidwatch Plus, Inc.	36-3658785	
Part XI Reconciliation of Net Assets		,
Check if Schedule O contains a response or note to any line	e in this Part XI	
1 Total revenue (must equal Part VIII, column (A), line 12)	1	1,063,796
2 Total expenses (must equal Part IX, column (A), line 25)	2	1,032,576
3 Revenue less expenses. Subtract line 2 from line 1	3	31,220
4 Net assets or fund balances at beginning of year (must equal Part X, line 33,	column (A))	453,801
5 Net unrealized gains (losses) on investments	5	
6 Donated services and use of facilities	6	
7 Investment expenses	7	
8 Prior period adjustments	8	
9 Other changes in net assets or fund balances (explain in Schedule O)	9	
Net assets or fund balances at end of year Combine lines 3 through 9 (must	equal Part X. line	
33, column (B))	10	485,021
Part XII Financial Statements and Reporting		
Check if Schedule O contains a response or note to any lin	e in this Part XII	
1 Accounting method used to prepare the Form 990: X Cash Accounting the organization changed its method of accounting from a prior year or che Schedule O 2a Were the organization's financial statements compiled or reviewed by an index of "Yes," check a box below to indicate whether the financial statements for the reviewed on a separate basis, consolidated basis, or both Separate basis Consolidated basis Both consolidated a b Were the organization's financial statements audited by an independent account "Yes," check a box below to indicate whether the financial statements for the separate basis, consolidated basis, or both Separate basis Consolidated basis Both consolidated a c if "Yes" to line 2a or 2b, does the organization have a committee that assume of the audit, review, or compilation of its financial statements and selection of	cked "Other," explain in ependent accountant? ne year were compiled or nd separate basis ountant? ne year were audited on a nd separate basis es responsibility for oversight	2a X
If the organization changed either its oversight process or selection process of Schedule O. 3a As a result of a federal award, was the organization required to undergo an atthe Single Audit Act and OMB Circular A-133? b If "Yes," did the organization undergo the required audit or audits? If the organization undergo the required audit or audits?	during the tax year, explain in udit or audits as set forth in	3a X
required audit or audits, explain why in Schedule O and describe any steps to		

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.

▶ Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

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

омв № 1545-0047 **2016**

Open to Public Inspection

Name of the organization

Part

Kidwatch Plus, Inc.

