Department of the Treasury Internal Revenue Service

# Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

OMB No. 1545-0047

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

H 1	OF LITE Z	o to calendar year, or tax year beginning and e	nunig		
Ba	Check if upplicable:	C Name of organization	-	D Employer identifi	cation number
	Address	KARS 4 KIDS INC.			
Н	change Name	Doing business as KARS4KIDS		22-3	746050
F	change Initial return		loom/suite	E Telephone numbe	
	Final return/	1805 SWARTHMORE AVENUE	TOUTHIOUTE	732-	730-8595
	termin- ated	City or town, state or province, country, and ZIP or foreign postal code		G Gross receipts \$	139,477,241.
	Amen ded return	LAKEWOOD, NJ 08701		H(a) Is this a group r	
	Applica- tion	F Name and address of principal officer: ELIYOHU MINTZ	na-seti	for subordinates	? Yes X No
	pending		8701		ncluded? Yes No
		pt status: X 501(c)(3) 501(c)( ) (insert no.) 4947(a)(1) or	527	If "No," attach a	list. (see instructions)
		▶ WWW.KARS4KIDS.ORG		H(c) Group exemption	
		ganization: X Corporation Trust Association Other ▶	L Year o	of formation: $2001$ N	Number of State of legal domicile; NJ
Pa		Summary			
ø	1 Bri	iefly describe the organization's mission or most significant activities: ${f SEE}$ ${f S}$	CHEDU	LE O	
Activities & Governance	a. =				
ern	THE RESERVE	neck this box 🕨 📖 if the organization discontinued its operations or dispose	ed of more	than 25% of its net a	The state of the s
9				3	7
8		imber of independent voting members of the governing body (Part VI, line 1b) $_{\cdot\cdot}$			1 to
ties		tal number of individuals employed in calendar year 2018 (Part V, line 2a)	. 3 - 15 - 15 - 15 - 15 - 1	UNUNUNUNUNUNUNUN VIII	138
ξ		tal number of volunteers (estimate if necessary)			0.
Ac		tal unrelated business revenue from Part VIII, column (C), line 12			0.
_	D NE	t unrelated business taxable income from Form 990-T, line 38	<del></del>	Prior Year	
	8 Cc	ontributions and grants (Part VIII, line 1h)	) <u> </u>	70,256,696.	Current Year 77, 487, 994.
nue	10.10	and the second s		0.	0.
Revenue	1.00 PMC	ogram service revenue (Part VIII, line 2g) /estment income (Part VIII, column (A), lines 3, 4, and 7d)		0.	0.
ř		her revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)			-11,899,861.
		tal revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	33102 /	58,986,184.	65,588,133.
		ants and similar amounts paid (Part IX, column (A), lines 1-3)		29,135,997.	
		enefits paid to or for members (Part IX, column (A), line 4)		0.	0.
S		laries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	CARLO AND A	4,674,431.	4,191,744.
Expenses	16a Pr	ofessional fundraising fees (Part IX, column (A), line 11e)		0.	0.
xbe	b To	tal fundraising expenses (Part IX, column (D), line 11e) ► 18,997,93	8.		
ш	17 Ot	her expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		19,235,675.	22,726,791.
		tal expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	******	53,046,103.	
	19 Re	evenue less expenses. Subtract line 18 from line 12		5,940,081.	5,745,563.
Net Assets or Fund Balances				ginning of Current Year	End of Year
Sset	20 To	tal assets (Part X, line 16)		19,149,846.	26,128,670.
et A	21 To	tal liabilities (Part X, line 26)	enter >	6,447,532. 12,702,314.	7,680,793.
	22 Ne	et assets or fund balances. Subtract line 21 from line 20	edited in	12,/02,314.	10,441,0//*
1	The allegate all the	es of perjury, I declare that I have examined this return, including accompanying schedules	and otatom	ante and to the heet of m	y knowledge and helief it is
	The second of the	and complete. Declaration of preparer (other than officer) is based on all information of which			y knowledge and belief, it is
u u o	, 0011665, 6		un proparer	nas any knowicage.	
Sigi		Signature of officer		Date	
Her		ELIYOHU MINTZ, PRESIDENT			
.,		Type or print name and title			
	P	rint/Type preparer's name Preparer's signature	200	ate Check	PTIN
Paid		ESHY KATZ HESHY KATZ	0	5/13/19 if self-employ	ed P00841428
	ALCOHOL: N	rm's name ROTH & COMPANY, LLP		Firm's EIN 🕨	11-3360065
Use	Only Fi	rm's address 1428 36TH STREET SUITE 200		The state of the s	
		BROOKLYN, NY 11218		Phone no. 71	8-236-1600
May	the IRS	discuss this return with the preparer shown above? (see instructions)			X Yes No
					- 000 (0040)

(Revenue \$

Form 990 (2018)

including grants of \$

35,490,158.

(Expenses \$

Total program service expenses

			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?	2		X
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			х
6	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III  Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to	5		
7	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I Did the organization receive or hold a conservation easement, including easements to preserve open space,	6		X
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," 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?  If "Yes," complete Schedule D, Part IV	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, 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," complete Schedule D, Part VI	11a	х	
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		х
C	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		х
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	х	
e	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	# 1	+	
	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 Schedule D, Parts XI and XII	12a		х
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	X	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	4	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 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? If "Yes," complete Schedule F, Parts II and IV	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	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,"	1		х
20-	complete Schedule G, Part III  Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	19		X
20a	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20a 20b		24
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	200		
21	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	X	

	1990 (2018) KARS 4 KIDS INC. 22-37	46050	Р	age
Pai	rt 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			13
	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			x
044	Schedule J	23		Λ
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete	1 1		
	Galland Jan	24a		х
h	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	***		21
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease	240		
	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		
	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, 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		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			52
	of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	instructions for applicable filing thresholds, conditions, and exceptions):			
	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
C	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			77
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV		X	X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Δ	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation	200	-	х
31	contributions? If "Yes," complete Schedule M  Did the organization liquidate, terminate, or dissolve and cease operations?	30	1	21
01		31		х
32	If "Yes," complete Schedule N, Part I  Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	31		
O.L	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			- 22
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33	X	12
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34	X	-
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	220		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization	?		
	If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			-
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	1.1.3	TT.	
	Note. All Form 990 filers are required to complete Schedule O	38	X	
ra	rt 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		in the second	22.00
	Environmental Control	3 5	Yes	No
		35 0		
	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	<u> </u>		
C	Did the digalization comply with backup withholding rules for reportable payments to vendors and reportable gaming			

(gambling) winnings to prize winners?

22-3746050 Page 5 Form 990 (2018) KARS 4 KIDS INC.

