CI For	HANGE OF ACC m 990	Retu	rn of Org	ganization Ex					OMB No 1545-0047
Depa	v. January 2020) artment of the Treasury mal Revenue Service	] , ▶ Do	not enter soci	4947(a)(1) of the Interr al security numbers or gov/Form990 for instr	n this form	as it may	be made put	olic. 147	Open to Public Inspection
A	For the 2019 calenda							<u>.                                    </u>	у порессои
В		of organization		<i>y</i> = 2 , and 0.		<u> </u>		D Employ	rer identification number
$\bar{\Box}$	Address change	Fo	r The Ki	ds Org					
Ħ	Doing	ousiness as		<u>-</u>				□ 81-2	2933767
님		r and street (or PO box if			1	RECE	Victoria de la composição de la composiç	E Telepho	ne number
		S. 500 W.,							·803-0033
	terminated	town, state or province, cou	-	• •	22	NOV 1	2020	S S	
$\overline{\Box}$	Amondod sohim	t Lake City		T 84101-1248	805	NOV 1	7 2020	G Gross n	ecerpts\$ 65,086
님	r Name	and address of principal off	icer				M/a) le thic	<b>∡</b> a group return fo	or subordinates Yes X N
Ш		nda Zoloth				OGDEN	V, WT "	a group remin to	
		) S. 500 W						Subordinates in	
		t Lake Ci	ty	UT 84101	<u>-1248</u>		_   "f"	"No," attach a is	st. (see instructions)
		501(c)(3) 501(c)	<del></del>	nsert no ) 4947(a)(1	1) or	527	4		
J		//www.fort	<u>hekids.</u>	org/			H(c) Group	exemption num	
		orporation Trust	Association	Other ▶		<u>  [L]</u>	ear of formation	2016	M State of legal domicale U
_ <u>P</u>	Part I Summar								
4.				significant activities:					
Governance	<b>.</b>			who are in r			F	<del>.</del> <del>.</del>	
Ē				he inner city				bags of	foods
Š	into kids	backpacks a	as they 1	head home for	r the	weeken	d.		
ගී	2 Check this box >	If the organization	on discontinue	d its operations or dis	sposed of	more than	25% of its	net assets.	
≎ಶ	3 Number of voting	members of the gov	veming body (	(Part VI, line 1a)				3_	4
ies	4 Number of indep	endent voting membe	ers of the gov	reming body (Part VI,	line 1b)			4	4
₹	5 Total number of i	ndividuals employed	in calendar y	ear 2019 (Part V, line	e 2a)			5	2
Activities	6 Total number of	volunteers (estimate	if necessary)					6	394
	7a Total unrelated b	usiness revenue from	m Part VIII, co	lumn (C), line 12			• • • • • • • • • • • • • • • • • • • •	7a	C
	<b>b</b> Net unrelated but	siness taxable incom	e from Form	990-T, line 39				7b	C
		. –	•				Prior	Year	Current Year
Ō	8 Contributions and					r			
		grants (Part VIII, Im		•		. [	2.	25,670	65,080
enn	9 Program service	revenue (Part VIII, III	ne 2g)			[	2.		C
Revenu	9 Program service 10 Investment incom	revenue (Part VIII, lı e (Part VIII, column	ne 2g) (A), lines 3, 4			· · · · · ·	2	9	6
Revenue	9 Program service 10 Investment incom 11 Other revenue (P	revenue (Part VIII, lii e (Part VIII, column art VIII, column (A),	ne 2g) (A), lines 3, 4 lines 5, 6d, 8d	c, 9c, 10c, and 11e)				9 1,399	0 6 0
Revenu	9 Program service 10 Investment incom 11 Other revenue (P 12 Total revenue – a	revenue (Part VIII, III e (Part VIII, column art VIII, column (A), add lines 8 through 1	ne 2g) (A), lines 3, 4 lines 5, 6d, 8d I <b>1 (</b> must equa	c, 9c, 10c, and 11e) I Part VIII, column (A)	), line 12)			9	65,086
Revenu	9 Program service 10 Investment incom 11 Other revenue (P 12 Total revenue – a 13 Grants and similar	revenue (Part VIII, III e (Part VIII, column art VIII, column (A), add lines 8 through 1 r amounts paid (Par	ne 2g) (A), lines 3, 4 lines 5, 6d, 8d 1 (must equal t IX, column (	c, 9c, 10c, and 11e) I Part VIII, column (A) A), lines 1–3)	), line 12)			9 1,399	0 6 0
Revenu	9 Program service 10 Investment incom 11 Other revenue (P 12 Total revenue – a 13 Grants and simila 14 Benefits paid to o	revenue (Part VIII, III e (Part VIII, column art VIII, column (A), add lines 8 through 1 r amounts paid (Part r for members (Part	ne 2g) (A), lines 3, 4 lines 5, 6d, 8d 1 (must equal t IX, column (A	c, 9c, 10c, and 11e) I Part VIII, column (A) A), lines 1–3) A), line 4)			2.	9 1,399 27,078	65,086 500
	9 Program service 10 Investment incom 11 Other revenue (P 12 Total revenue – a 13 Grants and simila 14 Benefits paid to o	revenue (Part VIII, III e (Part VIII, column art VIII, column (A), add lines 8 through 1 r amounts paid (Part r for members (Part mpensation, employ	ne 2g) (A), lines 3, 4 lines 5, 6d, 8c 1 (must equal t IX, column (A) ree benefits (F	c, 9c, 10c, and 11e) I Part VIII, column (A) A), lines 1–3) A), line 4) Part IX, column (A), li			2.	9 1,399	65,086 500 13,476
	9 Program service 10 Investment incom 11 Other revenue (P 12 Total revenue – a 13 Grants and simila 14 Benefits paid to o	revenue (Part VIII, III e (Part VIII, column art VIII, column (A), add lines 8 through 1 r amounts paid (Part r for members (Part impensation, employ raising fees (Part IX,	ne 2g) (A), lines 3, 4 lines 5, 6d, 8d 1 (must equal 1 IX, column (A ree benefits (F 1, column (A),	c, 9c, 10c, and 11e) I Part VIII, column (A) A), lines 1–3) A), line 4) Part IX, column (A), lill line 11e)	nes 5–10)	[	2.	9 1,399 27,078	65,086 500
	9 Program service 10 Investment incom 11 Other revenue (P 12 Total revenue – a 13 Grants and simila 14 Benefits paid to c 15 Salanes, other cc 16a Professional fund b Total fundraising	revenue (Part VIII, III e (Part VIII, column art VIII, column (A), add lines 8 through 1 r amounts paid (Part r for members (Part impensation, employ raising fees (Part IX, expenses (Part IX,	ne 2g) (A), lines 3, 4 lines 5, 6d, 8d 1 (must equal t IX, column (A) ree benefits (F), column (A), column (D), lin	c, 9c, 10c, and 11e) I Part VIII, column (A) A), lines 1–3) A), line 4) Part IX, column (A), lilline 11e) ale 25)		[	2.	9 1,399 27,078 33,912	65,086 500 13,476
Expenses Revenu	9 Program service 10 Investment incom 11 Other revenue (P 12 Total revenue – a 13 Grants and simila 14 Benefits paid to c 15 Salanes, other cc 16a Professional fund b Total fundraising 17 Other expenses (	revenue (Part VIII, III e (Part VIII, column art VIII, column (A), add lines 8 through 1 r amounts paid (Part r for members (Part impensation, employ raising fees (Part IX, expenses (Part IX, expenses (Part IX, expenses (A),	ne 2g) (A), lines 3, 4 lines 5, 6d, 8d 1 (must equal 1 IX, column (A) ree benefits (F, column (A), column (D), lin lines 11a–11d	c, 9c, 10c, and 11e)  I Part VIII, column (A)  A), lines 1–3)  A), line 4)  Part IX, column (A), li  line 11e)  te 25) ▶  d, 11f–24e)	nes 5–10)	[	2.	9 1,399 27,078 33,912 53,219	65,086 500 0 13,476 0
	9 Program service 10 Investment incom 11 Other revenue (P 12 Total revenue – a 13 Grants and simila 14 Benefits paid to o 15 Salanes, other oc 16a Professional fund b Total fundraising 17 Other expenses ( 18 Total expenses.	revenue (Part VIII, Initial de (Part VIII, column art VIII, column (A), add lines 8 through 1 ramounts paid (Part for members (Part Impensation, employ raising fees (Part IX, column (A), add lines 13–17 (mustice (Part IX, column (A), add lines (A), add lines (A), add lines (Part IX, column (A), add lines	ne 2g) (A), lines 3, 4 lines 5, 6d, 8c 1 (must equal t IX, column (A), column (A), column (D), lin lines 11a–11c st equal Part	c, 9c, 10c, and 11e)  I Part VIII, column (A)  A), lines 1–3)  A), line 4)  Part IX, column (A), lill  line 11e)  ie 25)   d, 11f–24e)  IX, column (A), line 2	nes 5–10)	[	1:	9 1,399 27,078 33,912 53,219 87,131	65,086 500 0 13,476 0 80,729 94,705
Expenses	9 Program service 10 Investment incom 11 Other revenue (P 12 Total revenue – a 13 Grants and simila 14 Benefits paid to a 15 Salanes, other oc 16a Professional fund b Total fundraising 17 Other expenses ( 18 Total expenses. A	revenue (Part VIII, Initial de (Part VIII, column art VIII, column (A), add lines 8 through 1 ramounts paid (Part for members (Part Impensation, employ raising fees (Part IX, column (A), add lines 13–17 (mustice (Part IX, column (A), add lines (A), add lines (A), add lines (Part IX, column (A), add lines	ne 2g) (A), lines 3, 4 lines 5, 6d, 8c 1 (must equal t IX, column (A), column (A), column (D), lin lines 11a–11c st equal Part	c, 9c, 10c, and 11e)  I Part VIII, column (A)  A), lines 1–3)  A), line 4)  Part IX, column (A), lill  line 11e)  ie 25)   d, 11f–24e)  IX, column (A), line 2	nes 5–10)	[	1	9 1,399 27,078 33,912 53,219 87,131 39,947	80,729 94,705 -29,619
Expenses	9 Program service 10 Investment incom 11 Other revenue (P 12 Total revenue – a 13 Grants and simila 14 Benefits paid to a 15 Salanes, other oc 16a Professional fund b Total fundraising 17 Other expenses ( 18 Total expenses. A	revenue (Part VIII, Initial et (Part VIII, column art VIII, column (A), add lines 8 through 1 ramounts paid (Part of for members (Part IX, compensation, employ raising fees (Part IX, column (A), add lines 13–17 (musternses, Subtract lines)	ne 2g) (A), lines 3, 4 lines 5, 6d, 8c 1 (must equal t IX, column (A), column (A), column (D), lin lines 11a–11c st equal Part	c, 9c, 10c, and 11e)  I Part VIII, column (A)  A), lines 1–3)  A), line 4)  Part IX, column (A), lill  line 11e)  ie 25)   d, 11f–24e)  IX, column (A), line 2	nes 5–10)	[	2. 1. 1. Beginning of	9 1,399 27,078 33,912 53,219 87,131 39,947 Current Year	80,729 94,705 End of Year
Expenses	9 Program service 10 Investment incom 11 Other revenue (P 12 Total revenue – a 13 Grants and simila 14 Benefits paid to a 15 Salanes, other oc 16a Professional fund b Total fundraising 17 Other expenses ( 18 Total expenses. A	revenue (Part VIII, Initial e (Part VIII, column art VIII, column (A), add lines 8 through 1 ramounts paid (Part of for members (Part Impensation, employ raising fees (Part IX, cexpenses (Part IX, column (A), add lines 13–17 (must benses. Subtract lines (X, line 16)	ne 2g) (A), lines 3, 4 lines 5, 6d, 8c 1 (must equal t IX, column (A), column (A), column (D), lin lines 11a–11c st equal Part	c, 9c, 10c, and 11e)  I Part VIII, column (A)  A), lines 1–3)  A), line 4)  Part IX, column (A), lill  line 11e)  ie 25)   d, 11f–24e)  IX, column (A), line 2	nes 5–10)	[	2. 1. 1. Beginning of	9 1,399 27,078 33,912 53,219 87,131 39,947 Current Year 03,517	80,729 94,705 End of Year 73,898
