Form **990**

Department of the Treasury

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

Do not enter social security numbers on this form as it may be made public.
 Go to www.irs.gov/Form990 for instructions and the latest information.

Open to Public Inspection

OMB No. 1545-0047

inte	mai Revenue	e Service	- 6		.irs.gov/roring	an ior mistru	ictions and	the fatest in	Iormatio				
Α	For the 2	2018 calend	dar year, or tax y	ear begin	ning		, 2018	8, and endin	g	-		,	
В	Check if ap	plicable:	С							D Employ	/er ident	ification nun	nber
	Addres	ss change	KIDS COLLE							33-	0933	622	
	Name	change	570 RANCHE							E Telepho	one num	ber	
	Initial	return	SAN MARCOS	, CA 9	2069					760	-798	-4064	
	Final ret	turn/terminated											
	Ameno	ded return								G Gross r	eceipts	\$	324,538.
	Applic	ation pending	F Name and addres	s of principa	I officer:				.,	a group retur			Yes X No
			SAME AS C	ABOVE					H(b) Are all	subordinates attach a list	include	d? structions)	Yes No
I	Tax-exer	mpt status:	X 501(c)(3)	501(c) ()◀ (in	sert no.)	4947(a)(1) o	r 527			. (000	oractioney	
J	Websi	te:► TH	EKIDSCOLLEO	GE.ORG					H(c) Group	exemption n	umber 🕨	•	
κ	Form of	organization:	X Corporation	Trust	Association	Other ►	L	Year of formati	on: 200	2 M s	State of I	egal domicile	e: CA
Pa	art I	Summar	y										
	1 Br	iefly descril	be the organization	on's miss	ion or most s	significant a	activities:PR	OVIDE Q	UALITY	EDUCA	TION	AL ENR	ICHMENT
ė	Pl	<u>ROGRAMS</u>	FOR ELEMEN	ITARY I	AND MIDD	LE <u>SCHO</u>	<u>OL CHILI</u>	<u>DREN FOC</u>	<u>USING</u>	<u>ON VI</u>	<u>SUAL</u>	<u>ART,</u>	
anc	<u>P</u>]	ERFORMI	<u>NG ART, SC</u>	IENCE I	AND ENGI	<u>NEERING</u>	<u>, LIFE S</u>	SKILLS A	ND FI	NANCIA	L MAI	NAGEME	<u>NT</u>
ern		- -		<u>_</u>			- <u></u> <u></u>						
<u>So</u>	2 Ch 3 Nu	neck this bo	ix ► if the or ting members of		n discontinue						net as	sets.	1
~ જ	4 Nu		dependent voting								4		4
ies	5 To		of individuals en		-		•				5		2
Activities & Governance	6 To		of volunteers (es								6		25
Acl			ed business rever								7a		0.
	b Ne	et unrelated	business taxable	e income	from Form 9	90-T, line 3	8		<u></u>		7b		0.
										Prior Year		-	ent Year
e			and grants (Part							93,8			114,936.
Revenue		-	ice revenue (Par		•••					204,8			209,595.
lev.			come (Part VIII,		•						6.		7.
			e (Part VIII, colur e – add lines 8 th							200 (C A		224 520
			milar amounts pa	-						298,6	004.		324,538.
			to or for membe										
			er compensation,							91,558.			05 514
es									-	91,3	550.		95,514.
Expenses	16a Pr		fundraising fees	-					·				
_ 2	b 10		ing expenses (Pa					22,556.					
	17 01	•	es (Part IX, colu			,				202,9			236,825.
			es. Add lines 13-	-	•					294,5			332,339.
		evenue less	expenses. Subtr	act line 1	8 from line 1	2				•	.56.		-7,801.
s or	00 T.	4-1								ng of Currer		End	of Year
sset Jala	20 То 21 То		(Part X, line 16) s (Part X, line 26							26,9	-		19,129.
Net Assets or Fund Balances				-							0.		0.
			fund balances.	Subtract II	ne 21 from li	ine 20				26,9	930.		19,129.
		Signatur											
Und com	er penalties plete. Decla	of perjury, I de ration of prepa	clare that I have exam rer (other than officer)	ined this retu is based on	urn, including acc all information of	ompanying sch which prepare	edules and state r has any knowl	ements, and to edge.	the best of n	ny knowledge	and beli	ef, it is true,	correct, and
Ci/	an	Signatu	re of officer						Da	ate			
Sign Here			LITTLE						FYFC	UTIVE	חדפדו	°T∩P	
			print name and title						цупс				
		Print/Type p	reparer's name		Preparer's sign	ature		Date		Check	X if	PTIN	
Pa	id	MARTO	G. ORTEGA		MARIO G	ORTEG	Δ.			self-employ	_	P00232	2069
	eparer	Firm's name		& ASS						sen sinploy		1 0 0 2 0 2	
Üs	e Only	Firm's addre					TE 300			Firm's EIN	▶ 20	-03114	74
	,		s address SAN DIEGO, CA 92130							Firm's EIN ► 20-0311474 Phone no. (858) 623-2786			
Ma	v the IRS	discuss th	is return with the			e? (see ins	tructions)				(000	. X Yes	
_	-		eduction Act Not						A0101L 08/	/20/18		-	rm 990 (2018)
										-			