Employer identification number 36-3658785

Гhе	orga	nization is not	a private for	undation becaus	e it is. (For lines 1 th	hrough 12, c	heck only	one box)		\wedge
1		A church, cor	nvention of c	churches, or ass	ociation	of churches	described i	n section	170(b)(1)(A)(i).		
2	X	A school des	cribed in sec	ction 170(b)(1)(A)(ii). (/	Attach Scheo	dule E (Form	990 or 9	90-EZ).)		<u></u>	<i>) (</i>
3		A hospital or	a cooperativ	e hospital servi	ce orga	nization desc	cribed in sec	tion 170(b)(1)(A)(i	ii).		,
4		A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(lii). Enter the hospital's name,										
		city, and state	e:									
5	\Box	An organizati	on operated	for the benefit of	of a coll	ege or unive	rsity owned	or operate	ed by a go	overnmental unit descr	ibed in	·
		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	П	An organizati	on that norn	nally receives a	substan	itial part of it	s support fro	m a gove	rnmental	unit or from the gener	al public	
	_	described in	section 170	(b)(1)(A)(vi). (C	omplete	Part II.)		_				
8		A community	trust descri	bed in section 1	170(b)(1	I)(A)(vi). (Co	mplete Part	H)				
9		An agricultura	al research o	organization des	cnbed i	n section 17	70(b)(1)(A)(i	x) operate	ed in conj	unction with a land-gra	nt colleg	e
		•	or a non-lan	d grant college o	of agricu	ılture (see ın	structions)	Enter the	name, cit	y, and state of the coll	ege or	
		university										
10		-		•	•					ons, membership fees,	_	SS
		•			-	-		•) no more than 33 1/3		
				tion after June 3						511 tax) from busines	363	
11	\Box		•	d and operated						•		
12		•	•	•		•	•	•		ns of, or to carry out th	e purpos	ses
		-	-	•		-				09(a)(2). See section		
		Check the bo	x in lines 12	a through 12d th	hat desc	cribes the typ	oe of suppor	ting orgar	nzation a	nd complete lines 12e,	12f, and	112g
	а	Type I. A	supporting	organization ope	erated,	supervised,	or controlled	by its su	pported o	rganızatıon(s), typicall	y by givir	ng
		• •	_						of the di	ectors or trustees of the	ne	
	_		•	on You must c	•	-						
	b									ted organization(s), by	-	. i
			•	ent of the suppor must complete				ame pers	ons that	control or manage the	supporte	90
	С			-				l in conne	ction with	, and functionally integ	rated w	th
	•			ation(s) (see ins							jiatea Wi	ui,
	d	Type III r	non-functio	nally integrated	d. A sup	porting orga	nization ope	rated in c	onnection	with its supported org	janizatio	n(s)
		that is no	t functionally	y integrated. The	e organi	zation gener	rally must sa	itisfy a dis	tribution	requirement and an at	tentivene	ess
		requirem	ent (see inst	tructions) You r	nust co	omplete Par	t IV, Section	ns A and	D, and P	art V.		
	е									s a Type I, Type II, Typ	e III	
				d, or Type III no		onally integra	ateo support	ing organ	ization.			
	f g			oorted organizati rmation about th		orted organi	zation(s)					L
		_	 _					(ha) la tha a	rganization	fel Amount of monoto		(vi) Amount of
(e of supported ganization	· '	ii) EIN	1	(III) Type of orga described on lin		1 ' '	ir göverning	(v) Amount of moneta support (see	" ^y	other support (see
					-	above (see instru	uctions))	docui	nent?	instructions)		instructions)
								Yes	No			
(A)												
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(B)			ļ									
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Kidwatch Plus, Inc.

36-3658785

Page 2

Sched	dule A (Form 990 or 990-EZ) 2016 Kić	lwatch Plu	s, Inc.		36	-365878	5	Page 3
	Support Schedule for O			ection 509(a)(2	2)		$\overline{}$	
	(Complete only if you che					l to qualify ur	nder Part	. II.
	If the organization fails to						1	
Sec	tion A. Public Support				•		1	
	dar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
1	Gifts, grants, contributions, and membership	, <u>, , , , , , , , , , , , , , , , , , </u>	(-,	`,'		1		
•	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	* 1				_		
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons	3						
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		1					
С	Add lines 7a and 7b		\\ //_					
8	Public support. (Subtract line 7c from line 6)	3,777		11/2				
Sec	tion B. Total Support		X	-				
	ndar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(1	f) Total
9	Amounts from line 6			, ,				
10a		j						
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975							
С	Add lines 10a and 10b			1				
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on			1				
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, 1,1,				`\			
	and 12.)		<u> </u>		111			
14	First five years. If the Form 990 is for the	e organization's firs	t, second, third, fo	urth, or fifth tax ye	ar as a section 50	01(c)(3)		_
	organization, check this box and stop he							▶ L
Sec	tion C. Computation of Public S	upport Percen	tage					
15	Public support percentage for 2016 (line 8	3, column (f) divide	d by line 13, colun	nn (f))	,	ji,	15	%_
16	Public support percentage from 2015 Sch		•	• • •			16	%
	tion D. Computation of Investme							
17	Investment income percentage for 2016 (3, column (f))		`,	17	%
18	Investment income percentage from 2015		•	`''		`,	18	%
19a	33 1/3% support tests—2016. If the orga			e 14, and line 15 is	s more than 33 1/	3%, and line		
	17 is not more than 33 1/3%, check this b							
b	33 1/3% support tests—2015. If the orga	-	-				nd	_
	line 18 is not more than 33 1/3%, check t						\	▶ ∐
20	Private foundation. If the organization d	=	=	•			•	

Part IV **Supporting Organizations**

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

Section A. All Supporting Organizations

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

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7	<u> </u>	<u> </u>
8	<u> </u>	ļ
ľ	‡	
9a	<u></u>	<u>L</u>
9ь] [
 "~~ "		1
9c	Ť .	İ
30	 	
	†	1
10a	<u> </u>	<u> </u>
1	,	,
10b		

	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.
- 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.