Expenses	9 Program service 10 Investment incom 11 Other revenue (P 12 Total revenue – a 13 Grants and simila 14 Benefits paid to a 15 Salanes, other oc 16a Professional fund b Total fundraising 17 Other expenses ( 18 Total expenses. A	revenue (Part VIII, III e (Part VIII, column art VIII, column (A), add lines 8 through 1 r amounts paid (Part r for members (Part impensation, employ raising fees (Part IX, expenses (Part IX, expenses (Part IX, expenses (Part IX, column (A), add lines 13–17 (mus expenses. Subtract line in X, line 16) art X, line 26)	ne 2g) (A), lines 3, 4 lines 5, 6d, 8d 1 (must equal 1 IX, column (A ree benefits (F , column (A), column (D), lin lines 11a–11d st equal Part II 18 from line	c, 9c, 10c, and 11e)  I Part VIII, column (A)  A), lines 1–3)  A), line 4)  Part IX, column (A), line 11e)  the 25) ▶  IX, column (A), line 2  12	nes 5–10)	[	1 1 Beginning of	9 1,399 27,078 33,912 53,219 87,131 39,947 Current Year 03,517	80,729 94,705 -29,619 End of Year 73,898
Net Assets or Expenses	9 Program service 10 Investment incom 11 Other revenue (P 12 Total revenue — a 13 Grants and simila 14 Benefits paid to o 15 Salanes, other co 16a Professional fund b Total fundraising 17 Other expenses ( 18 Total expenses A 19 Revenue less expenses (Part 21 Total liabilities (Part 22 Net assets or fund	revenue (Part VIII, III e (Part VIII, column art VIII, column (A), add lines 8 through 1 r amounts paid (Part r for members (Part impensation, employ raising fees (Part IX, expenses (P	ne 2g) (A), lines 3, 4 lines 5, 6d, 8d 1 (must equal 1 IX, column (A ree benefits (F , column (A), column (D), lin lines 11a–11d st equal Part II 18 from line	c, 9c, 10c, and 11e)  I Part VIII, column (A)  A), lines 1–3)  A), line 4)  Part IX, column (A), line 11e)  the 25) ▶  IX, column (A), line 2  12	nes 5–10)	[	1 1 Beginning of	9 1,399 27,078 33,912 53,219 87,131 39,947 Current Year 03,517	80,729 94,705 End of Year 73,898
Net Assets or Expenses	9 Program service 10 Investment incom 11 Other revenue (P 12 Total revenue — a 13 Grants and simila 14 Benefits paid to c 15 Salanes, other cc 16a Professional fund b Total fundraising 17 Other expenses ( 18 Total expenses A 19 Revenue less expenses (Parl 21 Total liabilities (Parl 22 Net assets or fundrant II Signature	revenue (Part VIII, III e (Part VIII, column art VIII, column (A), add lines 8 through 1 r amounts paid (Part r for members (Part impensation, employ raising fees (Part IX, expenses (Part IX, expenses (Part IX, expenses (Part IX, other (A), add lines 13–17 (must expenses. Subtract line in X, line 16) art X, line 26) d balances. Subtract e Block	ne 2g) (A), lines 3, 4 lines 5, 6d, 8d 1 (must equal t IX, column (A) ree benefits (F, column (A), column (D), lin lines 11a–11d st equal Part t 18 from line	c, 9c, 10c, and 11e) I Part VIII, column (A) A), lines 1–3) A), line 4) Part IX, column (A), lilline 11e) the 25) ▶ 1 d, 11f–24e) IX, column (A), line 2: 12	nes 5–10)	3	2 1 1 Beginning of 1	9 1,399 27,078 33,912 53,219 87,131 39,947 Current Year 03,517 0	80,729 94,705 -29,619 End of Year 73,898
C To Fund Balances	9 Program service 10 Investment incom 11 Other revenue (P 12 Total revenue — a 13 Grants and simila 14 Benefits paid to c 15 Salanes, other cc 16a Professional fund b Total fundraising 17 Other expenses ( 18 Total expenses A 19 Revenue less expenses (Part 21 Total liabilities (Part 22 Net assets or fundrat II Signature	revenue (Part VIII, III e (Part VIII, column art VIII, column (A), add lines 8 through 1 r amounts paid (Part r for members (Part impensation, employ raising fees (Part IX, expenses (Part IX, expenses (Part IX, expenses (Part IX, other IX, column (A), add lines 13–17 (must expenses. Subtract line IX, line 16) art X, line 26) d balances. Subtract e Block declare that I have excent	ne 2g) (A), lines 3, 4 lines 5, 6d, 8d 1 (must equal t IX, column (A) ree benefits (F , column (D), lin lines 11a–11d st equal Part t 18 from line t line 21 from line amined this retu	c, 9c, 10c, and 11e) I Part VIII, column (A) A), lines 1–3) A), line 4) Part IX, column (A), line 11e) Ine 25) IX, column (A), line 2 IX	nes 5–10)	B	2.  1. 1. Beginning of 1. 1. atements, and	9 1,399 27,078 33,912 53,219 87,131 39,947 Current Year 03,517 0	80,729 94,705 -29,619 End of Year 73,898
C To Fund Balances	9 Program service 10 Investment incom 11 Other revenue (P 12 Total revenue — a 13 Grants and simila 14 Benefits paid to c 15 Salanes, other cc 16a Professional fund b Total fundraising 17 Other expenses ( 18 Total expenses A 19 Revenue less expenses (Parl 21 Total liabilities (Parl 22 Net assets or fundrant II Signature	revenue (Part VIII, III e (Part VIII, column art VIII, column (A), add lines 8 through 1 r amounts paid (Part r for members (Part impensation, employ raising fees (Part IX, expenses (Part IX, expenses (Part IX, expenses (Part IX, other IX, column (A), add lines 13–17 (must expenses. Subtract line IX, line 16) art X, line 26) d balances. Subtract e Block declare that I have excent	ne 2g) (A), lines 3, 4 lines 5, 6d, 8d 1 (must equal t IX, column (A) ree benefits (F , column (D), lin lines 11a–11d st equal Part t 18 from line t line 21 from line amined this retu	c, 9c, 10c, and 11e) I Part VIII, column (A) A), lines 1–3) A), line 4) Part IX, column (A), line 11e) Ine 25) IX, column (A), line 2 IX	nes 5–10)	B	2.  1. 1. Beginning of 1. 1. atements, and	9 1,399 27,078 33,912 53,219 87,131 39,947 Current Year 03,517 0	80,729 94,705 -29,619 End of Year 73,898
F ⊆ To Fund Balances Expenses	9 Program service 10 Investment incom 11 Other revenue (P 12 Total revenue — a 13 Grants and simila 14 Benefits paid to o 15 Salanes, other co 16a Professional fund b Total fundraising 17 Other expenses ( 18 Total expenses ( 19 Revenue less expenses ( 20 Total assets (Part 21 Total liabilities (Part 22 Net assets or funder penalties of penjury, I ue, correct, and complete	revenue (Part VIII, III e (Part VIII, column art VIII, column (A), add lines 8 through 1 r amounts paid (Part r for members (Part impensation, employ raising fees (Part IX, column (A), add lines 13–17 (must benses. Subtract line X, line 16) art X, line 26) d balances. Subtract e Block declare that I have exceptions	ne 2g) (A), lines 3, 4 lines 5, 6d, 8d 1 (must equal t IX, column (A) ree benefits (F , column (D), lin lines 11a–11d st equal Part t 18 from line t line 21 from line amined this retu	c, 9c, 10c, and 11e) I Part VIII, column (A) A), lines 1–3) A), line 4) Part IX, column (A), line 11e) Ine 25) IX, column (A), line 2 IX	nes 5–10)	B	2.  1. 1. Beginning of 1. 1. atements, and	9 1,399 27,078 33,912 53,219 87,131 39,947 Current Year 03,517 003,517	80,729 94,705 -29,619 End of Year 73,898 73,898
S コート Net Assets of Expenses	9 Program service 10 Investment incom 11 Other revenue (P 12 Total revenue — a 13 Grants and simila 14 Benefits paid to o 15 Salanes, other oc 16a Professional fund b Total fundraising 17 Other expenses ( 18 Total expenses ( 19 Revenue less expenses ( 20 Total assets (Part 21 Total liabilities (Part 22 Net assets or funder penalties of penjury, I ue, correct, and complete	revenue (Part VIII, Initial de (Part VIII, column art VIII, column (A), add lines 8 through 1 ramounts paid (Part of for members (Part IX, column (A), add lines 13–17 (musternses Subtract lines X, line 16) art X, line 26) dibalances. Subtract Block declaration of preparer	ne 2g) (A), lines 3, 4 lines 5, 6d, 8d 1 (must equal t IX, column (A) ree benefits (F , column (D), lin lines 11a–11d st equal Part t 18 from line t line 21 from line amined this retu	c, 9c, 10c, and 11e) I Part VIII, column (A) A), lines 1–3) A), line 4) Part IX, column (A), line 11e) Ine 25) IX, column (A), line 2 IX	nes 5–10, L4 , 15: 5)  bying schedormation of	Jules and sta	2.  1. 1. Beginning of 1. 1. atements, and arer has any	9 1,399 27,078 33,912 53,219 87,131 39,947 Current Year 03,517 003,517	80,729 94,705 -29,619 End of Year 73,898 73,898
F ⊆ To Fund Balances Expenses	9 Program service 10 Investment incom 11 Other revenue (P 12 Total revenue — a 13 Grants and simila 14 Benefits paid to o 15 Salanes, other co 16a Professional fund b Total fundraising 17 Other expenses ( 18 Total expenses A 19 Revenue less exp 20 Total assets (Part 21 Total liabilities (Part 22 Net assets or fundrat II Signatur Inder penalties of perjury, I ue, correct, and complete In Signature of In Mino	revenue (Part VIII, Initial Part VIII, Initial Part VIII, column (A), add lines 8 through 1 or amounts paid (Part of members (Part of members (Part IX, column (A), add lines 13–17 (must penses. Subtract lines (Part IX, line 16) of balances. Subtract (Part IX, line 26) of balances.	ne 2g) (A), lines 3, 4 lines 5, 6d, 8d 1 (must equal t IX, column (A) ree benefits (F , column (D), lin lines 11a–11d st equal Part t 18 from line t line 21 from line amined this retu	c, 9c, 10c, and 11e) I Part VIII, column (A) A), lines 1–3) A), line 4) Part IX, column (A), line 11e) Ine 25) IX, column (A), line 2 IX	nes 5–10, L4 , 15: 5)  bying schedormation of	Jules and sta	2.  1. 1. Beginning of 1. 1. atements, and arer has any	9 1,399 27,078 33,912 53,219 87,131 39,947 Current Year 03,517 003,517	80,729 94,705 -29,619 End of Year 73,898 73,898
S コート Net Assets of Expenses	9 Program service 10 Investment incom 11 Other revenue (P 12 Total revenue — a 13 Grants and simila 14 Benefits paid to c 15 Salanes, other cc 16a Professional fund b Total fundraising 17 Other expenses ( 18 Total expenses . 19 Revenue less expenses expenses (Part 21 Total liabilities (Part 22 Net assets or fundrate in Signature 14 Signature 15 Signature 16 Mino 17 Type or point	revenue (Part VIII, III e (Part VIII, column art VIII, column (A), add lines 8 through 1 r amounts paid (Part r for members (Part impensation, employ raising fees (Part IX, expenses (P	ne 2g) (A), lines 3, 4 lines 5, 6d, 8d 1 (must equal t IX, column (A) ree benefits (F , column (D), lin lines 11a–11d st equal Part t 18 from line t line 21 from amined this retur f (other than off	c, 9c, 10c, and 11e) I Part VIII, column (A) A), lines 1–3) A), line 4) Part IX, column (A), line 11e) Ine 25) IX, column (A), line 2 IX, column (A), line 3 IX,	nes 5–10, L4 , 15: 5)  bying schedormation of	ules and state of which prep	Beginning of 1 (atements, and arer has any	9 1,399 27,078 33,912 53,219 87,131 39,947 Current Year 03,517 0 03,517 I to the best of knowledge. Date Directo	80,729 94,705 -29,619 End of Year 73,898 of my knowledge and belief,