Form 990 (2018) KIDS COLLEGE		33-0933622	Page 2
	Service Accomplishments		
Check if Schedule O contain Briefly describe the organization's i	is a response or note to any line in this Part III	<u></u>	· · · · · · · · · · · · · · · · · · ·
	CIONAL ENRICHMENT PROGRAMS FOR ELEMENTARY	AND MIDDLE SCHO	OT.
	/ISUAL ART, PERFORMING ART, SCIENCE AND EN		
AND FINANCIAL MANAGEME			
2 Did the organization undertake any signature form 990 or 990-EZ?	gnificant program services during the year which were not listed on the	prior Yes	X No
If "Yes," describe these new services			ΛΙΟ
	ing, or make significant changes in how it conducts, any program	services? Yes	X No
If "Yes," describe these changes on S			
4 Describe the organization's prograr Section 501(c)(3) and 501(c)(4) organization and revenue, if any, for each program	n service accomplishments for each of its three largest program se ganizations are required to report the amount of grants and allocat am service reported.	ervices, as measured by ions to others, the total e	expenses. expenses,
4a (Code:) (Expenses \$	290,013. including grants of \$)) (Revenue \$)
	ATIONAL ENRICHMENT PROGRAMS FOR ELEMENTARY		
	/ISUAL ART, PERFORMING ART, SCIENCE AND EN		
AND FINANCIAL MANAGEME	<u> </u>		
4b (Code:) (Expenses \$	including grants of \$) (Revenue \$	
)
4c (Code:) (Expenses \$	including grants of \$)	(Revenue \$)
	······································		
4d Other program services (Describe i	n Schedule O.)		
(Expenses \$	including grants of \$) (Revenue	\$)
4 e Total program service expenses ► BAA	• 290,013.	Forr	n 990 (2018)
	TEEA0102L 08/03/18	1 011	

 Form 990 (2018)
 KIDS
 COLLEGE

 Part IV
 Checklist of Required Schedules

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

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Form 990 (2018)

Checklist of Required Schedules (continued) Part IV Yes No Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If 'Yes,' complete Schedule I, Parts I and III..... 22 22 Х Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current 23 and former officers, directors, trustees, key employees, and highest compensated employees? If 'Yes,' complete Х Schedule J..... 23 24 a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and Х complete Śchedule K. If 'No, 'go to line 25a..... 24a **b** Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?..... 24b c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? 24c **d** Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?..... 24d 25 a 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 Х **b** Is the organization aware that it engaged in an excess benefit transaction with a disgualified 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 Х Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? *If 'Yes,' complete Schedule L, Part II.* 26 Х 26 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member 27 of any of these persons? If 'Yes,' complete Schedule L, Part III. Х 27 28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions): Х a A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV..... 28a b A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV. 28h Х c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If 'Yes,' complete Schedule L, Part IV..... Х 28c Х Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M..... 29 29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? *If 'Yes,' complete Schedule M*..... 30 Х 30 Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I..... 31 Х 31 32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Х Schedule N, Part II. 32 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? *If 'Yes,' complete Schedule R, Part I*..... 33 Х 33 Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Part II, III, or IV, 34 and Part V, line 1..... Х 34 Х **35 a** Did the organization have a controlled entity within the meaning of section 512(b)(13)?..... 35a **b** If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? *If 'Yes,' complete Schedule R, Part V, line 2*..... 35b Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If 'Yes,' complete Schedule R, Part V, line 2.... 36 Х 36 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? *If 'Yes,' complete Schedule R, Part VI*..... 37 Х 37 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? 38 Х Note. All Form 990 filers are required to complete Schedule O.... 38 Part V Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V..... Yes No 1 a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable..... 1 a 4 **b** Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1 b 0 c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming Х (gambling) winnings to prize winners? 1 c TEEA0104L 08/03/18 BAA Form 990 (2018)

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Par	Part V Statements Regarding Other IRS	Filings and Tax Compliance (continued)		
			Yes	No
2.	2. Enter the number of employees reported on Form V	V.2. Transmittel of Wage and Tay State		
Zā	2a Enter the number of employees reported on Form V ments, filed for the calendar year ending with or with	hin the year covered by this return 2a 2		
Ł		zation file all required federal employment tax returns?	Х	
	Note. If the sum of lines 1a and 2a is greater than 2			
3a	-	income of \$1,000 or more during the year?		Х
		provide an explanation in Schedule 0		
4 a	financial account in a foreign country (such as a ba	on have an interest in, or a signature or other authority over, a nk account, securities account, or other financial account)?		Х
ŀ	b If 'Yes,' enter the name of the foreign country: ►			
		n 114, Report of Foreign Bank and Financial Accounts (FBAR).		
5 -		elter transaction at any time during the tax year?		Х
		was or is a party to a prohibited tax shelter transaction?		X
				Л
	· · · · · · · · · · · · · · · · · · ·	rm 8886-T?		
6 a	6 a Does the organization have annual gross receipts th	hat are normally greater than \$100,000, and did the organization e as charitable contributions?		37
				Х
Ł	b If 'Yes,' did the organization include with every solicitati	on an express statement that such contributions or gifts were		
	not tax deductible?			
7	7 Organizations that may receive deductible contribution	utions under section 170(c).		
a		f \$75 made partly as a contribution and partly for goods and		L
	services provided to the payor?			Х
	3	value of the goods or services provided? 7b		
c	c Did the organization sell, exchange, or otherwise dispos	e of tangible personal property for which it was required to file		v
				Х
	d If 'Yes,' indicate the number of Forms 8282 filed du			
		ndirectly, to pay premiums on a personal benefit contract?		X
		s, directly or indirectly, on a personal benefit contract?		Х
ç	g If the organization received a contribution of qualified in	tellectual property, did the organization file Form 8899		
ł	h If the organization received a contribution of cars, b Form 1098-C?	oats, airplanes, or other vehicles, did the organization file a		
8		funds. Did a donor advised fund maintained by the sponsoring		
•		time during the year?		
٩	 9 Sponsoring organizations maintaining donor advis 			
		distributions under section 4966?		
		to a donor, donor advisor, or related person?		
	10 Section 501(c)(7) organizations. Enter:			
	a Initiation fees and capital contributions included on			
	b Gross receipts, included on Form 990, Part VIII, line	e 12, for public use of club facilities		
	11 Section 501(c)(12) organizations. Enter:			
	a Gross income from members or shareholders			
Ł	b Gross income from other sources (Do not net amou	nts due or paid to other sources		
10	against amounts due or received from them.)			
		the organization filing Form 990 in lieu of Form 1041? 12a		
	b If 'Yes,' enter the amount of tax-exempt interest rec			
	13 Section 501(c)(29) qualified nonprofit health insura			
a		plans in more than one state?		
	Note. See the instructions for additional information	the organization must report on Schedule O.		
Ł	b Enter the amount of reserves the organization is red	quired to maintain by the states in		
	which the organization is licensed to issue qualified			
	c Enter the amount of reserves on hand			v
		pr tanning services during the tax year?		Х
Ł	b If 'Yes,' has it filed a Form 720 to report these payn	nents? If 'No,' provide an explanation in Schedule O		
15	15 Is the organization subject to the section 4960 tax of	on payment(s) of more than \$1,000,000 in remuneration or		
		15		Х
	If 'Yes,' see instructions and file Form 4720, Schedule N	N		
16	16 Is the organization an educational institution subjec	t to the section 4968 excise tax on net investment income? 16		Х
	If 'Yes,' complete Form 4720, Schedule O.			
=				