		Yes_	No_
	,	, ,	*
		· 💉	109
	,		′′′′′′′′′′′′′′′′′′′′′′′′′′′′′′′′′′′′′′′
		1	, '
Ì	22		
	2a	-	
İ			,
	2 1		,
1	- /		
ŀ	2b	<u>i</u>	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
1		<i>''</i>	,,
	46		K 2
ł	-//3 3a		
			777
ſ	3b	[
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Schedule A (Form 990 or 990-EZ) 2016 Kidwatch Plus, Inc.		36-3658	785 Page 6
Part Y Type III Non-Functionally Integrated 509(a)(3) Supporting	Organizat	tions	•
1 Check here if the organization satisfied the Integral Part Test as a qualifying trust of	n Nov 20, 1	1970 (explain in Part VI).S	ee
instructions. All other Type III non-functionally integrated supporting organizations	s must comp	lete Sections A through E	<u></u>
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		<i>"</i>	47
instructions for short tax year or assets held for part of year).		<u></u>	
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	37.7	, , , , , , , , , , , , , , , , , , , ,	,
factors (explain in detail in Part VI)		, <i>'</i>	
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	<i>77</i>	
6 Distributable Amount. Subtract line 5 from line 4, unless subject to		/	
emergency temporary reduction (see instructions)	6	,	
7 Check here if the current year is the organization's first as a non-functionally integr	ated Type II	l supporting organization	(see
instructions)			

	lle A (Form 990 or 990-EZ) 2016 Kidwatch Plus, Inc		36-3658	785 Page 7
	Type III Non-Functionally Integrated 509(a)(3) S	Supporting Organiza	tions (continued)	
_Sect	ion D - Distributions			Current Year
	Amounts paid to supported organizations to accomplish exempt purpor			
2	Amounts paid to perform activity that directly furthers exempt purposes			
	organizations, in excess of income from activity	·		
3	Administrative expenses paid to accomplish exempt purposes of support	orted organizations		
4	Amounts paid to acquire exempt-use assets			
<u>-5</u>	Qualified set-aside amounts (prior IRS approval required)			
	Other distributions (describe in Part VI) See instructions.			
7 8	Total annual distributions. Add lines 1 through 6	<u> </u>		
0	Distributions to attentive supported organizations to which the organizations to which the organizations are provided in Part VII). See instructions	ition is responsive		
9	(provide details in Part VI) See instructions Distributable amount for 2016 from Section C, line 6			
10			·	
	Line 8 amount divided by Line 9 amount	I		
	Section E - Distribution Allocations (see instructions)	(i)	(ii)	(iii)
	occion E - Distribution Allocations (see instructions)	Excess Distributions	Underdistributions	Distributable
1	Distributable amount for 2016 from Section C, line 6		Pre-2016	Amount for 2016
	Underdistributions, if any, for years prior to 2016		<u> San Sillet Eis i''</u>	
2	(reasonable cause required-explain in Part VI) See			
	instructions.	11.64 6 6 9000		
3_	Excess distributions carryover, if any, to 2016	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	77. 77.7	
<u>a</u>	<u> </u>		19 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
b	- 1 enhance land om 2014 - Ynerhjanguntgmen ditten - 167-47 (1984)	nga cakhhipgan i ni intig		e - Sextral rearediffill ()
c	From 2013	A Section 1		10 10 1 May 1
<u>d</u>	From 2014	1995 199 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1 1774 1784	97 5 47 S
	From 2015	often 19 gar		
	Total of lines 3a through e		11 11111	4.6,
	Applied to underdistributions of prior years	444		1 1 1 1 1 1 1 1 1 1
	Applied to 2016 distributable amount	3 / 2007	11 414	
<u> </u>	Carryover from 2011 not applied (see instructions)	3. 2.	13	· · · · · · · · · · · · · · · · · · ·
- +	Remainder Subtract lines 3g, 3h, and 3i from 3f	8 7	(4)	7 1 9
4	Distributions for 2016 from			
	Section D, line 7 \$	13, 20		
	Applied to underdistributions of prior years	· · · · · · · · · · · · · · · · · · ·		4.4
	Applied to 2016 distributable amount Remainder. Subtract lines 4a and 4b from 4.		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	, , , , , , , , , , , , , , , , , , , ,
5	Remaining underdistributions for years prior to 2016, if	· //	/ / / / / / / / / / / / / / / / / / /	
•	any. Subtract lines 3g and 4a from line 2. For result			
	greater than zero, explain in Part VI. See instructions.			March March
6	Remaining underdistributions for 2016 Subtract lines 3h		, ,	1 1771 41 19 11
-	and 4b from line 1. For result greater than zero, explain in		. // /	
	Part VI See instructions			
_ _	Excess distributions carryover to 2017. Add lines 3j			,, ,
•	and 4c		10.5	are production
8	Breakdown of line 7.	,	4-94	
a	The state of the s	, ,	11	
b	Excess from 2013	, 7		······································
С	Excess from 2014	11/1/1/1/1/1/1/1/1/1/1/1/1/1/1/1/1/1/1/1	77 W,	
d	Excess from 2015	7	<i>"</i>	
е	Excess from 2016	7 7		· · · · · · · · · · · · · · · · · · ·