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

		1	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	3		
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)			
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	За		X
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		х
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				X
C		5c		
	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	11	
7	Organizations that may receive deductible contributions under section 170(c).	-		
а	63.46	7a		х
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required	7.0	1	
· ·	to file Form 8282?	7c	х	
d	If "Yes," indicate the number of Forms 8282 filed during the year 789	70		
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		х
f		11.77		Х
g		7g		
h			X	
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		9a		
b		9b	10	
0	Section 501(c)(7) organizations. Enter:			
а	- 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
11	Section 501(c)(12) organizations. Enter:	7		
а	Gross income from members or shareholders 11a			
	Gross income from other sources (Do not net amounts due or paid to other sources against	7		
2	amounts due or received from them.)			
2a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а		13a		
-	Note. See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which the			
	organization is licensed to issue qualified health plans			
c	Enter the amount of reserves on hand			
l4a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or	100		
70.00	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		X
	If "Yes," complete Form 4720, Schedule O.			
				00 000 00

22-3746050 Form 990 (2018) Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

	Check if Schedule O contains a response or note to any line in this Part VI		,,				X
Sec	tion A. Governing Body and Management						
					Y	es	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a		7	10		
	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.	100					
b	Enter the number of voting members included in line 1a, above, who are independent	1b		6			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationshi	p with	any other				
	officer, director, trustee, or key employee?	i Mana		2			X
3	Did the organization delegate control over management duties customarily performed by or under the	e dire	ct supervision	110	Ш		
	of officers, directors, or trustees, or key employees to a management company or other person?			3			X
4	Did the organization make any significant changes to its governing documents since the prior Form 9	990 w	as filed?	4			Х
5	Did the organization become aware during the year of a significant diversion of the organization's ass	sets?		5	Į.		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 a	ppoin	t one or	17.			
	more members of the governing body?			7a	J.		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, s	stockh	olders, or				
	persons other than the governing body?			7b	Ų.		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year						
а	The governing body?			8a		K	
	Each committee with authority to act on behalf of the governing body?			8b	2	Ζ	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be rea			173			37
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O			9			X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal R						
					Y	es	No
10a	Did the organization have local chapters, branches, or affiliates?	101016		108	3		X
b	If "Yes," did the organization have written policies and procedures governing the activities of such c	hapte	rs, affiliates,	M.	Í		
	and branches to ensure their operations are consistent with the organization's exempt purposes?		************	108	)		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing bod	ly bef	ore filing the form?	118	2	Z	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.						
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13			128	3 2	Σ	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise	e to co	nflicts?	12t	) 2	ζ	
C	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Y	es," c	lescribe		T.		
	in Schedule O how this was done			120	, 2	2	
13	Did the organization have a written whistleblower policy?			13		Z	
14	Did the organization have a written document retention and destruction policy?			14	2	Σ	
15	Did the process for determining compensation of the following persons include a review and approve	al by i	ndependent		Î		
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?						
а	The organization's CEO, Executive Director, or top management official			158	a .		X
b	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).						
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrange	ment	with a				
	taxable entity during the year?			168	a		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evalua	te its	participation		ĬĪ.	T	
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the orga	nizati	on's				
	exempt status with respect to such arrangements?	ninin	nanananananananana	16b	)		
Sec	tion C. Disclosure		eri i anii e e				
17	List the states with which a copy of this Form 990 is required to be filed >AL, KS, AR, CA, C	0,0	T,FL,GA,H	I,I	L,l	ND,	,KY
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable), 990, ar	nd 99	OT (Section 501(c)(	3)s on	y) av	aila	ble
	for public inspection. Indicate how you made these available. Check all that apply.						
	X Own website Another's website X Upon request Other (explain	in Sc	hedule O)				
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, co	nflict	of interest policy, a	nd fina	ncia	1	
	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 bo	oks a	nd records 🕨				
	ELIYOHU MINTZ - 732-730-8595						
	1805 SWARTHMORE AVENUE, LAKEWOOD, NJ 08701						

# Part VIII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

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

#### Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
  - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

(A) Name and Title	(B) Average hours per week		(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)					(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other
	(list any hours for related organizations below line)	Individual trustee or director	Institutional frustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) ELIYOHU MINTZ CEO	25.00 25.00	х		х				48,000.	49,000.	25,105.
(2) SHIMSHON BANDMAN	2.00	Δ.		Δ			Ŧ	40,000,	49,000,	23,103,
TRUSTEE		Х						0.	0.	0.
(3) JOSEPH E. WEINBERGER	0,50									1 7
TRUSTEE	2.00	X					Щ	0.	0.	0.
(4) REUVEN KANAREK TRUSTEE	2.00	х						0.	0.	0.
(5) JEFFREY RUBIN	2.00									
TRUSTEE		X		X				0.	0.	0.
(6) RON COLEMAN	2,00								06.56	
TRUSTEE		X		-				0.	0.	0.
(7) SHOSHANA JOSELIT	20.00		Ħ	Х				46,795.	0.	0
SECRETARY	20.00			Δ			-	40,793.	0,	0.
(8) BENTZION TURIN GENERAL COUNSEL	17.00			x				0.	86,527.	25,105.
(9) MARC ENGEL CONTROLLER	20.00			Х				0.	76,472.	0.
(10) ROBERT MOSKOWITZ	40.00			21				0.	10,4124	0.
VICE PRESIDENT	1			X				103,027.	0.	0.
(11) ESTHER LANDAU COO	40.00	ļ		x				73,040.	0.	ō.
				À					J. 14	Form <b>990</b> (2018