Sec	tion A. Governing Body and Management								
					Yes	No			
1a	Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members	1 a	4						
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.								
ł	Enter the number of voting members included in line 1a, above, who are independent	1 b	4						
2	Did any officer, director, trustee, or key employee have a family relationship or a business relations officer, director, trustee, or key employee?			2		Х			
3	Did the organization delegate control over management duties customarily performed by or under the of officers, directors, or trustees, or key employees to a management company or other per	ne direct su	pervision	3		Х			
4	Did the organization make any significant changes to its governing documents			5					
	since the prior Form 990 was filed?			4		Х			
5	Did the organization become aware during the year of a significant diversion of the organiza	tion's asse	ets?	5		Х			
6	Did the organization have members or stockholders?			6		Х			
7 a	Did the organization have members, stockholders, or other persons who had the power to elect or a members of the governing body?			7 a		Х			
b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?									
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:									
	The governing body?			8 a	Х	_			
	Each committee with authority to act on behalf of the governing body?			8 b		Х			
9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? <i>If 'Yes,' provide the names and addresses in Schedule O</i>									
Sec	tion B. Policies (This Section B requests information about policies not rec	uired by	the Internal Re	eveni					
					Yes	No			
	Did the organization have local chapters, branches, or affiliates?			10 a		Х			
	If 'Yes,' did the organization have written policies and procedures governing the activities of such chapters, affiliates, operations are consistent with the organization's exempt purposes?			10 b					
	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the			11 a	Х				
	Describe in Schedule O the process, if any, used by the organization to review this Form 99								
	Did the organization have a written conflict of interest policy? If 'No,' go to line 13			12a		Х			
	Were officers, directors, or trustees, and key employees required to disclose annually interests that to conflicts?			12b					
	Did the organization regularly and consistently monitor and enforce compliance with the policy? If ' Schedule O how this was done			12 c					
	Did the organization have a written whistleblower policy?			13		Х			
	Did the organization have a written document retention and destruction policy?			14		Х			
	Did the process for determining compensation of the following persons include a review and approv persons, comparability data, and contemporaneous substantiation of the deliberation and de	ecision?							
a	The organization's CEO, Executive Director, or top management official			15a		Х			
ł	Other officers or key employees of the organization			15b		Х			
	If 'Yes' to line 15a or 15b, describe the process in Schedule O (see instructions).								
16 a	Did the organization invest in, contribute assets to, or participate in a joint venture or simila taxable entity during the year?			16 a		Х			
ł	If 'Yes,' did the organization follow a written policy or procedure requiring the organization to evalue participation in joint venture arrangements under applicable federal tax law, and take steps organization's exempt status with respect to such arrangements?	to safegua	rd the	16 b					
Sec	tion C. Disclosure					-			
17	List the states with which a copy of this Form 990 is required to be filed CA CA								
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024 A if applicable available for public inspection. Indicate how you made these available. Check all that apply.		·	1(c)(3)s onl	y)			
	X Own website X Another's website Upon request Other	ner <i>(explain</i>	in Schedule O)						
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest p the public during the tax year. SEE SCHEDULE O	olicy, and fina	ancial statements availal	ole to					
20	State the name, address, and telephone number of the person who possesses the organization's be	ooks and re	cords ►						
_	ANN LITTLE 570 RANCHEROS DRIVE, STE 270 SAN MARCOS CA 92	<u>069</u> 760)-798-4064						
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Part VII Compensation of Officers, Directo	ors, Tru	stee	s, K	ey	En	ploye	ees, Highest C	33-09336 ompensated En		
Independent Contractors										
Check if Schedule O contains a response of		_							·····	
Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees										
a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the rganization's tax year.										
 List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid. 										
 List all of the organization's current key employed 	es, if any	/. Se	e inst	ruct	tion	s for de	efinition of 'key en	nployee.'		
 List the organization's five current highest comp who received reportable compensation (Box 5 of Form organization and any related organizations. 										
• List all of the organization's former officers, key of reportable compensation from the organization and any	employee	es, ar	nd hig	ghes	st co	ompens	sated employees v	who received more t	han \$100,000	
 List all of the organization's former directors or truste 		-			anad	rity as a	former director or t	rustee of the		
organization, more than \$10,000 of reportable compen										
List persons in the following order: individual trustees employees; and former such persons.	or directo	rs; in	stitut	iona	al tr	ustees;	officers; key emp	oloyees; highest con	npensated	
Check this box if neither the organization nor any relate	ed organiz	ation	comp	bens	sated	d any ci	urrent officer, direct	or, or trustee.		
			((C)						
(A) Name and Title	(B) Average hours	thar	Position (do not than one box, ur is both an offi director/tru		inless ficer a	s person and a	(D) Reportable compensation from	(E) Reportable compensation from	(F) Estimated amount of other	
	per week (list any hours for related organiza- tions below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Former Highest compensated employee	the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	compensation from the organization and related organizations	
(1) CAROLE BEESON TRUSTEE	$\frac{20}{0}$	Х					18,000.	0.	0.	
(2) GLENDA CUEVAS	0						,			
SECRETARY	0	Х	2	Х			0.	0.	0.	
(3) JOE LONGO	0									
CHAIR/TREAS	0	Х	2	X			0.	0.	0.	
(4) ANN LITTLE	40								_	
EXECUTIVE DIR.	0		2	X			36,000.	0.	0.	
(5) PAM HARRIS	<u>30</u>								0	
DIRECTOR	0			X			35,200.	0.	0.	
		1								