Kidwatch Plus, Inc.

36-3658785

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Part VI Supplemen

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

SCHEDULE 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.

OMB No 1545-0047

Open to Public Inspection//////

▶ Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990. Name of the organization

Employer identification number

ĸ.	dwatch Plus, Inc.		36-36	58785
	Organizations Maintaining Donor Advised F	unds or Other Similar Funds or		
Gillion II	Complete if the organization answered "Yes" on	Form 990. Part IV. line 6		•
		(a) Donor advised funds	(b)	Funds and other accounts
_	Total number at and of upon	(a) boiler devised failes	- (-)	
1	Total number at end of year		 	
2	Aggregate value of contributions to (during year)			<u> </u>
3	Aggregate value of grants from (during year)			
4	Aggregate value at end of year		<u> </u>	
5	Did the organization inform all donors and donor advisors in writing the	hat the assets held in donor advised		
	funds are the organization's property, subject to the organization's ex	clusive legal control?		Yes No
6	Did the organization inform all grantees, donors, and donor advisors	in writing that grant funds can be used		
	only for charitable purposes and not for the benefit of the donor or do	onor advisor, or for any other purpose		
	conferring impermissible private benefit?			Yes No
Pa	rt II Conservation Easements.			
	Complete if the organization answered "Yes" or	n Form 990, Part IV, line 7		
1	Purpose(s) of conservation easements held by the organization (che	ck all that apply).		
	Preservation of land for public use (e.g., recreation or education)	Preservation of a historically im	portant land	area
	Protection of natural habitat	Preservation of a certified histor		
	Preservation of open space			
2	Complete lines 2a through 2d if the organization held a qualified cons	servation contribution in the form of a cons	ervation	
-	easement on the last day of the tax year.		***************************************	eld at the End of the Tax Year
а	Total number of conservation easements		2a	
			2b	
b	Total acreage restricted by conservation easements	adudad in (a)	2c	
С.	Number of conservation easements on a certified historic structure in	, ,	20	
d	Number of conservation easements included in (c) acquired after 8/1	17/06, 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 organiz	ation during	the
	tax year ▶			
4	Number of states where property subject to conservation easement i	is located ▶		
5	Does the organization have a written policy regarding the periodic me	onitoring, inspection, handling of		
	violations, and enforcement of the conservation easements it holds?			Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting, handling	g of violations, and enforcing conservation	easements (during the year
	>			
7	Amount of expenses incurred in monitoring, inspecting, handling of v	violations, and enforcing conservation ease	ements durin	g the year
	▶ \$			
8	Does each conservation easement reported on line 2(d) above satisf	fy the requirements of section 170(h)(4)(B))(i)	
	and section 170(h)(4)(B)(ii)?			Yes No
9	in Part XIII, describe how the organization reports conservation ease	ements in its revenue and expense stateme	ent, and	
•	balance sheet, and include, if applicable, the text of the footnote to the			е
	organization's accounting for conservation easements			
Pa	Organizations Maintaining Collections of Ar	rt. Historical Treasures, or Other	Similar A	Assets.
, ,	Complete if the organization answered "Yes" or			
	If the organization elected, as permitted under SFAS 116 (ASC 958)		d balance sh	eet
	works of art, historical treasures, or other similar assets held for pub	•		
	public service, provide, in Part XIII, the text of the footnote to its final			
h	If the organization elected, as permitted under SFAS 116 (ASC 958)			
J	works of art, historical treasures, or other similar assets held for pub	•	_	
	·		oranos u	
	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		, <i></i>	\$
2	If the organization received or held works of art, historical treasures,		provide the	
	following amounts required to be reported under SFAS 116 (ASC 95	58) relating to these items		_
а	Revenue included on Form 990, Part VIII, line 1		•	\$
b	Assets included in Form 990, Part X		<u> </u>	\$