H S	9 Program service 10 Investment incom 11 Other revenue (P 12 Total revenue — a 13 Grants and simila 14 Benefits paid to c 15 Salanes, other cc 16a Professional fund b Total fundraising 17 Other expenses ( 18 Total expenses (Parl 21 Total liabilities (Parl 21 Total liabilities (Parl 22 Net assets or fundrate (Parl 23 Signature of Parl 24 Signature of Parl 25 Signature of Parl 26 Mino	revenue (Part VIII, III e (Part VIII, column art VIII, column (A), add lines 8 through 1 r amounts paid (Part r for members (Part impensation, employ raising fees (Part IX, expenses (P	ne 2g) (A), lines 3, 4 lines 5, 6d, 8d 1 (must equal t IX, column (A) ree benefits (F, column (D), lin lines 11a–11d st equal Part t 18 from line tine 21 from amined this reture (other than off	c, 9c, 10c, and 11e) I Part VIII, column (A) A), lines 1–3) A), line 4) Part IX, column (A), line 11e) IN E 25) IN A Column (A), line 20 IX, column (	nes 5–10) L4 , 15: 5)  nying schedormation of	ules and state which prepared Execution	2.  Beginning of 1.  1.  atements, and arer has any	9 1,399 27,078 33,912 53,219 87,131 39,947 Current Year 03,517 003,517 I to the best of knowledge.  Date Directo	80,729 94,705 -29,619 End of Year 73,898 of my knowledge and belief,
B B B C B C Blances Expenses	9 Program service 10 Investment incom 11 Other revenue (P 12 Total revenue — a 13 Grants and simila 14 Benefits paid to o 15 Salanes, other co 16a Professional fund b Total fundraising 17 Other expenses ( 18 Total expenses ( 19 Revenue less expenses ( 20 Total assets (Part 21 Total liabilities (Part 22 Net assets or funder penalties of penjury, I ue, correct, and complete  Signature of Type or point Print/Type preparers d Justin R. Sh	revenue (Part VIII, III e (Part VIII, column art VIII, column (A), add lines 8 through 1 r amounts paid (Part r for members (Part impensation, employ raising fees (Part IX, expenses (P	ne 2g) (A), lines 3, 4 lines 5, 6d, 8d 1 (must equal 1 IX, column (IX, column (A), column (D), lin lines 11a-11d 18 from line 18 from line 19 from line 21 from lines 11a-11d 19 from line 21 from lines 11a-11d 19 from line 21 from lines 21 from lines 31a-11d 19 fro	c, 9c, 10c, and 11e) I Part VIII, column (A) A), lines 1–3) A), line 4) Part IX, column (A), line 11e) IN E 25) IN A, column (A), line 20 IX, column (	nes 5–10) L4 , 15: 5)  nying schedormation of	ules and state of which prep	2.  Beginning of 1.  1.  atements, and arer has any	9 1,399 27,078 33,912 53,219 87,131 39,947 Current Year 03,517 003,517 I to the best of knowledge.  Date Directo 16/20 Seff-en	65,086 500 13,476 0 80,729 94,705 -29,619 End of Year 73,898 0 73,898 of my knowledge and belief, polyged P00081558
A B B B C A Fund Balances Expenses	9 Program service 10 Investment incom 11 Other revenue (P 12 Total revenue — a 13 Grants and simila 14 Benefits paid to o 15 Salanes, other co 16a Professional fund b Total fundraising 17 Other expenses ( 18 Total expenses (Part 21 Total labilities (Part 21 Total labilities (Part 22 Net assets or fundrate (Part II Signature of Type or point Print/Type preparer's Justin R. Sh Firm's name	revenue (Part VIII, III e (Part VIII, column art VIII, column (A), add lines 8 through 1 r amounts paid (Part r for members (Part impensation, employ raising fees (Part IX, column (A), add lines 13–17 (must be part IX, column (A), add lines 13–17 (must be subtract line at X, line 16) art X, line 26) d balances. Subtract be Block declare that I have expended at I have expended and title name aw, CPA, CFE, C Bountifu	ne 2g)  (A), lines 3, 4 lines 5, 6d, 8c 1 (must equal t IX, column (IX, column (IX, column (IX), in the sequal Part (IX) the term of the sequal Part (IX)	c, 9c, 10c, and 11e) I Part VIII, column (A) A), lines 1–3) A), line 4) Part IX, column (A), line 11e) IN (A) IN (	nes 5–10) L4 , 15: 5)  nying sched ormation of	ules and state which prepared to the communication of the communication	2.  Beginning of 1.  1.  atements, and arer has any	9 1,399 27,078 33,912 53,219 87,131 39,947 Current Year 03,517 003,517 I to the best of knowledge.  Date Directo	80,729 94,705 -29,619 End of Year 73,898 of my knowledge and belief,
A B B B C A Fund Balances Expenses	9 Program service 10 Investment incom 11 Other revenue (P 12 Total revenue — a 13 Grants and simila 14 Benefits paid to o 15 Salanes, other co 16a Professional fund b Total fundraising 17 Other expenses ( 18 Total expenses A 19 Revenue less exp 20 Total assets (Part 21 Total liabilities (Part 22 Net assets or fundratili Signatur Inder penalties of perjury, If use, correct, and complete Index penalties of perjury, If use, correct, and complete Index penalties of perjury, If use, correct, and complete Index penalties of perjury, If use, correct, and complete Index penalties of perjury, If use, correct, and complete Index penalties of perjury, If use, correct, and complete Index penalties of penjury, If use, correct, and correct of the correc	revenue (Part VIII, Initial Part VIII, Column art VIII, column (A), add lines 8 through 1 ramounts paid (Part of for members (Part of for members (Part of for members (Part IX, column (A), add lines 13–17 (must be part IX, column (A), add lines 13–17 (must be part IX, line 16) at X, line 16) at X, line 26) displances. Subtract be becaration of prepare la Zoloth name and title name  aw, CPA, CFE, CRA, CFE, CRA, CPA, CFE, CRA, CFE, CR	ne 2g) (A), lines 3, 4 lines 5, 6d, 8c 1 (must equal t IX, column (IX, column (IX, column (IX), in the sequence of	c, 9c, 10c, and 11e) I Part VIII, column (A) A), lines 1–3) A), line 4) Part IX, column (A), line 11e) Ine 25) IX, column (A), line 2 IX, column (A), line 3 IX, column (A), line 4 IX, column (A), line 5 IX,	nes 5–10) L4 , 15.  5)  hying sched formation of the companion of the comp	ules and state which prepared to the communication of the communication	2.  Beginning of 1.  1.  atements, and arer has any	9 1,399 27,078 33,912 53,219 87,131 39,947 Current Year 03,517 0 03,517 I to the best of knowledge. Date Directo Check 16/20 seff-en Firm's EIN	65,086 500 0 13,476 0 13,476 0 80,729 94,705 -29,619 End of Year 73,898 0 73,898 of my knowledge and belief, poons 1558 46-0952065
S H S Sets of Expenses	9 Program service 10 Investment incom 11 Other revenue (P 12 Total revenue — a 13 Grants and simila 14 Benefits paid to c 15 Salanes, other cc 16a Professional fund b Total fundraising 17 Other expenses ( 18 Total expenses A 19 Revenue less exp 20 Total assets (Part 21 Total liabilities (Part 22 Net assets or fundratili Signatur Inder penalties of penjury, I Iue, correct, and complete Index penses of penjury, I Iue, correct, and complete Index penses of penjury, I Iue, correct, and complete Index penses of penjury, I Iue, correct, and complete Index penses of penjury, I Iue, correct, and complete Index penses of penjury, I Iue, correct, and complete Index penses of penjury, I Iue, correct, and complete Index penses of penjury, I Iue, correct, and complete Index penses of penjury, I Iue, correct, and complete Index penses of penjury, I Iue, correct, and complete Index penses of penjury, I Iue, correct, and complete Index penses of penjury, I Iue, correct, and complete Index penses of penjury, I Iue, correct, and complete Index penses of penjury, I Iue, correct, and complete Index penses of penjury, I Iue, correct, and complete Index penses of penjury, I Iue, correct, and complete Index penses of penjury, I Iue, correct, and complete Index penses of penjury, I Iue, correct, and complete Index penses of penjury, I Iue, correct, and correct of penses of pens	revenue (Part VIII, Initial Part VIII, Column art VIII, column (A), add lines 8 through 1 ramounts paid (Part of for members (Part IX, column (A), add lines 13–17 (must be part IX, column (A), add lines 13–17 (must be part IX, column (A), add lines 13–17 (must be part IX, line 16) art X, line 26) displances. Subtract be block declaration of prepare officer arme aw, CPA, CFE, CBOUNTIFU	ne 2g)  (A), lines 3, 4 lines 5, 6d, 8c 1 (must equal 1 IX, column (IX, column (IX, column (IX),	c, 9c, 10c, and 11e) I Part VIII, column (A) A), lines 1–3) A), line 4) Part IX, column (A), line 11e) Ine 25)  IX, column (A), line 2 IX, column (A), line 3 IX, column (A), line 3 IX, column (A), line 4 IX, column (A), line 2 IX, column (A), line 3 IX, column (A), line 4 IX	nes 5–10) L4,15.  5)  Hying sched formation of the companion of the compan	ules and state which prepared to the communication of the communication	2.  Beginning of 1.  1.  atements, and arer has any	9 1,399 27,078 33,912 53,219 87,131 39,947 Current Year 03,517 003,517 I to the best of knowledge.  Date Directo 16/20 Seff-en	80,729 94,705 -29,619 End of Year 73,898 73,898 0 73,898 46-0952065
May September Se	9 Program service 10 Investment incom 11 Other revenue (P 12 Total revenue — a 13 Grants and simila 14 Benefits paid to o 15 Salanes, other co 16a Professional fund b Total fundraising 17 Other expenses ( 18 Total expenses A 19 Revenue less exp 20 Total assets (Part 21 Total liabilities (Part 22 Net assets or fundratili Signatur Inder penalties of perjury, If use, correct, and complete Index penalties of perjury, If use, correct, and complete Index penalties of perjury, If use, correct, and complete Index penalties of perjury, If use, correct, and complete Index penalties of perjury, If use, correct, and complete Index penalties of perjury, If use, correct, and complete Index penalties of penjury, If use, correct, and correct of the correc	revenue (Part VIII, Inite (Part VIII, column art VIII, column (A), add lines 8 through 1 ramounts paid (Part of for members (Part of for members (Part IX, column (A), add lines 13–17 (must be seen and the column (A), add lines 13–17 (must be seen and the column (A), add lines 13–17 (must be seen and the column (A), add lines 13–17 (must be seen and the column (A), add lines 13–17 (must be seen and the column (A), and the c	Ine 2g)  (A), lines 3, 4 lines 5, 6d, 8d 1 (must equal 1 IX, column (IX, column (IX, column (IX), in lines 11a-11d 1	c, 9c, 10c, and 11e) I Part VIII, column (A) A), lines 1–3) A), line 4) Part IX, column (A), line 11e) Ine 25)  IX, column (A), line 2 IX, column (A), line 3 IX, column (A), line 3 IX, column (A), line 4 IX, column (A), line 2 IX, column (A), line 3 IX	nes 5–10) L4,15.  5)  Hying sched formation of the companion of the compan	ules and state which prepared to the communication of the communication	2.  Beginning of 1.  1.  atements, and arer has any	9 1,399 27,078 33,912 53,219 87,131 39,947 Current Year 03,517 0 03,517 I to the best of knowledge. Date Directo Check 16/20 seff-en Firm's EIN	65,086 500 0 13,476 0 13,476 0 80,729 94,705 -29,619 End of Year 73,898 0 73,898 of my knowledge and belief, poons 1558 46-0952065