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(8)

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(10)

(11)

(12)

(13)

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Form 990 (2018) KIDS COLLEGE

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Pa	ל VII Section A. Officers, Directors, Tru	istees,	Key	En	ıplo	oye	es,	and	d Highest Com	pensated Emp	loyees	5 (conti	nued)
		(B)			•	C)							
	(A) Name and title	Average hours per	box	, unle	ess pe	erson	e than is bot or/trus	h an tee)	(D) Reportable compensation from	(E) Reportable compensation from	amo	(F) stimated unt of ot	her
		week (list any hours for related organiza - tions below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensat employee	Former	the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	f org an	npensatio rom the janizatio id related anizatior	n t
(15)							ed						
(16)													
(17)													
(18)													
(19)													
(20)													
(21)			•										
(22)			•										
(23)													
(24)													
(25)													
	Sub-total	•••••	•••••					•	89,200.	0.	•		0.
	Total from continuation sheets to Part VII, Section 10 (add lines 1b and 1c).							•	0. 89,200.	0.			0.
2	Total number of individuals (including but not limited							ved			pensatio	n	0.
	from the organization b 0											Yes	No
3	Did the organization list any former officer, direc on line 1a? If 'Yes,' complete Schedule J for suc	tor, or tru <i>h individu</i>	istee, <i>ial</i>	key	/ en	nplo	yee,	or	nighest compensat	ed employee	. 3		X
4	For any individual listed on line 1a, is the sum of the organization and related organizations greater	f reportab er than \$1	le co 50,00	mpe 00?	ensa If '\	ation Y <i>es,</i>	and ' <i>con</i>	oth 1 <i>ple</i>	er compensation te Schedule J for	from			V
5	such individual Did any person listed on line 1a receive or accru for services rendered to the organization? If 'Yes	e comper	nsatio	on fr	om	anv	unre	late	ed organization or	individual			X
Sec	tion B. Independent Contractors	, compic			iuic	5 10	1 540	, n p			. 3		Λ
1	Complete this table for your five highest compen compensation from the organization. Report compen	sated ind sation for	epen the c	den alen	t coi dar	ntra year	ctors endi	tha ng v	it received more the vith or within the or	nan \$100,000 of ganization's tax yea	r.		
	(A) Name and business add	ress							(B) Description of	of services	(Compe	C) ensatio	n
2	Total number of independent contractors (including b \$100,000 of compensation from the organization		ited to	o tha	ose l	listeo	d abo	ve)	I who received more	than			

Page 9

		(A) Total rev	venue (B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Contributions, Gifts, Grants and Other Similar Amounts	1 a Federated campaigns1 ab Membership dues1 bc Fundraising events1 cd Related organizations1 de Government grants (contributions)1 e				
Itribution Other Si	f All other contributions, gifts, grants, and similar amounts not included above 1 f 1; g Noncash contributions included in lines 1a-1f; \$	14,936.			
Cor and	h Total. Add lines 1a-1f	114	,936.		
	2a Busin	ess Code	,595. 209,595		
Program Service Revenue	c				
Prograr	f All other program service revenue g Total. Add lines 2a-2f		,595.		
	 3 Investment income (including dividends, intere other similar amounts)	roceeds►	7. 7.		
	6a Gross rents (i) Real (ii) b Less: rental expenses	Personal			
	7 a Gross amount from sales of assets other than inventory (i) Securities (c) b Less: cost or other basis and sales expenses c Gain or (loss)	i) Other			
	d Net gain or (loss)				
Other Revenue	(not including \$				
othe	c Net income or (loss) from fundraising events.	•			
0	9 a Gross income from gaming activities. See Part IV, line 19 a				
	b Less: direct expenses b c Net income or (loss) from gaming activities	►			
	10 a Gross sales of inventory, less returns and allowances a b Less: cost of goods sold b				
	c Net income or (loss) from sales of inventory				
		ess Code			
	11a				
	b				
	c				
	d All other revenue				
	e Total. Add lines 11a-11d		,538. 209,602	0.	0.