chedu	le D (Form 990) 2016 Kidwatc	<u>h Plus, Inc</u>	! .		<u> 36-3658'</u>	<u> 785 </u>	Page 2
Part	III Organizations Maintain	ing Collections of	of Art, Historica	al Treasures,	or Other Sim	ilar Assets	
3 U:	sing the organization's acquisition, accepted in the sign of the s						
a _	Public exhibition	d	Loan or exchange	e programs			
b [Scholarly research	e 🗌	Other				
c	Preservation for future generations						
	rovide a description of the organization's	s collections and expla	ain how they further	the organization	's exempt purpos	e ın Part	
	uring the year, did the organization solic	cit or receive donations	s of art, historical tre	easures, or other	sımılar		
as	ssets to be sold to raise funds rather tha	an to be maintained as	part of the organiz	ation's collection	?		Yes No
Part		•					
	Complete if the organizat	ion answered "Ye	s" on Form 990	, Part IV, line	9, or reported	an amount	on Form
	990, Part X, line 21.						
	the organization an agent, trustee, cus	todian or other interme	ediary for contribution	ons or other asse	ets not		
	cluded on Form 990, Part X?						Yes No
b if	"Yes," explain the arrangement in Part	XIII and complete the	following table				
							Amount
	eginning balance					1c	
	dditions during the year					1d	
	istributions during the year					1e	
	nding balance					1f]	
	id the organization include an amount o						Yes No
	"Yes," explain the arrangement in Part	XIII Check here if the	explanation has be	en provided on P	Part XIII		
Part							
	Complete if the organizat	<u>tion answered "Ye</u>	<u>s" on Form 990</u>	, Part IV, line	<u>10</u>		
		(a) Current year	(b) Pnor year	(c) Two ye	ears back (d) 1	Three years back	(e) Four years back
1a B	eginning of year balance						
b C	ontributions						
	et investment earnings, gains, and sses						
d G	rants or scholarships						
	ther expenditures for facilities and rograms						
	dministrative expenses			,			
	nd of year balance						
_	rovide the estimated percentage of the	ourrent year and heler	as (line 1a aslumi	l			
	oard designated or quasi-endowment	•	ice (line 19, column	(a)) Held as.			
		%					
	emporarily restricted endowment	%					
	he percentages on lines 2a, 2b, and 2c						
	re there endowment funds not in the pos	•	zation that are hold	and administers	od for the		
	rganization by	ssession of the organi	zation that are netu	and administere	tu ioi tile		Yes No
	unrelated organizations						
	i) related organizations						3a(i)
-	•	nizationa liated on roa	urad an Cabadula	D2			3a(ii)
	"Yes" on line 3a(ii), are the related orga			K/			3b
Part	escribe in Part XIII the intended uses of VI; Land, Buildings, and Ed		dowment tunas				
r (ai t	Complete if the organizat		s" on Form 990	Part IV line	11a See Forr	n 990 Part	X line 10
	Description of property	(a) Cost or other		ost or other basis	(c) Accumula		(d) Book value
		(investmen		(other)	depreciation		(-,
1a La				· · · · · · · · · · · · · · · · · · ·	 		
	uildings		 				
	· ·			834,664	<u> </u>	2,362	772,30
							1 1 7 1 1
c Le	easehold improvements						
c Le	quipment			112,082		6,116	15,960