DAA

	ds Orq		33767	Page
	gram Service Accomplish		D-4 III	Г
	O contains a response or r	note to any line in this	Part III	<u></u> L
Briefly describe the organization's		ero in mood th	rough providing	hage of
<b>Helping underprive</b> for weekends. Tea	chere in the in	re in need m	le will put bage	of food
into kids backpack	es as they head l	ome for the w	eekend.	0.1 . 1.000
THEO RIUS DECAPACA	isasuieliieau	10th 101 th		
Did the organization undertake an	ny significant program services du	inng the year which were no	ot listed on the	
prior Form 990 or 990-EZ?				Yes X
If "Yes," describe these new service	ices on Schedule O.			
Did the organization cease conduc	icting, or make significant change	s in how it conducts, any p	rogram	
				Yes X
If "Yes," describe these changes of			* <b></b>	
Describe the organization's progra				
expenses. Section 501(c)(3) and the total expenses, and revenue, it			grants and allocations to others,	
the total expenses, and revenue,	ir ally, for each program service	reported.		
a (Code: ) (Expenses \$	74.599 including	grants of\$	500 ) (Revenue \$	
a (Code: ) (Expenses \$ For the Kids serve	ed 350 kids in 2	local element	ary schools. We	sent
nome 6,300 backpac	ck meals, had 394	people volum	teer toatling 1,	087
community voluntee	er hours, and han	ded out 400 h	oliday break mea	ls and
Thanksgiving meals	<b>5.</b>			
······				
		,		
		· · · · · · · · · · · · · · · · · · ·		
·				
(Code: ) (Expenses \$		grants of\$	) (Revenue \$	
N/A				
				<i>.</i>
• • • • • • • • • • • • • • • • • • • •				
(Code: ) (Expenses \$	including	grants of\$	) (Revenue \$	
	including	grants of\$	) (Revenue \$	
	induding	grants of\$	) (Revenue \$	
	including	grants of\$	) (Revenue \$	
	including	grants of\$	) (Revenue \$	
	including	grants of\$	) (Revenue \$	
	including	grants of\$	) (Revenue \$	
	including	grants of\$	) (Revenue \$	
	including	grants of\$	) (Revenue \$	
c (Code: ) (Expenses \$ N/A	including	grants of\$	) (Revenue \$	
	including	grants of\$	) (Revenue \$	
	including	grants of\$	) (Revenue \$	
		grants of\$	) (Revenue \$	

Form **990** (2019

Form 990 (2019) For The Kids Org
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,"	ļ		
	complete Schedule A	1	X	ــــــ
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	X	ļ
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			l
	candidates for public office? If "Yes," complete Schedule C, Part I	3	ļ	X
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		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,	۱ ـ		x
_	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		<del>  ^</del>
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors		1	
	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If	6		X
-	"Yes," complete Schedule D, Part I	- <del>°</del> -		<b>-</b>
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	7		x
8	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II  Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"	<del></del>		<u> </u>
0	complete Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a	<u> </u>		<del>                                     </del>
3	custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or			
	debt negotiation services? If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10		x
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.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"	ļ		
	complete Schedule D, Part VI	11a	X	<u> </u>
b	Did the organization report an amount for investments—other securities in Part X, line 12, that is 5% or more	l		
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
C	Did the organization report an amount for investments-program related in Part X, line 13, that is 5% or more			l
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
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		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			v
40.	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	420		x
_	Schedule D, Parts XI and XII	12a		A
Ð	"Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	le the empirication a calculationary of the continuation of the complete Schodule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	-	X
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	1		1
	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		X
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		X
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		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on			Į.
	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		X
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		X
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		X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a	ļ	X
Ь	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	-	<del> </del>
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

Pa	art 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			v
22	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			
	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	1		<del></del>
274	\$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		
С	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		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		X
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key			
	employee, creator or founder, substantial contributor or employee thereof, a grant selection committee			
	member, or to a 35% controlled entity (including an employee thereof) or family member of any of these	27		x
29	persons? If "Yes," complete Schedule L, Part III  Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part	27	$\vdash$	_
28	IV instructions, for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			
-	"Yes," complete Schedule L, Part IV	28a		X
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		X
c	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? 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	X	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"	1		
	complete Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	1		
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III,	_,		v
	or IV, and Part V, line 1	34		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		<b>├</b> ^
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a	35b		l
36	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2  Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable	330		<del>                                     </del>
30	related organization? If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	"		<del>                                     </del>
J.		37		х
38	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	<u> </u>		_ <del>-</del> -
	19? Note: All Form 990 filers are required to complete Schedule O	38	x	
Pa	art V Statements Regarding Other IRS Filings and Tax Compliance			_
	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1		l
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0	1		l
C	Did the organization comply with backup withholding rules for reportable payments to vendors and	<b>i</b> ,		1
	reportable gaming (gambling) winnings to prize winners?	1c		<u> </u>
DAA		Form	1 <b>990</b>	(2019

Pa	art 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 2	1	ľ	ľ
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over,			
	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X
b	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods	[ '		ĺ
	and services provided to the payor?	7a		Х
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		Х
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9Ь		
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12	)		
ь	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			İ
11	Section 501(c)(12) organizations. Enter:			i
а	Gross income from members or shareholders	1		
þ	Gross income from other sources (Do not net amounts due or paid to other sources			
	against amounts due or received from them.)	] ]		1
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		j	ĺ
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note: See the instructions for additional information the organization must report on Schedule O.	i i		
b	Enter the amount of reserves the organization is required to maintain by the states in which		1	1
	the organization is licensed to issue qualified health plans		į	
C	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b	]	
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			
	excess parachute payment(s) during the year?	15		X
	If "Yes," see instructions and file Form 4720, Schedule N			
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		<u> </u>
	If "Yes," complete Form 4720, Schedule O.		]	