	IX Statement of Functional Expense				
Sectio	on 501(c)(3) and 501(c)(4) organizations must com		÷		V
	Check if Schedule O contains a r				
	ot include amounts reported on lines b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic individuals. See Part IV, line 22				
	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees	89,200.	72,112.	6,408.	10,680
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0.	0.	0.	0
7	Other salaries and wages				-
U	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes	6,314.	4,799.	568.	947
11	Fees for services (non-employees):		,		
а	Management				
	Legal				
	Accounting	1,585.		1,585.	
	Lobbying	1,505.		1,000.	
	Professional fundraising services. See Part IV, line 17				
	Investment management fees				
	Other. (If line 11g amount exceeds 10% of line 25, column				
-	(A) amount, list line 11g expenses on Schedule 0. SCH . Q		141,554.	787.	173
	Advertising and promotion	4,928.	3,495.		1,433
	Office expenses				
14	Information technology				
15	Royalties				
16	Occupancy	9,634.	6,679.	2,955.	
17	Travel				
	Payments of travel or entertainment expenses for any federal, state, or local public officials				
	Conferences, conventions, and meetings				
20	Interest				
	Payments to affiliates				
22	Depreciation, depletion, and amortization	798.		798.	
23	Insurance	11,058.	9,858.	1,200.	
	Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
а	PROGRAM EXPENSES	26,012.	25,620.		392
	SUPPLIES	19,719.	18,245.	611.	863
	BANK FEES	10,299.	4,365.	149.	5,785
	PRINTING AND PUBLICATIONS	5,923.	4,913.		1,010
	All other expenses.	4,355.	-1,627.	4,709.	1,273
	Total functional expenses. Add lines 1 through 24e	332,339.	290,013.	19,770.	22,556
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ► ☐ if following				,
	SOP 98-2 (ASC 958-720)				

Form 990 (2018) KIDS COLLEGE Balance Sheet

Part X

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Check if Schedule O contains a response or note to any line in this Part X (A) (B) Beginning of year End of year 1 1 Cash - non-interest-bearing. 25,233 18,229. Savings and temporary cash investments..... 2 2 3 3 Pledges and grants receivable, net. 4 Accounts receivable, net 4 5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L.... 5 Loans and other receivables from other disgualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L..... 6 7 7 Notes and loans receivable, net..... Assets Inventories for sale or use..... 8 8 9 Prepaid expenses and deferred charges..... 9 **10a** Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D. 10 a 14,588. **b** Less: accumulated depreciation..... 10b 13,689. 10 c 1,697 899. Investments – publicly traded securities. 11 11 **12** Investments – other securities. See Part IV, line 11..... 12 Investments – program-related. See Part IV, line 11..... 13 13 14 14 Intangible assets. 15 Other assets. See Part IV, line 11..... 15 1 Total assets. Add lines 1 through 15 (must equal line 34)..... 16 26,930. 16 19,129. 17 Accounts payable and accrued expenses 17 18 Grants payable 18 19 Deferred revenue 19 20 Tax-exempt bond liabilities 20 21 Escrow or custodial account liability. Complete Part IV of Schedule D..... 21 Liabilitie 22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 22 23 Secured mortgages and notes payable to unrelated third parties 23 Unsecured notes and loans payable to unrelated third parties..... 24 24 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 25 Total liabilities. Add lines 17 through 25..... 26 0. 26 0. X and complete Organizations that follow SFAS 117 (ASC 958), check here ► Balances lines 27 through 29, and lines 33 and 34. Unrestricted net assets..... 26,930. 27 27 19,129. Temporarily restricted net assets..... 28 28 Fund 29 29 Permanently restricted net assets..... Organizations that do not follow SFAS 117 (ASC 958), check here ► and complete lines 30 through 34. 5 Capital stock or trust principal, or current funds..... 30 30 ø Net Asse Paid-in or capital surplus, or land, building, or equipment fund..... 31 31 32 Retained earnings, endowment, accumulated income, or other funds..... 32 33 Total net assets or fund balances..... 26,930. 33 19,129 Total liabilities and net assets/fund balances..... 34 34 26,930 19,129 TEEA01111 08/03/18 BAA Form 990 (2018)