Part VII	Investments—Other Securities.	- F 000 - B- + B + F	441.0 5 000.0 17.17
	Complete if the organization answered "Yes" or		
	(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation
(4) Financial a	<u></u>	-	Cost or end-of-year market value
(1) Financial d	•		
	eld equity interests		
(3) Other			
(A)			
(B)			
(C)			
(D)			<u> </u>
(E)			
(F)			
(G)			
(H)			
	n (b) must equal Form 990, Part X, col. (B) line 12.) ▶		
Part VIII	Investments—Program Related.		
	Complete if the organization answered "Yes" or	Form 990, Part IV, line	e 11c See Form 990, Part X, line 13.
	(a) Description of investment	(b) Book value	(c) Method of valuation
		1	Cost or end-of-year market value
_(1)			
_(2)			
(3)			
(4)			
(5)			
(6)	-		
(7)			
(8)		† 	-
(9)			
	n (b) must equal Form 990, Part X, col. (B) line 13.) ▶		
Part IX	Other Assets.	- L	
	Complete if the organization answered "Yes" on	Form 990, Part IV, line	e 11d. See Form 990. Part X. line 15.
	(a) Description		(b) Book value
(1)		-	<u> </u>
(2)			
(3)			-
(4)			
(5)	· · · · · · · · · · · · · · · · · · ·		
(6)		 -	
(7)		<u></u>	
(8)		- <u> </u>	· · · · · · · · · · · · · · · · · · ·
(9)			
	n (b) must equal Form 990, Part X, col. (B) line 15)	-	
Part X	Other Liabilities.		
10 tag (10 10	Complete if the organization answered "Yes" or	Form 000 Port IV line	110 or 11f Coo Form 000 Dort V
	line 25.	i romi 990, ran iv, ime	e rie di Til. See Form 990, Part A,
1.		(h) Parkingha	
	(a) Description of hability	(b) Book value	and the second of the second of the second
	ncome taxes	25 552	
		25,552	
	on in Advance	3,206	
(4)		<u> </u>	
(5)			
<u>(6)</u>			
(7)			
(8)	· · · · · · · · · · · · · · · · · · ·		
_(9)			The William Control
	(b) must equal Form 990, Part X, col (B) line 25.) ▶	28,758	the sale of the sale of
	uncertain tax positions. In Part XIII, provide the text of the for		nancial 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

Sche	edule D (Form 990) 2016 Kidwatch Plus, Inc.	36-36587	85	Page 4
Ps	Reconciliation of Revenue per Audited Financial State	ments With Revenue per R	eturn.	•
	Complete if the organization answered "Yes" on Form 990			
1	Total revenue, gains, and other support per audited financial statements		1	1,063,796
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		17	
а	Net unrealized gains (losses) on investments	2a	1 231	
b	Donated services and use of facilities	2b] []	
С	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII)	2d], [
е	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	1,063,796
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	1 1	1	
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	_ ["	
b	Other (Describe in Part XIII)	4b]	
С	Add lines 4a and 4b		4c	
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)		5	1,063,796
P;	art XII Reconciliation of Expenses per Audited Financial Stat	ements With Expenses per	Return	า.
	Complete if the organization answered "Yes" on Form 990	, Part IV, line 12a.		
1	Total expenses and losses per audited financial statements		1	1,032,576
2	Amounts included on line 1 but not on Form 990, Part IX, line 25			
а	Donated services and use of facilities	2a],	
b	Prior year adjustments	2b	101	
C	Other losses	2c	_[′	
þ	Other (Describe in Part XIII.)	2d]	
e	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	1,032,576
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	_	
b	Other (Describe in Part XIII.)	4b	_[[
¢	Add lines 4a and 4b		4c	
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)		5	1,032,576

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.