Eom	990 (2019) For The Kids Org 81-2933767		D	6
	art VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below,	and f		age (
• •	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule C			
	Check if Schedule O contains a response or note to any line in this Part VI	, OCC	, 11100	X
Sec	tion A. Governing Body and Management	<del></del>	···	
	torin Coroning Dody and management		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	$\Gamma$	100	1.10
•••	If there are material differences in voting rights among members of the governing body, or	1	ĺ .	İ
	if the governing body delegated broad authority to an executive committee or similar			
	committee, explain on Schedule O.	}		
ь	Enter the number of voting members included on line 1a, above, who are independent 1b 4			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with		!	
	any other officer, director, trustee, or key employee?	2		X
3	Did the organization delegate control over management duties customanly performed by or under the direct			
	supervision of officers, directors, trustees, or key employees to a management company or other person?	_3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	_5_		X
6	Did the organization have members or stockholders?	6		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint			l
	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 follow	ing:		1
а	The governing body?	8a	X	<u> </u>
þ	Each committee with authority to act on behalf of the governing body?	8ь	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at	_		
<u> </u>	the organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9		X
<u> </u>	tion B. Policies (This Section B requests information about policies not required by the Internal Roveni	JO C	_	
400	Did the amenization have lead chanters branches or efflicted?	100	Yes	No X
10a b	Did the organization have local chapters, branches, or affiliates?  If "Yes," did the organization have written policies and procedures governing the activities of such chapters,	10a		
	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		1
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></b>
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			$\vdash$
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	x	l
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give use to conflicts?	12b	X	
C	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"			$\Box$
	describe in Schedule O how this was done	12c	X	
13	Did the organization have a written whistleblower policy?	13		X
14	Did the organization have a written document retention and destruction policy?	14	X	
15	Did the process for determining compensation of the following persons include a review and approval by			
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
8	The organization's CEO, Executive Director, or top management official	15a	X	<u> </u>
þ	Other officers or key employees of the organization	15b		X
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).	1 1		ľ
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		<u> </u>
þ	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	l l		
	organization's exempt status with respect to such arrangements?	16b		
	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed <b>UT</b> Section 6404 required an experimentary to provide the Forms 4003 (4024 or 4024 A if continued to 900 and 900 T (Section 504(a))			
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 X Another's website X Upon request Other (explain on Schedule O)			
10	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and			
19	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			
	anda Zoloth 230 S. 500 W., Ste. 215			
	11t Take City 1000 11T 84101-1248 801	on	3-0	U33

7 11/16/2020 8 52 AM									
Form 990 (2019) <b>For The</b>							81-293		Page
Part VII Compensation		Direc	ctor	s, T	rust	ees	, Key Employees, I	lighest Compensat	ed Employees, and
Independent Co							4- 8- 1-01-5		
						_	to any line in this Pa		<u></u>
							st Compensated Emplo		
1a Complete this table for all personganization's tax year.	ons required to	be list	ed. I	Repo	rt com	npen	sation for the calendar ye	ar ending with or within the	ne
• List all of the organization's compensation Enter -0- in column	s (D), (E), and	(F) if n	10 00	mpe	nsatiò	n wa	as paid.	,, 5	ount of
List all of the organization's or a second sec				-					
<ul> <li>List the organization's five control who received reportable compensation and any related organization and any related organization.</li> </ul>	tion (Box 5 of F								
<ul> <li>List all of the organization's t</li> <li>\$100,000 of reportable compensa</li> </ul>								ees who received more the	nan
• List all of the organization's to organization, more than \$10,000 of See instructions for the order in whether the order in which is the order of	f reportable cor	npens	ation	fron	hat re	ceiv orga	ed, in the capacity as a fo inization and any related	rmer director or trustee of organizations.	f the
Check this box if neither the or	ganization nor	any re	elated	dorg	anızat	on e	compensated any current	officer, director, or trustee	9
(A) Name and title	(B) Average hours per week (list any	box, i	not che unless	perso	n re than n is bot ctor/trus	h an	(D)  Reportable compensation from the organization	(E)  Reportable compensation from related organizations	(F) Estimated amount of other compensation from the
	hours for related organizations below dotted line)	Individual trustee or director	Instrutional trustee	Officer	employee	Former	(W-2/1099-MISC)	(W-2/1099-MISC)	organization and related organizations
(1)Minda Zoloth			7						
	30.00								
Executive Director	0.00	X	_	_	<u> </u>	_	16,933	0	<u>C</u>
(2) Heather Davis						1			

0

0

0

0

0

0

0

0

0

0.50

0.50

0.50

0.00

X

X

X

Outreach Director

(3) Kipp Mayeux

Contributing Dir.
(4) Paul Welsh

Programs Director

(6)

(7)

(8)

(9)

(10)

(11)

DAA

$\overline{}$		s, Directors, T		ees,	Key	En	nploy	/ees	s, and Highest Compens	sated Employees (continu	ued)		<u>'</u>	age
	(A) Name and title	(B) Average hours per week (list any	bo	k, unle	Pos check ess pe	more rson	s both	an	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations	İ	(F) mated of oth empens from	amoun ner sation	t
		hours for related organizations below dotted line)	or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)	(W-2/10 <del>99-M</del> ISC)			on and	
														_
				_	ļ									
			-								<u> </u>			
	Subtotal							<b>▶</b>	16,933					
С	Total from continuation she Total (add lines 1b and 1c) Total number of individuals (in	eets to Part Vii	, Se	ctio		 		<b>&gt;</b>	16,933					
3	Did the organization list any employee on line 1a? If "Yes For any individual listed on li	former officer, of	direc edu.	tor, le J	for s	uch	indiv	ridua	al		 [	3	Yes	No X
5	organization and related organization and related organization.  Did any person listed on line for services rendered to the		accru	Je co	 ompe	ensa	tion	 frorr	any unrelated organization			- 4 5		x x
Sect	ion B. Independent Contrac	tors												
1	Complete this table for your compensation from the organ	nization. Report	nper corr	sate pen:	ed inco	depe n fo	r the	nt co cal	endar year ending with or	within the organization's	tax year.			
	Name and	(A) d business address							Descrip	(B) toon of services		Cc	(C) empensa	iton
		-,		<del></del>				-		· <del></del> · · · · · · · · · · · · · · · · · ·				
			_				<u>.</u>	-						
2	Total number of independent received more than \$100,000									0				

Pa	irt_V	/III Statem Check i	ent of	of Revenue nedule O cor	ntains	a resp	onse or no	ote to any line in	this Part VIII		
	***					<u> </u>		(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	c d e f	Federated cam Membership du Fundraising eve Related organic Government grants ( All other contributions and similar amounts i Noncash contributions Total. Add lines	ents zations contribut , gifts, g not include	s	$\overline{}$		65,080 34,378	- 65,080			
Program Service Revenue	f	All other progra	  ser s 2a-2	vice revenue							
	<ul> <li>Investment income (including dividends, interest, a other similar amounts)</li> <li>Income from investment of tax-exempt bond process</li> <li>Royalties</li> </ul>					 nd procee	▶	6			6
	6a b c	Gross rents Less. rental expenses Rental inc. or (loss)	6a 6b 6c	(71.02		(1)			,	,	
Je	7a	Net rental incor Gross amount from sales of assets other than inventory Less cost or other	7a	(loss) (i) Secumbes		(ii)	Other		•		,
ther Revenue	c c	tasis and sales exps. Gain or (loss) Net gain or (los	7c s)				>				
Oth		(not Including \$ of contributions re See Part IV, line 1	ss income from fundraising events Including \$ ontributions reported on line Ic). Part IV, line 18 8a					• •	,		***
	C	Less: direct exp Net income or ( Gross income from See Part IV, line 1	(loss) n gami	from fundraising	8b even 9a	ts	. •				1
	С	Less: direct exp Net income or ( Gross sales of returns and allo	(loss) invent	s from gaming ac ory, less			. •				
	C	Less: cost of go	ods s	old	10a 10b ventor	y	Business Code				<u> </u>
Miscellaneous Revenue	11a b c										
Z SiS	d	All other revenu									
	е	Total. Add lines			<u></u>		. ▶				, <u></u> , ,
	12	Total revenue.	See i	instructions			▶	65,086	0	0	6

81-2933767 Form 990 (2019) For The Kids Org Page 10 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 (D) Fundraising (A) Total expenses Do not include amounts reported on lines 6b, Management and general expenses Program service 7b, 8b, 9b, and 10b of Part VIII. expenses expenses Grants and other assistance to domestic organizations 500 500 and domestic governments. See Part IV, line 21 Grants and other assistance to domestic individuals. See Part IV, line 22 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, 605 6,053 3,935 1,513 trustees, and key employees Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Other salanes and wages . . . . . . 6,465 6,465 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) 9 Other employee benefits 958 791 48 119 Payroll taxes . . . . . . . . . . . . 10 Fees for services (nonemployees): a Management .. . . . . . . . . **b** Legal ..... 1,260 1,260 c Accounting d Lobbying Professional fundraising services. See Part IV, line 17 Investment management fees g Other (If line 11g amount exceeds 10% of line 25, column 1,675 (A) amount, list line 11g expenses on Schedule O) 1,675 500 500 12 Advertising and promotion 7,644 5,734 764 1,146 13 Office expenses Information technology . . . . 14 15 Royaltres 10,211 567 11,345 567 16 Occupancy 1,890 1,890 17 Payments of travel or entertainment expenses for any federal, state, or local public officials Conferences, conventions, and meetings 19 20 21 Payments to affiliates 195 175 10 22 Depreciation, depletion, and amortization 2,699 2,699 23 24 Other expenses Itemize expenses not covered above (List miscellaneous expenses on line 24e if line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.) 39,291 39,291 Food Event expenses 10,798 10,798 2,460 Telephone expense 2,460 Moving expenses 865 865 107 107 e Ali other expenses 94,705 74,599 <u>5,953</u> 14,153 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) Beginning of year End of year 100,262 70,839 Cash-non-interest-bearing 1 Savings and temporary cash investments 2 3 3 Pledges and grants receivable, net . .. . .. .. . 4 Accounts receivable, net 4 5 Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% 6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B) 7 Notes and loans receivable, net 7 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment: cost or other 3,501 basis. Complete Part VI of Schedule D 10a 3,255 b Less: accumulated depreciation 10b 10c 11 Investments—publicly traded securities 11 12 13 Investments—program-related See Part IV, line 11 13 14 Intangible assets 14 15 Other assets. See Part IV, line 11 15 103,517 73,898 16 Total assets. Add lines 1 through 15 (must equal line 33) . 16 17 Accounts payable and accrued expenses 17 18 18 Grants payable 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 any current or former officer, director, Liabilities trustee, key employee, creator or founder, substantial contributor, or 35% 22 controlled entity or family member of any of these persons 23 Secured mortgages and notes payable to unrelated third parties 23 24 Unsecured notes and loans payable to unrelated third parties 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 25 26 Total liabilities. Add lines 17 through 25 Organizations that follow FASB ASC 958, check here |X| Net Assets or Fund Balances and complete lines 27, 28, 32, and 33. 103,517 73,898 27 Net assets without donor restrictions 27 28 Net assets with donor restrictions Organizations that do not follow FASB ASC 958, check here and complete lines 29 through 33. 29 Capital stock or trust principal, or current funds 29 30 Paid-in or capital surplus, or land, building, or equipment fund 30 31 31 Retained earnings, endowment, accumulated income, or other funds Total net assets or fund balances 103,517 73,898 32 73,898 103,517 Total liabilities and net assets/fund balances . .