Forn	1 990 i	(2018)	KIDS COLLEGE 33-09	933622	F	Page 12
Pa	t XI	Reco	nciliation of Net Assets			
		Check	if Schedule O contains a response or note to any line in this Part XI			
1	Total	revenue	e (must equal Part VIII, column (A), line 12)	1	324,	538.
2	Total	expens	es (must equal Part IX, column (A), line 25)	2	332,	339.
3	Reve	nue less	s expenses. Subtract line 2 from line 1	3	-7,	801.
4	Net a	assets or	r fund balances at beginning of year (must equal Part X, line 33, column (A))	4	26,	930.
5	Net ι	unrealize	ed gains (losses) on investments	5		
6	Dona	ted serv	vices and use of facilities	6		
7	Inves	stment e	xpenses	7		
8	Prior	period a	adjustments	8		
9	Othe	r change	es in net assets or fund balances (explain in Schedule O)	9		0.
10			fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,			
Des			1 1	0	19,	129.
Pai	t XII	Finar	ncial Statements and Reporting			_
		Check	if Schedule O contains a response or note to any line in this Part XII			
				-	Yes	i No
1	Acco	unting n	nethod used to prepare the Form 990: Cash X Accrual Other			
		e organiz chedule (ration changed its method of accounting from a prior year or checked 'Other,' explain O.			
28	Were	the org	anization's financial statements compiled or reviewed by an independent accountant?		2a	Х
			k a box below to indicate whether the financial statements for the year were compiled or reviewed	ona		
	sepa		is, consolidated basis, or both: te basis Consolidated basis Both consolidated and separate basis			
		•				х
t		5	anization's financial statements audited by an independent accountant?		2 b	
			k a box below to indicate whether the financial statements for the year were audited on a separate idated basis, or both:			
	Π	,	te basis Consolidated basis Both consolidated and separate basis			
	LI : lf 'Ye	•	2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit,			
	revie	w, or co	mpilation of its financial statements and selection of an independent accountant?		2 c	
	lf the in Sc	e organiz chedule (ration changed either its oversight process or selection process during the tax year, explain O.			
38			a federal award, was the organization required to undergo an audit or audits as set forth in the Single d OMB Circular A-133?		3 a	Х
ł	If 'Ye	s,' did th	e organization undergo the required audit or audits? If the organization did not undergo the required audit	F	Ì	
			plain why in Schedule O and describe any steps taken to undergo such audits		3 b	
BAA			TEEA0112L 08/03/18		Form 990	(2018)

SCHEDULE A (Form 990 or 990-EZ)

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.

2018

OMB No. 1545-0047

Open	to	Pub	lic
Ins	pe	ction	

Department of the Treasury Internal Revenue Service
Name of the organization

Internal Revenue Service	5					-
Name of the organization					Employer identific	
KIDS COLLEGE	with Status (All o	rappizations must	omplo	to thic	33-093362	
Part I Reason for Public Cha		5			1 /	uons.
 A church, convention of church A school described in section A hospital or a cooperative h A medical research organization aname, city, and state: 	nes, or association of cl 1 70(b)(1)(A)(ii). (Attach nospital service organ	hurches described in sec Schedule E (Form 990 or ization described in sec	tion 170(990-EZ) ction 170	b)(1)(A)().))(b)(1)(4	ï). A)(iii).	Inter the hospital's
5 An organization operated for section 170(b)(1)(A)(iv). (Co	the benefit of a colle mplete Part II.)	ege or university owned	or oper	ated by	a governmental unit de	escribed in
6 A federal, state, or local gov	ernment or governme	ental unit described in s	ection 1	70(b)(1))(A)(v).	
7 An organization that normally in section 170(b)(1)(A)(vi).	receives a substantial p Complete Part II.)	part of its support from a	governm	ental un	it or from the general pu	blic described
8 A community trust described	l in section 170(b)(1)(A)(vi). (Complete Part	l.)			
9 An agricultural research organi or university or a non-land-gra university:	nt college of agriculture		the nan	ne, city,		
10 X An organization that normally a from activities related to its o investment income and unre June 30, 1975. See section	exempt functions—sul lated business taxabl	bject to certain exception e income (less section	ons, and	(2) no I	more than 33-1/3% of	its support from gross
11 An organization organized a	nd operated exclusive	ely to test for public safe	ety. See	sectior	ı 509(a)(4).	
 An organization organized a or more publicly supported or lines 12a through 12d that do a Type I. A supporting organization(s) the power to re 	organizations describe escribes the type of s on operated, supervise gularly appoint or elect	ed in section 509(a)(1) of upporting organization id, or controlled by its sur	or sectio and com	n 509(a plete lii roanizat)(2). See section 509(a nes 12e, 12f, and 12g. ion(s). typically by giving	(3). Check the box in
b Type II. A supporting organiz management of the supporting must complete Part IV, Sect	zation supervised or c organization vested in ions A and C.	the same persons that c	ontrol or	manage	the supported organizat	tion(s). You
c Type III functionally integrated organization(s) (see instruction	. A supporting organizations) You must com	tion operated in connectio	n with, ai	nd function d F .	onally integrated with, its	supported
d Type III non-functionally integ functionally integrated. The instructions). You must com	rated. A supporting orgorganization generally	anization operated in cor must satisfy a distribu	nnection	with its s	supported organization(s) that is not
e Check this box if the organiz integrated, or Type III non-fu	ation received a writt	en determination from	the IRS	that it is	s а Туре I, Туре II, Тур	e III functionally
f Enter the number of supported						
g Provide the following informatio	-					
(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-10 above (see instructions))	(iv) I organizat in your g docur	overning	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
(A)						
<u>(B)</u>						
<u>(C)</u>						
<u>(</u> D)						
<u>(E)</u>						
Total						