(A) Name and title	(B) Average hours per week	box	, unle	Pos heck	rson	l than is bot or/trus	han	(D) Reportable compensation from	(E) Reportable compensation from related		(F) Estima amoun othe	ited it of
	(list any hours for related organizations below line)	Individual frustee or director	Institutional frustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	or a	mpens from t ganiza nd rela ganiza	sation he ation ated
1b Sub-total							•	270,862.	211,999		50,	210
c Total from continuation sheets to d Total (add lines 1b and 1c)	g but not limited to th			وتنوه			▶	0. 270,862. ceived more than \$100	0 211,999 ,000 of reportable		50,	0. 210.
Did the organization list any former line 1a? If "Yes," complete Schedule	officer, director, or tru		1000					nighest compensated e	A STATE OF THE STA	3	Yes	
<ul> <li>For any individual listed on line 1a, is and related organizations greater that</li> <li>Did any person listed on line 1a received</li> </ul>	an \$150,000? If "Yes,	" co	omp <i>mpl</i> i	ensa ete S	ation S <i>ch</i> e	n and edule	oth Jfc	er compensation from tor such individual	the organization	4		х
rendered to the organization? If "Yes								ed organization or maivi	dual for services	5		Х
Section B. Independent Contractors  1 Complete this table for your five high	nest compensated in	dep	ende	ent c	ont	racto	rs th	nat received more than	\$100,000 of compe	nsation	from	
the organization. Report compensat		ear	endi	ng v	vith	or w	ithin	The state of the s	/ear.		127	
	(A) Isiness address						][:	(B) Description of s	ervices	Comp	(C) ensat	ion
ORRICK, 140 EAST 45 S YORK, NY 10017 JT & SONS LLC	TREET 25TH	F	LOC	OR.	g l	NEV		EGAL SERVIC	ES	1,0	08,	423.
4312 SANTA RITA ROAD,	EL SOBRAN'	ΓE	, (	CA	9	480	31	RANSPORTATI	ON	3	48,	186.
GOOD GUYS TOWING 4553 ABRUZZI CIRCLE,	STOCKTOWN,	C	A 9	952	20	6	I	RANSPORTATI	ON	2	50,	446.
SIDELINE TOWING 1175 SELBY STREET, SA	N FRANSISCO	ο,	CZ	A 9	94:	124	ı T	RANSPORTATI	ON	1:	16,	650.

Total number of independent contractors (including but not limited to those listed above) who received more than

\$100,000 of compensation from the organization

			4 KIDS I	NC.			22-3746	050 Page 9
ar	t VII			Considerate and actives	s so area pala suu			
		Check if Schedule O cont	ains a response	or note to any lin	e in this Part VIII (A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluder from tax under sections 512 - 514
ıts	1 a	Federated campaigns	1a					
and Other Similar Amounts		Membership dues	TOTAL PROPERTY.					
A.	c	Fundraising events						
<u>a</u>		Related organizations						
Ē	е	Government grants (contribut	tions) 1e					
Sie	f	All other contributions, gifts, gran	C C					
Ě		similar amounts not included abo	******	77,487,994.				
B	-	Noncash contributions included in lines		75,885,900.	154 55			
Ö	h	Total. Add lines 1a-1f	. 603 603 603 603 603 603 603 603	A STATE OF THE RESERVE AS A STATE OF THE RES	77,487,994.			
	2 a			Business Code				
0	b						1 11	
로	c			1				
eve	d							
Revenue	е					1		
. 7	f	All other program service reve	enue			1		100
14	g	Total. Add lines 2a-2f						
- 1	3	Investment income (including						
Ш		other similar amounts)						
	4	Income from investment of ta	or this are a second or the second of the second	the second of th	-	-		
	5	Royalties		Proposition of the property of the control of the c				
Ш	6.0	Cross routs	(i) Real	(ii) Personal				
Ш		Gross rents  Less: rental expenses	-	+				
		Rental income or (loss)		1				
		Net rental income or (loss)	Name and an					
		Gross amount from sales of	(i) Securities	(ii) Other		i i		
		assets other than inventory						
	b	Less: cost or other basis						
		and sales expenses						
	C	Gain or (loss)						
- 1	d	Net gain or (loss)						
0	8 a	Gross income from fundraisin						
E E		including \$	of					
e l		contributions reported on line						
ē		Part IV, line 18						
Other Revenue		Less: direct expenses  Net income or (loss) from fund		- 6				
		Gross income from gaming ac						
	<i>3 a</i>	Part IV, line 19						
	b	Less: direct expenses						
		Net income or (loss) from gan						
		Gross sales of inventory, less						
		and allowances		61,989,247.				
	b	Less: cost of goods sold		73,889,108.				
Щ	c	Net income or (loss) from sale	s of inventory		-11,899,861.			-11,899,861
		Miscellaneous Revenu	le	Business Code				
	11 a							1
	b					, l		7
	c							
		All other revenue				- 4		
		Total. Add lines 11a-11d Total revenue. See instructions			65,588,133.	0 4	0.	-11,899,861

Form 990 (2018) KARS 4 KIDS INC. 22

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

Do	Check if Schedule O contains a respon not include amounts reported on lines 6b,	(A)	(B)	(C)	(D)
	8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	32,783,035.	32,783,035.		
2	Grants and other assistance to domestic individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16	141,000.	141,000.		
4	Benefits paid to or for members				
5	Compensation of current officers, directors,	277			12, 333
-	trustees, and key employees	270,862.	88,475.	118,632.	63,755.
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	3,636,081.	106,867.	2,381,815.	1,147,399.
7	Other salaries and wages	3,030,001.	100,007.	2,301,013.	1,141,333.
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9	Other employee benefits	284,801.	1/ 100	100 206	00 205
10	Payroll taxes	204,001,	14,190.	182,306.	88,305,
11	Fees for services (non-employees):	I and the second	1	11	
	Management	1,106,039.		1,106,039.	
	Legal	71,250.		71,250.	
	Accounting	/1,250.		/1,250.	
	Lobbying				
1961	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	하게 되는 사용하다 하는 것이 되는 것이 하는 것이 없는 사람들이 가장하는 것이 되었다. 그렇게 하는 사람이 가장하는 것이 없는 것이 없다면 하는 것이 없다.	221 202		321,383.	
56	column (A) amount, list line 11g expenses on Sch O.)	321,383. 19,940,509.	2,350,398.	108,176.	17,481,935.
12	Advertising and promotion	572,228.	6,193.	439,884.	126,151.
13	Office expenses	314,440.	0,193.	433,004.	120,131.
14	Information technology				
15	Royalties	10,047.	-	+	10,047.
16	Occupancy	10,047.			10,047
17	Travel				
18	Payments of travel or entertainment expenses				
40	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates	5,766.		5,766.	
23		60,484.		60,484.	
24	Other expenses, Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A)	00/1011		300,1011	
	amount, list line 24e expenses on Schedule 0.)				
а	REPAIRS AND MAINTENANCE	425,305.		370,809.	54,496.
b	MERCHANT FEES	115,152.		115,152.	
C	LICENSES & PERMITS	72,778.		72,778.	
d	REFERRALS	25,850.			25,850.
е	All other expenses		Hall off tall	the seal seal	
25	<b>Total functional expenses</b> . Add lines 1 through 24e	59,842,570.	35,490,158.	5,354,474.	18,997,938.
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 X if following SOP 98-2 (ASC 958-720)	19,940,509.	2,350,398.	108,176.	17,481,935.