Form 990 (2019

Forn	n 990 (2019) For The Kids Org 81-2933767			Pag	<u>qe 12</u>
Pa	rt XI Reconciliation of Net Assets				_
	Check if Schedule O contains a response or note to any line in this Part XI	<u> </u>			$\Box$
1	Total revenue (must equal Part VIII, column (A), line 12)	1		55,0	
2	Total expenses (must equal Part IX, column (A), line 25)	2			705
3	Revenue less expenses Subtract line 2 from line 1	3			<u>619</u>
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	1(	<u>)3,5</u>	<u>517</u>
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Pnor period adjustments	8			
9	Other changes in net assets or fund balances (explain on Schedule O)	9			
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line				
	32, column (B))	10		73,8	<u>898</u>
Pa	rt XII Financial Statements and Reporting				_
	Check if Schedule O contains a response or note to any line in this Part XII				Щ
				Yes	No
1	Accounting method used to prepare the Form 990. X Cash Accrual Other		1 1		
	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?		2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or				1
	reviewed on a separate basis, consolidated basis, or both:		1		ĺ
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b		X
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a				1
	separate basis, consolidated basis, or both:				1
	Separate basis Consolidated basis Both consolidated and separate basis				l
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of		1 1		ĺ
	the audit, review, or compilation of its financial statements and selection of an independent accountant?		2c		
	If the organization changed either its oversight process or selection process during the tax year, explain on		1 1		ł
	Schedule O.		1		l
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the				l
	Single Audit Act and OMB Circular A-133?		3a		<u> </u>
Ь	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the				
	required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b		
			Form	990	(2019

## 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

2019

Open to Public Inspection

Name	of t	he organization	For The Kid	s Ora				Employer iden 81-293	ntification number				
P	art	I Reas		y Status (All organization	ns mus	t comp	lete this part.)						
				use it is: (For lines 1 through									
1		1	•	ssociation of churches describ		•	="	$\bigcirc$					
2	Н			1)(A)(ii). (Attach Schedule E (I				$\mathcal{M}$					
3	Н			rvice organization described in			, ,	/-					
4	Н	•	·	ted in conjunction with a hosp				A)(iii). Enter	the hospital's name.				
-		city, and sta		,			· // //						
5				t of a college or university own	ned or op	erated by	a governmental	unit describ	ed in				
			) (b)(1)(A)(iv). (Complete Pa		•	•							
6	П			governmental unit described	ın <b>sectio</b>	n 170(b)	(1)(A)(v).						
7			tion that normally receives section 170(b)(1)(A)(vi).	a substantial part of its support (Complete Part II.)	rt from a	govemm	ental unit or from	the general	public				
8	A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.)												
9													
		university:							· 				
10	X	An organizat	tion that normally receives:	(1) more than 33 1/3% of its	support fr	om conti	ibutions, member	ship fees, a	nd gross				
		support from	gross investment income	empt functions—subject to cert and unrelated business taxable	e income	(less se	ction 511 tax) fro						
	$\overline{}$		•	30, 1975. See section 509(a		•	•						
11	Н	_	-	d exclusively to test for public	-								
12	Ш	_	_	d exclusively for the benefit of, nizations described in <b>section</b>	-			-					
	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												
			• • • • • • • • • • • • • • • • • • • •	ower to regularly appoint or ele complete Part IV, Sections		onty of th	e directors or trus	stees of the					
	b			supervised or controlled in cor					_				
				orting organization vested in the		persons	that control or ma	inage the su	pported				
	_	$\overline{}$		te Part IV, Sections A and C					And could				
	C			supporting organization open nstructions). You must compl					ilea with,				
	d		•	ed. A supporting organization					nızation(s)				
				he organization generally mus	-		•						
		requirem	ent (see instructions). You	must complete Part IV, Sec	tions A a	ınd D, ar	nd Part V.						
	e			eceived a written determination				pe II, Type I	II				
	£		illy integrated, or Type III r imber of supported organization	non-functionally integrated sup	porting o	rganizatio	n.						
	f g			the supported organization(s)									
		ne of supported	(ii) EIN	(iii) Type of organization	1.	organization	(v) Amount of	monetary	(vi) Amount of				
		ganization	(.,, =	(described on lines 1–10		ur governing		•	other support (see				
				above (see instructions))		ment?	instruction	ns)	instructions)				
					Yes	No							
(A)					1								
<b>(D)</b>					<del> </del>	-			· · · · · · · · · · · · · · · · · · ·				
(B)													
(C)	•												
(D)					<u> </u>								
(E)					<u> </u>			<del></del>					
Tota					-								

Sche	dule A (Fo	m 990 or 990-EZ) 2019 <b>Fox</b>	The Kid	s Org		81	2933767	Page :
	art II	Support Schedule for ( (Complete only if you che Part III. If the organizatio	Organizations ecked the box	Described in on line 5, 7, c	or 8 of Part I o	70(b)(1)(A)(iv) or if the organia	and 170(b)(1)(	A)(vi)
Sec	tion A	Public Support	i ialis to qual	ny under the t	esis listeu bei	ow, please co	implete Part III.)	
		(or fiscal year beginning in)	(a) 2015	<b>(b)</b> 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1	member	ants, contributions, and ship fees received. (Do not any "unusual grants.")						
2	organiz	enues levied for the ation's benefit and either paid pended on its behalf						
3	fumished	ue of services or facilities of by a governmental unit to the tion without charge						
4	Total. A	dd lines 1 through 3				1	<u> </u>	
5	each per governm supporter line 1 that	tion of total contributions by rson (other than a tental unit or publicly of organization) included on at exceeds 2% of the amount on line 11, column (f)					·	
6_		upport. Subtract line 5 from line 4				<u> </u>		
-		Total Support	( ) 0045	- " N 2010 /	4 ) 5547	4 0 0040	T () 2010 T	
	•	(or fiscal year beginning in)	(a) 2015	<b>(b)</b> 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
7 8	Gross in payment	s from line 4 come from interest, dividends, is received on securities loans, yalties, and income from cources						
9	activities	me from unrelated business , whether or not the business andy carned on	`/					
10	loss fron	come. Do not include gain or in the sale of capital assets in Part VI.)						
11		upport. Add lines 7 through 10						
12		eceipts from related activities, etc					12	
13	First five	e years. If the Form 990 is for the	e organization's	first, second, third	, fourth, or fifth ta	x year as a section	on 501(c)(3)	
		tion, check this box and stop he			<del> </del>	<del></del>	<u> </u>	<u></u>
		Computation of Public's					1	
14		upport percentage for 2019 (line			olumn (t))			
15 46-		upport percentage from 2018 Sci support test—2019. If the orga					15	%
16a		stop here. The organization qu			nution		•	▶ [
ь		support test—20,18. If the orga	-	•				
_		and stop here. The organization						▶ [
17a		ts-and-circumstances test—2				3, 16a, or 16b, a	nd line 14 is	
	10% or (	more, and if the organization me	ets the "facts-and	d-circumstances" t	est, check this bo	ox and stop here.	Explain in	
	Part VI I	how the organization meets the	facts-and-circum	stances" test. The	organization qua	ilifies as a publich	y supported	-
	organiza	/						▶ [
þ		ts-and-circumstances test—2						
		% or more, and if the organization				•		
	•	n Part VI how the organization i			_	•	-	<b>⊾</b> Γ
18		d organization foundation. If the organization of	lid not check a bo	•	, 16b, 17a, or 17b			▼ L
		onis					Sabadula & /Fara an	0.000 571 000
	/					5	ichedule A (Form 99	v or 580-E∠) 201

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.)

Soc	tion A. Public Support	o quality under	the tests listed	below, pleas	e complete Pa	art II.)	<del></del>
$\overline{}$	ndar year (or fiscal year beginning in)	(a) 2015	<b>(b)</b> 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1	Grifts, grants, contributions, and membership fees	(a) 2015	(b) 2010	(6) 2017	(u) 2016	(e) 2019	(1) 10(a)
'	received. (Do not include any "unusual grants.")	i	66,860	156,077	225,670	20,000	468,607
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				51,781		51,781
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		66,860	156,077	277,451	20,000	520,388
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons			24,600	73,000	10,000	107,600
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						
С	Add lines 7a and 7b			24,600	73,000	10,000	107,600
8	Public support. (Subtract line 7c from						
	line 6.)				<u> </u>		412,788
	tion B. Total Support				т	<del></del>	
	ndar year (or fiscal year beginning in)	(a) 2015	<b>(b)</b> 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
9	Amounts from line 6	ļ	66,860	156,077	277,451	20,000	520,388
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources			3	9	6	16
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c	Add lines 10a and 10b			3	9	6	18
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.)		66,860	156,080	277,460	20,006	520,406
14	First five years. If the Form 990 is for the	he organization's f					
	organization, check this box and stop he	•			·		_ ▶ 🏻
Sec	tion C. Computation of Public	Support Perce	entage				
15	Public support percentage for 2019 (line	8, column (f), divid	ded by line 13, ∞l	umn (f))		15	%
16	Public support percentage from 2018 Sc				<u> </u>	16	%
	tion D. Computation of Investm				····		
17	Investment income percentage for 2019	•		13, column (f))			
18 100	Investment income percentage from 201					1/29/ and line	%
19a	33 1/3% support tests—2019. If the org 17 is not more than 33 1/3%, check this	_					▶ [
b	33 1/3% support tests—2018. If the org	•	-			-	
	line 18 is not more than 33 1/3%, check	-					
20	Private foundation. If the organization of	•	<del>-</del>	-		-	

Page 4

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

- Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No." describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.
- 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)
- Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," 5a 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 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 (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 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).
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- 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.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 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.)