Pa	t II Support Schedule for (Complete only if you checked							
	organization fails to qualify	under the tests lis	ted below, please	e complete Part II	I.)	uer Part III. II	uie	
Sec	tion A. Public Support			[1			
Cale begi	ndar year (or fiscal year nning in) ►	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018		(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any 'unusual grants.')							
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf							
3	The value of services or facilities furnished by a governmental unit to the organization without charge							
4	Total. Add lines 1 through 3							
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)							
6	Public support. Subtract line 5 from line 4							
Sec	tion B. Total Support							
	ndar year (or fiscal year nning in) ►	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	3	(f) Total
7	Amounts from line 4							
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources							
9	Net income from unrelated business activities, whether or not the business is regularly carried on							
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)							
11	Total support. Add lines 7 through 10							
12	Gross receipts from related activ	vities, etc. (see ins	structions)			· · · · · · · · · · · [12	
13	First five years. If the Form 990 is organization, check this box and	for the organization stop here	n's first, second, th	ird, fourth, or fifth	tax year as a sectio	n 501(c)(3)		····· ►
Sec	tion C. Computation of Pu	blic Support P	ercentage				1	
14 15	Public support percentage for 20 Public support percentage from	018 (line 6, columi 2017 Schedule A,	n (f) divided by lir Part II, line 14	ne 11, column (f))		· · · · · · · · · · · · · · · [14 15	%
16a	33-1/3% support test–2018. If t and stop here. The organization	he organization di qualifies as a pul	d not check the b plicly supported o	oox on line 13, an rganization	d line 14 is 33-1/3	% or more,	check th	is box ······►
b	33-1/3% support test–2017. If the and stop here. The organization	ne organization did	d not check a box	on line 13 or 16a	a, and line 15 is 3	3-1/3% or m	ore, cheo	ck this box
17a	10%-facts-and-circumstances te or more, and if the organization the organization meets the 'facts	est-2018. If the or meets the 'facts-a s-and-circumstanc	rganization did no and-circumstance es' test. The orga	t check a box on s' test, check this anization qualifies	line 13, 16a, or 1 box and stop her as a publicly sup	5b, and line e. Explain in ported organ	14 is 109 Part VI ization	% how ►
	10%-facts-and-circumstances te or more, and if the organization organization meets the 'facts-an	meets the 'facts-a d-circumstances'	and-circumstance test. The organiza	s' test, check this ation qualifies as	box and stop her a publicly support	e. Explain in ed organizat	Part VI	how the
18	Private foundation. If the organi	zation did not che	ск а box on line	13, 16a, 16b, 17a	, or 17b, check th	s box and se	e instru	ctions 🟲

Schedule A (Form 990 or 990-EZ) 2018 KIDS COLLEGE

Schedule A (Form 990 or 990-EZ) 2018

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Part III

33-0933622

Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Sec	tion A. Public Support						
Calend	lar year (or fiscal year beginning in) ►	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1	Gifts, grants, contributions, and membership fees						
	received. (Do not include any 'unusual grants.')	05 051	01 601	76 250		114 026	172 696
2	Gross receipts from admissions,	95,951.	91,691.	76,258.	93,850.	114,936.	472,686.
_	merchandise sold or services						
	performed, or facilities furnished in any activity that is						
	related to the organization's						
3	tax-exempt purpose Gross receipts from activities	215,842.	220,106.	141,237.	204,808.	209,595.	991,588.
5	that are not an unrelated trade or business under section 513.						0.
4	Tax revenues levied for the						
	organization's benefit and either paid to or expended on its behalf						0.
5	The value of services or						0.
	facilities furnished by a governmental unit to the						
	organization without charge						0.
	Total. Add lines 1 through 5	311,793.	311,797.	217,495.	298,658.	324,531.	1,464,274.
7a	Amounts included on lines 1, 2, and 3 received from						
	disqualified persons	0.	0.	0.	0.	0.	0.
b	Amounts included on lines 2						
	and 3 received from other than disgualified persons that						
	exceed the greater of \$5,000 or 1% of the amount on line 13						
	for the year.	0.	0.	0.	0.	0.	0.
с	Add lines 7a and 7b	0.	0.	0.	0.	0.	0.
8	Public support. (Subtract line						
<u></u>	7c from line 6.).						1,464,274.
	tion B. Total Support	(-) 2014	(b) 2015	(-) 2010		(-) 2019	(A Total
	dar year (or fiscal year beginning in) ► Amounts from line 6	(a) 2014 311,793.	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
	Gross income from interest, dividends,	311,793.	311,797.	217,495.	298,658.	324,531.	1,464,274.
100	payments received on securities loans,						
	rents, royalties, and income from similar sources	18.	9.	5.	6.	7.	45.
b	Unrelated business taxable	10.	5.				43.
	income (less section 511 taxes) from businesses						
	acquired after June 30, 1975						0.
-	Add lines 10a and 10b	18.	9.	5.	6.	7.	45.
11	Net income from unrelated business activities not included in line 10b.						
	whether or not the business is						0
12	regularly carried on						0.
	gain or loss from the sale of						
	capital assets (Explain in Part VI.)						0.
13	Total support. (Add lines 9,		011				
14	10c, 11, and 12.) First five years. If the Form 990	311,811.	311,806.	217,500.	298,664.	324,538.	1,464,319.
14	organization, check this box and	stop here				a section 501(c)(.	⊳)
	tion C. Computation of Pu						
	Public support percentage for 20		•••••••				100.00 %
	Public support percentage from					16	100.00 %
	tion D. Computation of Inv		-				
17	Investment income percentage f						0.00 %
18	Investment income percentage f						0.00 %
19a	33-1/3% support tests—2018. If is not more than 33-1/3%, check	the organization d	id not check the b	ox on line 14, an	d line 15 is more	than 33-1/3%, an	d line 17 ► X
b	33-1/3% support tests –2017. If t		-	•		-	
	line 18 is not more than 33-1/3%	, check this box a	and stop here. The	e organization qua	alifies as a public	ly supported orga	nization 🕨
	Private foundation. If the organi	zation did not che					
RΔΔ			TEEA0403L	06/07/18	Sc	hadula A (Earm Q	90 or 990-F7) 2018