Form 990 (	2018	)	
Part X	Ba	ance	Sheet

-	πx	Check if Schedule O contains a response or no	te to any lir	ne in this Part X			0.
					<b>(A)</b> Beginning of year		<b>(B)</b> End of year
	1	Cash - non-interest-bearing		inininininininininini	76,851.	1	2,606.
	2	Savings and temporary cash investments				2	
	3	Pledges and grants receivable, net		2,759,724.	3	1,771,533.	
	4	Accounts receivable, net		1,159,941.	4	2,696,853.	
	5	Loans and other receivables from current and for					
	77	trustees, key employees, and highest compens	ated emplo	yees. Complete			
		Part II of Schedule L				5	
	6	Loans and other receivables from other disqual					
	-	section 4958(f)(1)), persons described in section	4958(c)(3	)(B), and contributing			
		employers and sponsoring organizations of sec	A	Control of the State of the Sta			
S		employees' beneficiary organizations (see instr)				6	
Assets	7	Notes and loans receivable, net		_		7	
Ä	8	Inventories for sale or use				8	
	9	Prepaid expenses and deferred charges			0.	9	16,250.
	10a	Land, buildings, and equipment: cost or other	1				
		basis. Complete Part VI of Schedule D	10a	213,697.		(7)	
	b	Less: accumulated depreciation		85,458.	9,005.	10c	128,239.
	11	Investments - publicly traded securities				11	
	12	Investments - other securities. See Part IV, line			12		
	13	Investments - program-related. See Part IV, line			13		
	14	Intangible assets	CICICICICICICICICICICI		14		
	15	Other assets. See Part IV, line 11			15,144,325.	15	21,513,189.
	16	Total assets. Add lines 1 through 15 (must equ			19,149,846.	16	26,128,670.
	17	Accounts payable and accrued expenses	2,447,532.	17	4,663,381.		
	18	Grants payable		4,000,000.	18	3,000,000.	
	19	Deferred revenue				19	
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Complete				21	
3	22	Loans and other payables to current and forme	r officers, o	directors, trustees,			
Ĕ	140	key employees, highest compensated employee	es, and dis	qualified persons.			
Liabilities		Complete Part II of Schedule L				22	
=	23	Secured mortgages and notes payable to unrela				23	
	24	Unsecured notes and loans payable to unrelate	d third par	ties		24	
	25	Other liabilities (including federal income tax, pa					
	122	parties, and other liabilities not included on lines	17-24). C	omplete Part X of		4	
	4	Schedule D			0.	25	17,412.
	26	Total liabilities. Add lines 17 through 25			6,447,532.	26	7,680,793.
		Organizations that follow SFAS 117 (ASC 958	3), check h	ere X and			
es	7.1	complete lines 27 through 29, and lines 33 ar	nd 34.		are date dark		20 112 222
anc	27	Unrestricted net assets	,		12,702,314.	27	18,447,877.
Bal	28	Temporarily restricted net assets				28	
2	29				29		
E	14	Organizations that do not follow SFAS 117 (A	SC 958), d	check here			
0.0	-	and complete lines 30 through 34.					
sets	30	Capital stock or trust principal, or current funds				30	
Ass	31	Paid-in or capital surplus, or land, building, or ed				31	
Net Assets or Fund Balances	32	Retained earnings, endowment, accumulated in			10 000 014	32	10 445 055
_	33	Total net assets or fund balances			12,702,314.	33	18,447,877.
	34	Total liabilities and net assets/fund balances			19,149,846.	34	26,128,670.

Pa	rt XI Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI					
á	Tatal valuable (must equal Pairt VIII) addumn (A) line 10)	1	65,58	8 1	33	
1	Total evenue (must equal Part VII, column (A), line 12)	2	59,84			
2	Total expenses (must equal Part IX, column (A), line 25)	3		5,745,56		
3	Revenue less expenses. Subtract line 2 from line 1	4	12,70			
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	5	14,70	4,5	7.4	
5	Net unrealized gains (losses) on investments	1457			-	
6	Donated services and use of facilities	6			_	
7	Investment expenses	7				
8	Prior period adjustments	8			0.	
9	Other changes in net assets or fund balances (explain in Schedule O)	9			U.	
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,		10 44	7 0		
-	column (B))	10	18,44	1,8	11.	
Pa	rt XII Financial Statements and Reporting				-	
	Check if Schedule O contains a response or note to any line in this Part XII	ororororo			X	
1	Accounting method used to prepare the Form 990: Cash X Accrual Other  If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	O	- [	Yes	No	
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 reviewed separate basis, consolidated basis, or both:  Separate basis  Consolidated basis  Both consolidated and separate basis	on a				
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 separate					
	consolidated basis, or both:  Separate basis  Separate basis  Both consolidated and separate basis					
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	audit,				
	review, or compilation of its financial statements and selection of an independent accountant?		2c	X		
	If the organization changed either its oversight process or selection process during the tax year, explain in Sche	dule O.				
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sir	gle Audit				
	Act and OMB Circular A-133?	7	3a		X	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b			
	, and the same state of the sa			990	(2018)	

#### SCHEDULE A

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

# **Public Charity Status and Public Support**

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

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization KARS 4 KIDS INC.

Employer identification number 22-3746050

Par	ti	Reason for Publi	c Charity Status	(All organizations must c	omplete th	is part.) S	ee instructions.	
he o	rganiz			: (For lines 1 through 12,				
1		A church, convention of	churches, or associa	tion of churches describe	d in sectio	on 170(b)(	1)(A)(i).	
2	100	하는데 그렇게 하는데 나를 하는데 되었다면서	The state of the s	. (Attach Schedule E (Fori				
3		하는 살아 가는 어느 아니는 그 아이들이 아니는 그 사람들이 하는데 그 것이다.		ganization described in s			iii).	
4		A medical research orga		conjunction with a hospita		0 1 0 10 1 10 4	N 7-2"	the hospital's name,
5		city, and state: An organization operate section 170(b)(1)(A)(iv)		college or university owne	d or opera	ited by a g	governmental unit descri	bed in
6		A federal, state, or local	government or govern	nmental unit described in	section 1	70(b)(1)(A	)(v).	
7								l public described in
8			, 하는 이번 시간 하는 사람이 없는 것이 없었다.	o)(1)(A)(vi). (Complete Par	t II.)			
9				ed in section 170(b)(1)(A)		ed in conj	unction with a land-grant	college
	- 9	A CONTRACTOR OF THE PROPERTY O		riculture (see instructions)				
10		An organization that nor activities related to its ex	kempt functions - sub usiness taxable incom	re than 33 1/3% of its su ject to certain exceptions ne (less section 511 tax) fi	and (2) n	o more tha	an 33 1/3% of its suppor	t from gross investment
11				usively to test for public sa	afety. See	section 5	09(a)(4).	
12		이 사람 아래로 아이들이 그 이번 투자로 되었다.		usively for the benefit of, t				e purposes of one or
	9	more publicly supported	l organizations descril	ped in <b>section 509(a)(1)</b> of supporting organization	r section	509(a)(2).	See section 509(a)(3).	
a				, supervised, or controlled				v aivina
			ation(s) the power to	regularly appoint or elect				
b		Type II. A supporting	organization supervise at of the supporting or	ed or controlled in connec rganization vested in the s				
C		Type III functionally i	ntegrated. A support	ing organization operated				ed with,
00		The second control of the second seco		ns). You must complete				er anna 15
a		네트 그래의 교육하다 그들이 기뻐하다니다		oporting organization ope				
			생생산 정도이라는 경기에 다른 사람들이다.	nization generally must sa			The state of the s	tiveness
			and the state of t	omplete Part IV, Section				
е				a written determination fro			a Type I, Type II, Type III	
2	-1.00			ionally integrated suppor	ing organi	zation.		A A
		the number of supporte	1		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	entatatata		, ,
g		de the following informated	tion about the suppor	ted organization(s). (iii) Type of organization	I (iv) is the oro:	anization listed	(v) Amount of monetary	(vi) Amount of other
	(1)	organization	(III) CIIV	(described on lines 1-10		anization listed ing document?	support (see instructions)	support (see instructions)
		organization		above (see instructions))	Yes	No	eapport (eoo med dodono)	capport (coo medaptions)
			1					
					1	- 11		
			4					
					0.0			
otal								