			_
		Yes	No
	1		ني :
	2		
	3a	- ,	
	 3b		
	3c	- <b>-</b>	<b>-</b>
:	4a		
	4b	4114.14	
,		,	**************************************
	4c		
į		, /	1
	5a	* users	
	5b 5c	- • -	
	,	vae.	, , , , , , , , , , , , , , , , , , ,
	6		A
	7		
	8		- 22
	9a	· *	وم
	, 9b	-	
	9c		
	10a	+-/	, 1
	10b	or 990-	(j
Of	ווו ששט	01 2304	EZ) 201!

	<u>.,,</u>	1-2933767		Page
Pa	t IV. Supporting Organizations (continued)		1	Ι
44	The the according and a six or anti-bate from the fall with a second		Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?	1	1	ļ
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)	140		-
_	below, the governing body of a supported organization?	11a	<del> </del>	<del> </del>
	A family member of a person described in (a) above?  A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Pales.	11b	<del> </del>	<del>                                     </del>
	ion B. Type I Supporting Organizations	vi. jite	<u> </u>	L
			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	<b>;</b>	ļ	
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, o	r	1	1
	controlled the organization's activities. If the organization had more than one supported organization,		]	ł
	describe how the powers to appoint and/or remove directors or trustees were allocated among the support	ed	1	
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1_1_		<u> </u>
2	Did the organization operate for the benefit of any supported organization other than the supported			ļ
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Pa	rt		İ
	VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
<u> </u>	supervised, or controlled the supporting organization.		l	<u>l.                                    </u>
Sect	ion C. Type II Supporting Organizations		<del></del>	1
	NATION OF THE STATE OF THE STAT		Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the director		ļ	
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control	i i	1	1
	or management of the supporting organization was vested in the same persons that controlled or managed	' -	-	-
Sect	the supported organization(s). ion D. All Type III Supporting Organizations		<u> </u>	I
Ject	ion b. Air Type in 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		I es	
•	organization's tax year, (i) a written notice describing the type and amount of support provided during the p	mor tay		
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of			
	organization's governing documents in effect on the date of notification, to the extent not previously provide	· · · · · · · · · · · · · · · · · ·		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supporte		<del>                                     </del>	<del>                                     </del>
-	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part V		ŀ	
	the organization maintained a close and continuous working relationship with the supported organization(s		-	ŀ
3	By reason of the relationship described in (2), did the organization's supported organizations have a	` <u> </u>		<b></b>
•	significant voice in the organization's investment policies and in directing the use of the organization's	,		ŀ
	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.	3	· -	
Sect	ion 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	r (see Instructions).	•	-
а	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
C	The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity.	nt entity (see instruct	ions).	
2	Activities Test. Answer (a) and (b) below		Yes	No
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	3,		
	how the organization was responsive to those supported organizations, and how the organization determin		1	
	that these activities constituted substantially all of its activities.	2a	·	-
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or mo			
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI th			
	reasons for the organization's position that its supported organization(s) would have engaged in these		l.	
	activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer (a) and (b) below.			
а	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	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of	each .		١
	of its supported amanizations? If "Yes " describe in Part VI the role played by the amanization in this regard	rd 3b	1	l

chedule A (Form 990 or 990-EZ) 2019 For The Kids Org		<u>81-2933</u>	3 <b>767</b> Page
Part V   Type III Non-Functionally Integrated 509(a)(3) Supporting			
1 Check here if the organization satisfied the Integral Part Test as a qualifying trus			
instructions. All other Type III non-functionally integrated supporting organization	ons must co	mplete Sections A thro	
Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	1		
2 Recovenes of pnor-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		<u> </u>
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):			Ì
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			Ì
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	···-	<u></u>
6 Multiply line 5 by .035.	6		
7 Recovenes of pnor-year distributions	7		<u> </u>
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 Check here if the current year is the organization's first as a non-functionally into	egrated Type	e III supporting organiza	ation (see
instructions).			

	lle A (Form 990 or 990-EZ) 2019 For The Kids Org			81-2933	
Par	t V   Type III Non-Functionally Integrated 509(a)(3	) Suppo	rting Organ	izations (continued	)
Sect		Current Year			
_1_	Amounts paid to supported organizations to accomplish exempt pur	rposes			
2	Amounts paid to perform activity that directly furthers exempt purpo	ses of sup	ported		İ
3	, <u>, , -</u> .				
4	Amounts paid to acquire exempt-use assets				
5	Qualified set-aside amounts (pnor IRS approval required)				
6	Other distributions (describe in Part VI). See instructions.				_
7	Total annual distributions. Add lines 1 through 6.			,,	ļ
8	Distributions to attentive supported organizations to which the organizations	nization is	responsive		:
	(provide details in Part VI) See instructions.				
9	Distributable amount for 2019 from Section C, line 6				
10	Line 8 amount divided by line 9 amount	<b>,</b>			
	Section E - Distribution Allocations (see Instructions)	Excess	(i) Distributions	(ii) Underdistributions Pre-2019	(iii) Distributable Amount for 2019
1	Distributable amount for 2019 from Section C, line 6	<u> </u>			
2	Underdistributions, if any, for years prior to 2019 (reasonable cause required-explain in Part VI). See instructions.		ı		
3	Excess distributions carryover, if any, to 2019			- 4 - 4 k	
	From 2014	<del></del>			· · · · · · · · · · · · · · · · · · ·
	From 2015	•			;
	F 2016	<del> </del>	)4		
•	From 2017		1	-	<u> </u>
	From 2018	<del> </del>			i i
	Total of lines 3a through e				
	Applied to underdistributions of prior years	<b>†</b>			i
	Applied to 2019 distributable amount	<del>                                     </del>			
	Carryover from 2014 not applied (see instructions)	<u> </u>		<del></del>	1
i	Remainder, Subtract lines 3g, 3h, and 3i from 3f.	<u> </u>			,
4	Distributions for 2019 from	<u> </u>	•	** **	
-	Section D, line 7:		+		ĺ
а	Applied to underdistributions of prior years	i	,		}
	Applied to 2019 distributable amount		1		
	Remainder. Subtract lines 4a and 4b from 4.		· · · · · · · · · · · · · · · · · · ·		:
5	Remaining underdistributions for years prior to 2019, if				í
	any. Subtract lines 3g and 4a from line 2. For result	-	Ì		 
	greater than zero, explain in Part VI. See instructions.				
6	Remaining underdistributions for 2019 Subtract lines 3h				
	and 4b from line 1. For result greater than zero, explain in	l			ĺ
	Part VI. See instructions.	Ì			
7	Excess distributions carryover to 2020. Add lines 3j				• 1
	and 4c.				F
8	Breakdown of line 7:				1
a	Excess from 2015				•
ь	Excess from 2016				
С	Excess from 2017				
d	Excess from 2018				3
е	Excess from 2019				

DAA

Schedule A (Fo	rm 990 or 990-EZ) 20	19 <b>For T</b>	he Kids	Org		8	1-293376	7	Page 8
Part VI	Supplemental III, line 12; Par B, lines 1 and	Information. t IV, Section A 2; Part IV, Sec	Provide the , lines 1, 2, tion C, line	explanation 3b, 3c, 4b, 1; Part IV, S	4c, 5a, 6, 9a, Section D, line	Part II, line 9b, 9c, 11a, es 2 and 3; Part II, line 9	10; Part II, line 11b, and 11c; art IV, Section	17a or 1 Part IV, S E, lines 1	7b; Pa Section Ic, 2a,
	3a, and 3b; Pa	rt V. line 1: Pa	rt V. Section	B. line 1e;	Part V, Secti	on D, lines 5,	, 6, and 8; and	Part V, S	Section
	lines 2, 5, and	6. Also compl	ete this part	for any add	ditional inform	ation. (See if	istructions.)	<del></del>	
•• • •• ••									
•									
				<i>.</i>					
·									
									.,
									••