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

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- No Yes Are all of the organization's supported organizations listed by name in the organization's governing documents? 1 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. 1 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). 2 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If 'Yes,' answer (b) and (c) below. 3a **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If 'Yes,' describe in **Part VI** when and how the organization made the determination. 3b
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If 'Yes,' explain in **Part VI** what controls the organization put in place to ensure such use.
- **4a** Was any supported organization not organized in the United States ('foreign supported organization')? If 'Yes' and if you checked 12a or 12b in Part I, answer (b) and (c) below.
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If 'Yes,' describe in **Part VI** how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- **c** Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If 'Yes,' explain in **Part VI** what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If 'Yes,' answer (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).
- **b** Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? *If 'Yes,' provide detail in Part VI.*
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? *If 'Yes,' complete Part I of Schedule L (Form 990 or 990-EZ).*
- 8 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.
- **b** Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? *If 'Yes,' provide detail in Part VI*.
- c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? *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.
 - **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

3c

4a

Δh

4c

5a

5b

5c

6

7

8

9a

9b

9c

10a

10b

		Yes	No
11 Has the organization accepted a gift or contribution from any of the following persons?			
a A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the			
governing body of a supported organization?	11a	!	<u> </u>
b A family member of a person described in (a) above?	11b		
c A 35% controlled entity of a person described in (a) or (b) above? If 'Yes' to a, b, or c, provide detail in Part VI.	11c		1
Section B. Type I Supporting Organizations			

- 1 Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If 'No,' describe in **Part VI** how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.
- 2 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? *If 'Yes,' explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.*

Section C. Type II Supporting Organizations

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

Section D. All Type III Supporting Organizations

			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If 'No,' explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? <i>If 'Yes,' describe in Part VI the role the organization's supported organizations played</i>			
	in this regard.	3		

Section E. Type III Functionally Integrated Supporting Organizations

- 1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).
 - a 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 government entity (see instructions).

2 Activities Test. Answer (a) and (b) below.

- a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If 'Yes,' then in **Part VI identify those supported** organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.
- **b** Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? *If 'Yes,' explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.*
- 3 Parent of Supported Organizations. Answer (a) and (b) below.
- a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? *Provide details in Part VI.*
- **b** Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If 'Yes,' describe in **Part VI** the role played by the organization in this regard.

2b

3a

3h

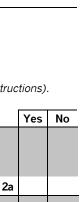
Yes

1

2

No

33-0933622



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 ection B - Minimum Asset Amount (A) P 1 Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year): 1a b Average monthly value of securities 1a b Average monthly cash balances 1b c Fair market value of other non-exempt-use assets 1c d Total (add lines 1a, 1b, and 1c) 1d e Discount claimed for blockage or other factors (explain in detail in Part VI): 2 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). 5 5 Net value of non-exempt-use assets (subtract line 4 from line 3) 5 6 Multiply line 5 by .035. 6 7 Reco		(optional)
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b Average monthly cash balances1bc Fair market value of other non-exempt-use assets1cd Total (add lines 1a, 1b, and 1c)1de Discount claimed for blockage or other factors (explain in detail in Part VI):1d2 Acquisition indebtedness applicable to non-exempt-use assets23 Subtract line 2 from line 1d.34 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).45 Net value of non-exempt-use assets (subtract line 4 from line 3)56 Multiply line 5 by .035.67 Recoveries of prior-year distributions78 Minimum Asset Amount (add line 7 to line 6)8ection C - Distributable Amount11 Adjusted net income for prior year (from Section A, line 8, Column A)12 Enter 85% of line 1.2		
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1Adjusted net income for prior year (from Section A, line 8, Column A)12Enter 85% of line 1.2		
2 Enter 85% of line 1. 2		Current Year
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		

7 Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).

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Schedule A (Form 990 or 990-EZ) 2018

	dule A (Form 990 or 990-EZ) 2018 KIDS COLLEGE		33-093	33622 Page 7
Par		pporting Organiza	ations (continued)	
	tion D – Distributions			Current Year
	Amounts paid to supported organizations to accomplish exempt pur			
2	Amounts paid to perform activity that directly furthers exempt purposes of in excess of income from activity	of supported organizatior	ιs,	
3	Administrative expenses paid to accomplish exempt purposes of su	pported organizations		
4	Amounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in Part VI). See instructions.			
7	Total annual distributions. Add lines 1 through 6.			
8	Distributions to attentive supported organizations to which the organization in Part VI). See instructions.	on is responsive (provide	e details	
9	Distributable amount for 2018 from Section C, line 6			
10	Line 8 amount divided by line 9 amount			
Sec	tion E – Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2018	(iii) Distributable Amount for 2018
1	Distributable amount for 2018 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2018 (reasonable cause required – explain in Part VI). See instructions.			
3	Excess distributions carryover, if any, to 2018			
а	From 2013			
b	Prom 2014			
C	From 2015			
d	From 2016			
e	e From 2017			
1	f Total of lines 3a through e			
g	Applied to underdistributions of prior years			
h	Applied to 2018 distributable amount			
i	Carryover from 2013 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2018 from Section D, line 7: \$			
а	Applied to underdistributions of prior years			
	Applied to 2018 distributable amount			
C	Remainder. Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2018, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions.			
6	Remaining underdistributions for 2018. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.			
7	Excess distributions carryover to 2019. Add lines 3j and 4c.			
8	Breakdown of line 7:			
а	Excess from 2014			
	Excess from 2015			
-	Excess from 2016			
	Excess from 2017			
	Excess from 2018			

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Schedule A (Form 990 or 990-EZ) 2018

Page 8

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