# Schedule A (Form 990 or 990-EZ) 2018 KARS 4 KIDS INC. 22-37460 Part II | Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support						
Calendar year (or fiscal year beginning in)	(a) 2014	<b>(b)</b> 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1 Gifts, grants, contributions, and		1		- 4.	7272	1-2-4
membership fees received. (Do not	55.00	30000	3	V		St. 27 500
include any "unusual grants.")	34,756,266.	39,071,455.	53,017,775.	70,256,696.	77,487,994.	274,590,186.
Tax revenues levied for the organ- ization's benefit and either paid to or expended on its behalf						
The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3	34,756,266.	39,071,455.	53,017,775.	70,256,696.	77,487,994.	274,590,186.
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.		*	1	1		274,590,186.
Section B. Total Support	4	+	4			
Calendar year (or fiscal year beginning in)	(a) 2014	<b>(b)</b> 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
7 Amounts from line 4	34,756,266.	39,071,455.	53,017,775.	70,256,696.	77,487,994.	274,590,186.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties,						
and income from similar sources  9 Net income from unrelated business	13,000.					13,000.
activities, whether or not the business is regularly carried on						
Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)				4		
11 Total support. Add lines 7 through 10						274,603,186.
12 Gross receipts from related activities,	etc. (see instructio	ins)			12	
13 First five years. If the Form 990 is for			d, fourth, or fifth ta	x year as a section	and the second	
organization, check this box and stop Section C. Computation of Publi	here	aratica a	amamamamm	alaualalalalalala		
			a constant		74 T	100 00
14 Public support percentage for 2018 (lin						100.00 %
15 Public support percentage from 2017 16a 33 1/3% support test - 2018. If the or	rganization did no	check the box on	i line 13, and line 1	4 is 33 1/3% or m		
stop here. The organization qualifies a b 33 1/3% support test - 2017. If the or and stop here. The organization qualif	rganization did no	check a box on li	ne 13 or 16a, and	line 15 is 33 1/3%	or more, check th	
17a 10% -facts-and-circumstances test						or more.
and if the organization meets the "fact meets the "facts-and-circumstances" i	s-and-circumstand	es" test, check th	is box and stop he	ere. Explain in Par	t VI how the orgar	nization
b 10% -facts-and-circumstances test more, and if the organization meets th	- <b>2017</b> . If the orga e "facts-and-circur	anization did not c mstances" test, ch	heck a box on line leck this box and s	13, 16a, 16b, or 1 stop here. Explain	7a, and line 15 is in Part VI how the	10% or
organization meets the "facts-and-circ						
18 Private foundation. If the organization	тою посспеска в	oox on line 13, 168	i, iou, i/a, or i/b	, check this box a	nu see instruction	5

# Schedule A (Form 990 or 990-EZ) 2018 KARS 4 KIDS INC. Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support						
Calendar year (or fiscal year beginning in)	(a) 2014	<b>(b)</b> 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1 Gifts, grants, contributions, and						11 2 3
membership fees received. (Do not						
include any "unusual grants.")						
2 Gross receipts from admissions,						
merchandise sold or services per-				0.000		
formed, or facilities furnished in						
any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that		1				
are not an unrelated trade or bus-						
iness under section 513						
4 Tax revenues levied for the organ-						
ization's benefit and either paid to					1 1 11	
or expended on its behalf						
furnished by a governmental unit to						
the organization without charge				+	+	
6 Total. Add lines 1 through 5					1	
7a Amounts included on lines 1, 2, and						
3 received from disqualified persons						
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				ļ	4	
c Add lines 7a and 7b						
8 Public support. Subtract line 7c from line 6.)						
Section B. Total Support						
Calendar year (or fiscal year beginning in) ►	(a) 2014	<b>(b)</b> 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
9 Amounts from line 6						
10a Gross income from interest,		1				
dividends, payments received on securities loans, rents, royalties,						
and income from similar sources						
<b>b</b> Unrelated business taxable income						
(less section 511 taxes) from businesses						
acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business					7 - 7	
activities not included in line 10b,					+	
whether or not the business is						
regularly carried on						-
or loss from the sale of capital						
assets (Explain in Part VI.)					1	
13 Total support. (Add lines 9, 10c, 11, and 12.)			V			200
14 First five years. If the Form 990 is for						zation,
check this box and stop here						
Section C. Computation of Public					1	
15 Public support percentage for 2018 (lir						%
16 Public support percentage from 2017					16	%
Section D. Computation of Inves	-				1 . 1	
17 Investment income percentage for 201						%
18 Investment income percentage from 2						%
19a 33 1/3% support tests - 2018. If the o	organization did r	not check the box	on line 14, and line	e 15 is more than	33 1/3%, and line	17 is not
more than 33 1/3%, check this box an	d <b>stop here</b> . The	organization quali	fies as a publicly s	supported organi	zation	▶□
b 33 1/3% support tests - 2017. If the o	organization did i	not check a box or	line 14 or line 19	a, and line 16 is r	nore than 33 1/3%,	and
line 18 is not more than 33 1/3%, chec	k this box ands	top here. The orga	nization qualifies	as a publicly supp	ported organization	<b></b> ▶□
20 Private foundation. If the organization						ACCOUNT OF THE RESIDENCE OF THE PERSON OF TH

### 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).
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.
- b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.
- 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.)