Schedule A (Form 990 or 990-EZ) 2019

#### 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 Open to Public Inspection

Name of the organization Employer identification number 81-2933767 For The Kids Org Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Part I 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 end of year .......... 1 2 Aggregate value of contributions to (during year) Aggregate value of grants from (during year) Aggregate value at end of year 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? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for chantable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of a historically important land area Preservation of land for public use (for example, recreation or education Preservation of a certified historic structure Protection of natural habitat 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 Yea a Total number of conservation easements 2b c Number of conservation easements on a certified historic structure included in (a) d Number of conservation easements included in (c) acquired after 7/25/06, and not on a histonic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the Number of states where property subject to conservation easement is located Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 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)? 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. Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Part III Complete if the organization answered "Yes" on Form 990, Part IV, line 8. 1a If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenue included on Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items: a Revenue included on Form 990, Part VIII, line 1 .. ..... ... ... .. ... ... .... b Assets included in Form 990, Part X. Schedule D (Form 990) 2019 For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Sched	dule D (Form 990) 2019 For The	Kids Org			81-2933767	Page 2
Par	rt III Organizations Maintainin	ng Collections	of Art, Historica	l Treasure	s, or Other Simila	r Assets (continued
3	Using the organization's acquisition, access collection items (check all that apply):	sion, and other reco	ords, check any of th	e following the	at make significant use	of its
аſ	Public exhibition	d□	Loan or exchange p	maram		
ь	Scholarly research	.H	Other	nogram.		
c	Preservation for future generations	۰	Odici			
	Provide a description of the organization's	collections and exp	lain how they further	the organizat	tion's exempt numose in	Part
	XIII.	Concoloris and exp	nam now they lartice	are organize	aon's exempt purpose in	T CIT
	During the year, did the organization solice	rt or receive donatio	ns of art, historical tr	easures, or of	ther similar	
	assets to be sold to raise funds rather tha					Yes No
	rt IV Escrow and Custodial A					
	Complete if the organization 990, Part X, line 21.	on answered "Yo	es" on Form 990	, Part IV, lii	ne 9, or reported ar	amount on Form
1a	Is the organization an agent, trustee, custo	odian or other intern	nediary for contribution	ons or other a	ssets not	
	included on Form 990, Part X?					Yes No
	If "Yes," explain the arrangement in Part X	(III and complete the				
	, , ,	·	Ü			Amount
c	Beginning balance				1c	
	Additions during the year				1d	
	Distributions during the year				1e	
	Ending balance				1f	
2a	Did the organization include an amount or	Form 990, Part X,	line 21, for escrow of	r custodial ac	count liability?	Yes No
b	If "Yes," explain the arrangement in Part X	(III Check here if the	e explanation has be	en provided o	n Part XIII	
Par	rt V Endowment Funds.				•	
	Complete if the organization	on answered "Ye	es" on Form 990	<u>, Part IV, li</u>	ne 10.	
	<u> </u>	(a) Current year	(b) Pnor year	(c) Two yea	rs back (d) Three years	back (e) Four years back
1a	Beginning of year balance			<u> </u>		
b	Contributions			1		
C	Net investment earnings, gains, and			Ì		
	losses	<del></del>				
d	Grants or scholarships			ļ		
е	Other expenditures for facilities and			ł		1
	programs					
f.	Administrative expenses			<b>.</b>		
_	End of year balance			<u>.l</u>	L	
	Provide the estimated percentage of the c	•	ance (line 1g, column	(a)) held as:		
	Board designated or quasi-endowment ▶	%				
	Permanent endowment ▶ %					
	Term endowment ▶ %					
	The percentages on lines 2a, 2b, and 2c s					
	Are there endowment funds not in the pos	ssession of the organ	nization that are held	and administ	ered for the	[ 1
	organization by:					Yes No
	(i) Unrelated organizations					3a(i)
	(ii) Related organizations					3a(ii)
	If "Yes" on line 3a(ii), are the related organ			R?		3b
	Describe in Part XIII the intended uses of		ndowment funds.	<del></del>	····	
Pai	rt VI Land, Buildings, and Eq		C 000	Dort N / 11:-	na 11a - Can Farra (	100 Dad V line 40
	Complete if the organization	1				
	Description of property	(a) Cost or other	1 ' '	other basis her)	(c) Accumulated	(d) Book value
	Load	(investment)	(00	1001)	depreciation	
	Land					
	Buildings				<del></del>	
	Leasehold improvements	-		2 5/1	440	3,059
	Equipment	· · · · · · · · · · · · · · · · · · ·		3,501	442	3,039
	Other  Add lines 1a through 1e. (Column (d) must	et oqual Form 000	Port V column (P)	ino 10c \	<u> </u>	3,059
ı otal.	Add lines ta dirough te. (Column (d) mu	si equal FOIM 990, I	ran A, Column (B), II	ne 100.)	<u> </u>	3,039

DAA

Schedule D	(Form 990) 2019	For	The	Kids	Orq	
Dod \//I	Inventment		har Ca	ourities.		

	om 990) 2019 FOL THE KIGS OLG		01-2933707	rage J
Part VII	Investments – Other Securities.  Complete if the organization answered "Yes" or	n Form 000 Port il	/ line 11h See Form 9	00 Part Y line 12
	(a) Description of security or category	(b) Book value	(c) Method o	
	(including name of security)	(b) book value	Cost or end-of-ye	
(1) Financial				
	eld equity interests			<del></del>
(3) Other		<del></del>	<del>                                     </del>	
(A) .		-		
(B)				
(C)				
(D)				
(E)				
(F)				
(G)				<u></u> .
.(H).				
	n (b) must equal Form 990, Part X, col. (B) line 12.)		<u> </u>	
Part VIII	Investments - Program Related.			
	Complete if the organization answered "Yes" or			
	(a) Description of investment	(b) Book value	(c) Method o	
	<u> </u>		Cost or end-of-ye	ar market value
(1)				
(2)				
(3)			<del>                                     </del>	
(4)		·	<del> </del>	<del></del>
(5)				
(6)				
(7)				
(8)				
	n (b) must equal Form 990, Part X, col. (B) line 13.)			
Part IX	Other Assets.		<u> </u>	
· ait bt	Complete if the organization answered "Yes" or	n Form 990. Part IV	/. line 11d. See Form 9	90. Part X. line 15.
	(a) Description	, , , , , , , , , , , , , , , , , , , ,	,	(b) Book value
(1)		-	'	
(2)	<del></del>			
(3)				
(4)				
(5)				
(6)				<u> </u>
(7)				
(8)				
(9)			<del> </del>	
	n (b) must equal Form 990, Part X, col. (B) line 15.)	· · · · · · · · · · · · · · · · · · ·	<u> </u>	
Part X	Other Liabilities.	- C 000 D-4 N	/ Una 44a as 446 Caa	C 000 D-4 V
	Complete if the organization answered "Yes" o	n Form 990, Part I	v, line The or Th. See	ronn 990, Pan A,
	line 25.	·····		(b) Book value
1. (1) Forderal	(a) Description of liability			(U) BOOK VAIGE
	income taxes	<del></del>		
(2)				
(3)				
<u>(4)</u> <u>(5)</u>				
(6)				
(7)				· · · · · · · · · · · · · · · · · · ·
(8)				
(9)		······		
	in (b) must equal Form 990, Part X, col. (B) line 25.)	<del></del>	<b>.</b>	
	uncertain tax positions. In Part XIII, provide the text of the t	ootnote to the organiza	tion's financial statements that	t reports the
•	liability for uncertain tax positions under FASB ASC 740 Ct			

Schedule D (Form 990) 2019 For The Kids Org	81-293376	7 Page 4
Part XI Reconciliation of Revenue per Audited Financial Stateme		
Complete if the organization answered "Yes" on Form 990, Page 1	-	
Total revenue, gains, and other support per audited financial statements		1
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
	2a l	]
	2b	j
		1
	2c	1
	2d	
e Add lines 2a through 2d		2e
3 Subtract line 2e from line 1		3
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1	· f	
a Investment expenses not included on Form 990, Part VIII, line 7b 4	la	
b Other (Describe in Part XIII.)	lb	
		4c
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	<u></u>	5
Part XII Reconciliation of Expenses per Audited Financial Statement	ents With Expenses p	er Return.
Complete if the organization answered "Yes" on Form 990, P		
44.15		1
2 Amounts included on line 1 but not on Form 990, Part IX, line 25:		
Departed and form and use of facilities	<sub>2a</sub>	1
t Division to the term of the	2b	
2 Other lands	2c	ì
	2d	
e Add lines 2a through 2d		2e
3 Subtract line 2e from line 1	٠	3
4 Amounts included on Form 990, Part IX, line 25, but not on line 1:		
	la	
b Other (Describe in Part XIII.)	lb	
	· · · · · · ·	4c
5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)		5
Part XIII Supplemental Information.	<u></u>	
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) 2019 Fo:	r The Kids C	rq		81-2933767	Page 5
Part XIII	Supplemental	nformation (continu	ued)			<del></del>
•						
• • • • • • • • • • • • • • • • • • • •						
•						
					• • • • • • • • • • • • • • • • • • • •	• • • • • • • • • • • • • • • • • • • •
						••• • • • • • • • • • • • • • • • • • •
• • • • • • • • • • • • • • • • • • • •						• • • • • • • • • • • • • • • • • • • •
						• • • • • • • • • • • • • • • • • • • •
				• • • • • • • • • • • • • • • • • • • •		
• • • • • • • • • • • • • • • • • • • •					***************************************	•••••••••••••••••••••••••••••••••••••••

### SCHEDULE M (Form 990)

Department of the Treasury

**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

2019

Open To Public Inspection

Internal Revenue Service Employer identification number Name of the organization 81-2933767 For The Kids Org Types of Property (c) (d) (a) (b) Noncash contribution Check if Number of contributions or Method of determining amounts reported on applicable items contributed noncash contribution amounts Form 990, Part VIII, line 1g Art — Works of art . . . Art — Historical treasures 2 3 Art — Fractional interests Books and publications 5 Clothing and household goods Cars and other vehicles . . . . 6 7 Boats and planes Intellectual property 9 Securities --- Publicly traded 10 Securities — Closely held stock Securities - Partnership, LLC, 11 or trust interests Securities — Miscellaneous . . . 12 Qualified conservation contribution — Historic structures Qualified conservation contribution --- Other 15 Real estate — Residential 16 Real estate — Commercial 17 Real estate - Other Collectibles 18 25,709 Fair market value of foo 18 Food inventory . . X 19 Drugs and medical supplies 20 21 Taxidermy Historical artifacts ... 22 23 Scientific specimens 24 Archeological artifacts Estimated Fair Market Other ▶ (Holiday items 25 26 Other ►( 27 Other ►( 28 Other ►( 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 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. Does the organization have a gift acceptance policy that requires the review of any nonstandard X 31 . . . . . . . . 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash X 32a .... b If "Yes," describe in Part II. 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

Schedule M (Fo	Suppl the on	emen ganiza	tal Info	rmation. reporting	. Provid in Part	le the info I, colum	in (b), th	e numbe	d by Par er of cor	1-2933 rt I, lines ntributions nformation	30b, 32b , the nur	, and 33 nber of it	Page , and whethe ems received	r
Schedu						<u> </u>								_
											•••••			•
There	were	25	cont	ributi	ons	of go	od qu	ring	the 3	ear.				•
•														. •
						-								
														•
••														
										· · · · · ·				
														. <b>.</b>
			-											
	· · · · · · · · · · · · · · · · · · ·													
	· · · · · · · · · · · · · · · · · · ·													ı
														,

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.

2019

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

▶ Attach to Form 990 or 990-EZ. ▶ Go to www irs.gov/Form990 for the latest information. Open to Public Inspection

For The Kids Org	81-2933767
Form 990, Part VI, Line 11b - Organization's Pro	ocess to Review Form 990
The board reviews the Form 990 prior to filing	to address any questions (
concerns.	
Form 990, Part VI, Line 12c - Enforcement of Co	nflicts Policy
The board evaluates conflicts of interest as the	ey arise or when they are
disclosed and any affected board member is recu	sed from the decision-mak:
process that is involved with the conflict of i	nterest.
Form 990, Part VI, Line 15a - Compensation Proce	ess for Top Official
The board evaluates the current market condition	ns, salaries of similar
organizatons, and the financial situation of the	e Organization to determin
compensation for its top executive.	
Form 990, Part VI, Line 19 - Governing Document	s Disclosure Explanation
Governing documents are available upon request	at the Organization's
office.	