Schedule D (Form 990) 2016 Kidwatch Plus, Inc.

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Part XIII. Supplemental Information (continued)

SCHEDULE E

(Form 990 or 990-EZ)

Schools

Complete if the organization answered "Yes" on Form 990, Part IV, line 13, or Form 990-EZ, Part VI, line 48.

▶ Attach to Form 990 or Form 990-EZ.

▶ Information about Schedule E (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

Open to Public inspection

Department of the Treasury Internal Revenue Service Name of the organization

Kidwatch Plus, Inc.

Employer identification number 36-3658785

17.2				
			YES	NO
1	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?	1	X	· · · · · · · · · · · · · · · · · · ·
2	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?	2		X
3	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe If "No," please explain If you need more space, use Part II	3	X	
	Kidwatch Plus, Inc. publishes it racial nondiscriminatory policy			
	on its website in the Parent Handbook. This makes it available		14	1970
	to all potential registering families.		1/1/1	
		1		1 2
				200
4	Does the organization maintain the following?	1	mi ()	[
a	Records indicating the racial composition of the student body, faculty, and administrative staff?	4a	X	ļ
b	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	4b	x	
С		- TO		1
·	with student admissions, programs, and scholarships?	4c	X	
d		4d	X	
	If you answered "No" to any of the above, please explain If you need more space, use Part II			ľ
		111/	9"	
		1/2	14	170
5	Does the organization discriminate by race in any way with respect to:	130		199
a	Students' rights or privileges?	5a		x
a	Opposite lights of privileges.			†
b	Admissions policies?	5b		x
	·			
С	Employment of faculty or administrative staff?	5c		X
d	Scholarships or other financial assistance?	5d		X
		!	•	l
е	Educational policies?	5e		X
	U Afficially, O	ا _{ــ} ا		
T	Use of facilities?	5f		X
~	Athletic programs?	5g		x
g	Attitude programs.	Jg		 ^
h	Other extracurricular activities?	5h		x
	If you answered "Yes" to any of the above, please explain. If you need more space, use Part II			
				1
		1		1
				10
			ľ	/"
6a	Does the organization receive any financial aid or assistance from a governmental agency?	6a	x	
b	Has the organization's right to such aid ever been revoked or suspended?	6b		Х
	If you answered "Yes" on either line 6a or line 6b, explain on Part II	7	1	77
7	Does the organization certify that it has complied with the applicable requirements of sections 4.01 through			
	4 05 of Rev Proc 75-50, 1975-2 C B 587, covering racial nondiscrimination? If "No," explain on Part II	7	X	

Kidwatch Plus, Inc.

36-3658785

Page 2

Supplemental Information. Provide the explanations required by Part I, lines 3, 4d, 5h, 6b, and 7, as applicable Also provide any other additional information (see instructions).

Sch E - Financial Aid or Government Assistance Explanation

Kidwatch Plus, Inc. has received grants from the Board of Education of the

City of Chicago to provide early childhood services programs for pre
kindergarten age children.

SCHEDULE O (Form 990 or 990-EZ)

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.

OMB No 1545-0047

Open to Public

Department of the Treasury Internal Revenue Service

▶ Attach to Form 990 or 990-EZ.

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

Inspection **Employer identification number**

Name of the organization

Kidwatch Plus, Inc.

Form 990, Part VI, Line 11b - Organization's Process to Review Form 990 The Form 990 is emailed to all board members before it is filed.

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the five board members get together to review the 990 before it is filed. They read through the entire form and compare the information to the prior year filed Form 990.

Form 990, Part VI, Line 12c - Enforcement of Conflicts Policy The conflict of interest policy is part of the personnel policy manual. The personnel policy manual is provided to all staff and required to be reviewed annually. The staff and the Board of Directors also monitor this policy through ongoing oversight and periodic meetings.

Form 990, Part VI, Line 15a - Compensation Process for Top Official The Board of Directors approves the compensation levels for the executive directors and key administrative employees annually. This process includes review of salary data for similar positions in the Chicago area.

Form 990, Part VI, Line 19 - Governing Documents Disclosure Explanation No documents available to the public