		Yes	No
	1.		
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	3b		
	3c		
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	9b		
	9c		
	10a		
	10b	0-EZ	2413

11 Has the organization accepted a gift or contribution from any of the following persons?  a A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?  b A family member of a person described in (a) above?  c A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.  Section B. Type I Supporting Organizations  Yes No.  1 Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Part VI, how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.  2 Did the organization operate for the benefit of any supported organization other than the supported organization organization(s) that operated, supervised, or controlled the supporting organization.  2 Did the organization benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.  2 Section C. Type II Supporting Organizations  Yes No.  1 Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).	Pa	rt IV   Supporting Organizations <sub>(continued)</sub>			
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 organizations  b. A family member of a person described in (e) above?  c. A 35% controlled entity of a person described in (e) above?  1 Did the directors, mustees, or memberahip 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 littings during the tax year. Why, "esemble in Part VI how the supported organization effective) organization, describe how the powers to appoint and/or sensor effective) organization, effective) organization, describe how the powers to appoint and/or sensor effectives or trustees at all times during the tax year.  2 Did the organization operated for the herefit of any supported organization, describe how the powers to appoint and/or sensor effectives or trustees were allocated among the supported organization, describe how the powers to appoint and/or sensor effectives or trustees at this the supported organization, describe how the powers to appoint and/or sensor effectives or trustees at the supported organization, describe how the powers to appoint and/or sensor effectives or trustees were allocated among the supported organization operated, supported organization operated, supported organization operated, supporting organization.  2 Did the organization powers of the benefit of any supported organization operated in the supported organization operated.  2 Section C. Type II Supporting Organizations  or trustees of each of the organization's directors or trustees during the tax year also a majority of the directors or trustees during the tax year also a majority of the directors or trustees during the tax year also a majority of the directors or trustees of a supported organization operated organization operated and the supported organization operated organization operated organization operated organization operated organization operat				Yes	No
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b. A family member of a person described in (a) above?  A 58% controlled entity of a person described in (a) of (b) above?  1 Did the directors, frustees, 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? W 17% of earch to Part I for the supported organization's directors or trustees at all times during the tax year. W 17% of earch to Part I for the supported organization's directors or trustees at all times during the tax year. W 17% of earch to Part I for the supported organization's describe but the powers to appoint and/or remove directors or trustees at anong the supported organization, describe but the powers to appoint and/or remove directors or trustees at among the supported organization operated, supported organization operated in the supported organization operated among the supported organization operated in the supported organization operated organization operated in the supported organization operated organiz	а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)			
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Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supporting organizations  Section C. Type II Supporting Organizations  1 Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).  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 filled as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?  2 Were any of the organization's officers, directors, or trustees either (ii) appointed or elected by the supported organization's governing on the governing body of a supported organization's Plan Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).  3 By reason of the relationship described in (2), did the organization's supported organization's have a significent voice in the organization's investment policies and in directing the use of the organization's supported organization's support the organization's supported organization's as a supported organization's larged in this regard.  Section E. Type III Functionally Integrated Supporting Organizations  1 Check the box next to the method that the organization used to satisfy the integral Part Test during the yea(see instructions).  3 The organization is the parent of each of its supported organizations. Complete in a 3 below.  5 Did the organization supported organization's activities during the tax year dir	2	Did the organization operate for the benefit of any supported organization other than the supported			
Section C. Type II Supporting Organizations    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 provided or management of the supporting organization was vested in the same persons that controlled or managed the supported organization was vested in the same persons that controlled or managed the supported organization was vested in the same persons that controlled or managed the supported organization was vested in the same persons that controlled or managed the supported organization was vested in the same persons that controlled or managed the supported organization was vested in the same persons that controlled or managed the supported organization to the vested in the same persons that controlled or managed the supported organization to the vested in the supported organization provided to each of its supported organizations, by the last day of the fifth month of the organization is a construction of the same that was most recently filed as of the date of notification, and (iii) copies of the organization is poverning documents in effect on the date of notification, to the extent not previously provided?  2 Were any of the organization of filens, directors, or trustees estent (i) appointed or delected by the supported organization (ii) or (ii) serving on the governing body of a supported organization organization (iii) part to the organization organization maintained a close and continuous working relationship with the supported organization (ii) or the organization is expended organization is supported organizations in come or assests at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organization's supporte		organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
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The organization supported a governmental entity, Describe in Part VI how you supported a government entity (see instructions).  Activities Test. Answer (a) and (b) below.  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.  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.  Parent of Supported Organizations. Answer (a) and (b) below.  Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in Part VI.  Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each		그들 그렇게 어느리 사람이 되었다. 아이에 나가 나가 아이를 하는 것이 되었다. 그렇게 그렇지 않는데 아이에 되었다는 것 같아요			
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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.  5 Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each		그렇게 하는데 하는데 하면 하는데 되는데 하는데 하는데 하는데 하는데 하는데 하는데 하는데 하는데 하는데 하	-0		
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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			2b		
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					
b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each	а		1		
			3a		
	b				

	other Type III non-functionally integrated supporting organizations must co	Inbiere Se	Cuons A unough E.	
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Yea (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Yea (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):			
а	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		
е	Discount claimed for blockage or other factors (explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d	-3		
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions)	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by .035	6		
7	Recoveries of prior-year distributions	7		7
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion 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		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		

Schedule A (Form 990 or 990-EZ) 2018

ecti	on D - Distributions			Current Year
1	Amounts paid to supported organizations to accomplish exe	mpt purposes	π.	
2	Amounts paid to perform activity that directly furthers exemp	t purposes of supported		
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purpose	es of supported organization	S	
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	ne organization is responsive		
	(provide details in Part VI). See instructions.			
9	Distributable amount for 2018 from Section C, line 6			
0	Line 8 amount divided by line 9 amount			
		(i)	(ii)	(iii)
ecti	on E - Distribution Allocations (see instructions)	Excess Distributions	Underdistributions Pre-2018	Distributable Amount for 2018
1	Distributable amount for 2018 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2018 (reason-			
	able cause required- explain in Part VI). See instructions.			
3	Excess distributions carryover, if any, to 2018			
а	From 2013			
b	From 2014			
C	From 2015			
d	From 2016			
е	From 2017			
	Total of lines 3a through e			
_	Applied to underdistributions of prior years			
	Applied to 2018 distributable amount			
-	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.			
	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	1		
	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.	į		
8	Breakdown of line 7:			
-	Excess from 2014	*		
	Excess from 2015			
	Excess from 2016			
	Excess from 2017			
	Excess from 2018			

Schedule A (Form 990 or 990-EZ) 2018

Schedule A	(Form 990 or 990-EZ) 2018 KARS 4 KIDS	INC.	22-3746050 Page 8
Part VI	Supplemental Information. Provide the Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6	explanations required by Part II, line 10; Part II, line 17a : 5, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines	or 17b; Part III, line 12; 1 and 2; Part IV, Section C,
	Section D, lines 2 and 3; Part IV, Section D, lines 2 and 3; Part IV, Section D, lines 5, 6, and 8; and Part V, Section E (See instructions.)	ection E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part E, lines 2, 5, and 6. Also complete this part for any additi	V, Section B, line 1e; Part V, onal information.
-			
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## 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

KARS 4 KIDS INC.

Employer identification number 22-3746050

		(a) Donor advised funds	<b>(b)</b> Fu	inds and other accounts
1	Total number at end of year			
2	Aggregate value of contributions to (during year)			
3	Aggregate value of grants from (during year)			
4	Aggregate value at end of year			
5	Did the organization inform all donors and donor advisors in wr			
	are the organization's property, subject to the organization's ex			Yes N
6	Did the organization inform all grantees, donors, and donor adv			
	for charitable purposes and not for the benefit of the donor or	음식 그렇다 ^^ 나를 하고싶다. 그런 얼마 나는 아니라 이 그리고 하는데 되었다. 아이지 아이지 않는데	The state of the s	
130	impermissible private benefit?			Yes N
'a	rt II Conservation Easements. Complete if the organ		, Part IV, line	7.
1	Purpose(s) of conservation easements held by the organization			
	Preservation of land for public use (e.g., recreation or edu			
	Protection of natural habitat	Preservation of a ce	rtified historic	structure
	Preservation of open space			to National Control of the Very
2	Complete lines 2a through 2d if the organization held a qualified	d conservation contribution in the form	n of a conser	
	day of the tax year.			Held at the End of the Tax Ye
	Total number of conservation easements		1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1	
b			A SA A S	
C	Number of conservation easements on a certified historic struc		A 49 A 94 CO 3	
d	Number of conservation easements included in (c) acquired aft listed in the National Register		product and the second of	
3	Number of conservation easements modified, transferred, release			on during the tax
	year▶			
4	Number of states where property subject to conservation ease	ment is located		
5	Does the organization have a written policy regarding the perio	dic monitoring, inspection, handling o	f	
	violations, and enforcement of the conservation easements it h	olds?		Yes N
6	Staff and volunteer hours devoted to monitoring, inspecting, ha	andling of violations, and enforcing co	nservation ea	asements during the year
7	Amount of expenses incurred in monitoring, inspecting, handling	ng of violations, and enforcing conserv	ation easem	ents during the year
	<b>&gt;</b> \$			
8	Does each conservation easement reported on line 2(d) above	satisfy the requirements of section 17	'0(h)(4)(B)(i)	
	and section 170(h)(4)(B)(ii)?			Yes N
9	In Part XIII, describe how the organization reports conservation	easements in its revenue and expens	se statement	, and balance sheet, and
	include, if applicable, the text of the footnote to the organization	n's financial statements that describe	s the organiz	ation's accounting for
	conservation easements.			
a	rt III Organizations Maintaining Collections of	Art, Historical Treasures, or (	Other Sim	ilar Assets.
	Complete if the organization answered "Yes" on Form 9			
1a	If the organization elected, as permitted under SFAS 116 (ASC	958), not to report in its revenue state	ement and ba	alance sheet works of art,
	historical treasures, or other similar assets held for public exhib	ition, education, or research in further	rance of publ	ic service, provide, in Part XII
	the text of the footnote to its financial statements that describe	es these items.		
b	If the organization elected, as permitted under SFAS 116 (ASC	958), to report in its revenue stateme	nt and baland	ce sheet works of art, historic
	treasures, or other similar assets held for public exhibition, edu	cation, or research in furtherance of p	ublic service	, provide the following amour
	relating to these items:			
	(i) Revenue included on Form 990, Part VIII, line 1			\$
				\$
2	If the organization received or held works of art, historical treas	ures, or other similar assets for financ	ial gain, provi	ide
	the following amounts required to be reported under SFAS 116	(ASC 958) relating to these items:		
а	Revenue included on Form 990, Part VIII, line 1			\$
100	Assets included in Form 990, Part X		-	\$

Pa	rt III   Organizations Maintaining C	collections of Ar	t, Historical T	reasures, or	Other S	Similar Ass	ets(conti	inued)	
3	Using the organization's acquisition, accessi	on, and other records	s, check any of the	following that a	are a signi	ficant use of it	s collection	on item	18
	(check all that apply):								
а	Public exhibition	d	Loan or ex	change program	s				
b	Scholarly research	e	Other	21.0019.2	2				
C	Preservation for future generations								_
4	Provide a description of the organization's co	ollections and evolain	how they further	the organization	'e evemn	nurnose in P	art XIII		
5	During the year, did the organization solicit o			and the second second		and a second and also all	art Am.		
3	to be sold to raise funds rather than to be ma		and the second of the second	and a read of the second of			Yes		No
Pa	rt IV Escrow and Custodial Arran							r	INU
9/104	reported an amount on Form 990, Pa	프라이 아이들의 역사들은 사람이 걸어 먹었다.	te ii tile Organizati	on answered Ti	es on ro	iiii 990, Fait i	v, iii le 5, c	II.	
1a	Is the organization an agent, trustee, custod		And the second second second second						
	on Form 990, Part X?			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	.,,.,.,.,.,		Yes	-	No
b	If "Yes," explain the arrangement in Part XIII	and complete the fol	lowing table:		- 1				
							Amour	nt	
C	Beginning balance					1c			
d	Additions during the year				ummini	1d			
е	Distributions during the year			**************	**********	1e			
f	Ending balance					1f			
2a	Did the organization include an amount on F						Yes		No
b	If "Yes," explain the arrangement in Part XIII.	Check here if the ex	planation has bee	n provided on Pa	art XIII				
	rt V Endowment Funds. Complete i								
		(a) Current year	(b) Prior year	(c) Two years t		Three years bad	k (e) Fou	r years	back
1a	Beginning of year balance								
	Contributions						7		_
c	Net investment earnings, gains, and losses						7		_
- 73	Grants or scholarships								_
d	그렇게 하루 기계를 잃었다. 그는 사람들은 아들은 아들은 아들은 아들은 아들은 아이를 하게 되었다. 이 사람이 아니지 않다.			+	_				_
e	Other expenditures for facilities								
- 2	and programs						4		_
1	Administrative expenses			-			-		_
g	End of year balance		and the second second				4		<u>_</u>
2	Provide the estimated percentage of the cur	The state of the s	e (line 1g, column	(a)) held as:					
а	Board designated or quasi-endowment		_%						
		%							
C	Temporarily restricted endowment -	%							
	The percentages on lines 2a, 2b, and 2c sho	uld equal 100%.							
За	Are there endowment funds not in the posse	ssion of the organiza	tion that are held	and administere	d for the	organization			
	by:						7	Yes	No
	(i) unrelated organizations					30.55.450.55.50.55.50.	3a(i)		
	(ii) related organizations								
b	If "Yes" on line 3a(ii), are the related organiza								
4	Describe in Part XIII the intended uses of the	e organization's endo	wment funds.						
Pa	rt VI Land, Buildings, and Equipm	nent.							
	Complete if the organization answere	d "Yes" on Form 990	, Part IV, line 11a.	See Form 990, F	art X, line	e 10.			
	Description of property	(a) Cost or ot basis (investm	her (b) Cos	t or other (other)	(c) Accu	mulated	(d) Boo	ok valu	е
1a	Land	W. I							
b	Buildings								
c	Leasehold improvements		1:	25,000.		2,976.	12	2,0	24.
172	Equipment			72,993.		6,778.		6,2	
		4-11		15,704.		5,704.		- / -	0.
	Other				-	- /	12	8,2	
rota	i. Add iines Ta through Te. (Column (d) must e	quai i omi 990, Fall	, column (b), line	100.)			- 4	J , A	

Schedule D (Form 990) 2018

Schedule D (Form 990) 2018 KARS 4 KIDS	INC.		22-3746050 Page
Part VII Investments - Other Securities.			
Complete if the organization answered "Yes" of (a) Description of security or category (including name of security)	(b) Book value		ne 12. Cost or end-of-year market value
(1) Financial derivatives	(b) Book Value	(b) Woulded of Valuation.	esser of one or your market value
(2) Closely-held equity interests			
(3) Other			
(A)			
(B)	-		
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)			
Part VIII Investments - Program Related.			0.36
Complete if the organization answered "Yes" o	on Form 990, Part IV, line (b) Book value		ne 13. Cost or end-of-year market value
	(b) Book value	(c) Welliod of Valuation.	oost of end-or-year market value
(1)			
(2)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ▶			
Part IX Other Assets.			
Complete if the organization answered "Yes" of		a 11d. See Form 990, Part X, li	
	escription		(b) Book value
DOMATION DOMESTICATION TARK	FOR SALE		3,999,154
(2) DONATED REAL ESTATE - INVE	ESTMENT		8,885,906 153,985
(4) DONATED VEHICLES - HELD FO	ים פאוד		8,474,144
	A SALE		8,474,144
(5)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line	15.)		21,513,189
Part X Other Liabilities.			
Complete if the organization answered "Yes" of	on Form 990, Part IV, line	: 11e or 11f. See Form 990, Pa	art X, line 25.
(a) Description of liability		(b) Book value	
(1) Federal income taxes		1 - J. W.	
(2) SECURITY DEPOSITS	10	17,412.	
(3)	10.1		
(4)			

1.	(a) Description of liability	(b) Book value	
(1) Federal in	come taxes	the first of the second	
(2) SECUR	ITY DEPOSITS	17,412.	
(3)			
(4)			
(5)			
(6)			
(7)			
(8)		0 1	
(9)			
Total. (Column (b)	must equal Form 990, Part X, col. (B) line 25.)	17,412.	

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

Pai	rt XI Reconciliation of Revenue per Audited Financial	Statements With Reven	ue per Return.	
	Complete if the organization answered "Yes" on Form 990, Part I	V, line 12a.	.,000	
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:		77327373	
а	Net unrealized gains (losses) on investments	2a		
b	Donated services and use of facilities	2b	- 1	
C	Recoveries of prior year grants			
d	Other (Describe in Part XIII.)			
е	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1			
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	1 1		
	Investment expenses not included on Form 990, Part VIII, line 7b		-	
b	Other (Describe in Part XIII.)	4b		
C	Add lines 4a and 4b			
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line			
Pa	rt XII Reconciliation of Expenses per Audited Financial	The state of the s	nses per Return.	
	Complete if the organization answered "Yes" on Form 990, Part I			
1	Total expenses and losses per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	TF At II		
	Donated services and use of facilities		-	
b	Prior year adjustments			
C	Other losses			
d	Other (Describe in Part XIII.)			
	Add lines 2a through 2d			
3	Subtract line 2e from line 1		3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	00		
	Investment expenses not included on Form 990, Part VIII, line 7b			
b	Other (Describe in Part XIII.)			
	Add lines 4a and 4b			
5 Do	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, liner XIII   Supplemental Information.	ie 18.)	5	
ines	2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provid	de any additional information.		
_				

## SCHEDULE F (Form 990)

Department of the Treasury Internal Revenue Service

## Statement of Activities Outside the United States

➤ Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16.

Attach to Form 990.

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

2018
Open to Public Inspection

Name of the organization

Employer identification number

KA	RS 4 KIDS INC				22-37460	50					
		rmation on A	ctivities Ou	tside the United States, Complete	e if the organization answered	"Yes" on					
	Form 990, Part IV	V, line 14b.									
1	For grantmakers. Does	the organization	n maintain recor	ds to substantiate the amount of its gran	ts and other assistance,						
	the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes										
2	For grantmakers. Desc	ribe in Part V the	organization's	procedures for monitoring the use of its	grants and other assistance ou	itside the					
	United States.										
3	Activities per Region. (T	he following Part	to the contract of the contrac	an be duplicated if additional space is ne		1					
	(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in the region	(d) Activities conducted in the region (by type) (such as, fundraising, pro- gram services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in the region	(f) Total expenditures for and investments in the region					
_											
	Subtotal	0	0			0.					
	Total from continuation sheets to Part I Totals (add lines 3a	0				0.					
	and 3b)	. 0	.0			1					

chedule F (Form 990) 201	g nang	4 KIDS INC	•		44-31	40020		Page
Control of the contro			es Outside the United States uplicated if additional space is		rganization answered	d "Yes" on Form 9	990, Part IV, line 15, f	or any
1 (a) Name of organization	( <b>b)</b> IRS code section and EIN (if applicable)		(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FM appraisal, other)
		MIDDLE EAST	OUTREACH	141,000	WIRE TRANSFER	0.		
					imi			

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

Part III can be duplicated if ac	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of noncash assistance	(g) Description of noncash assistance	(h) Method of valuation (book, FMV, appraisal, othe
			H				

à.	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign		
	Corporation (see Instructions for Form 926)	Yes	X No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization		
	may be required to separately file Form 3520, Annual Return To Report Transactions With Foreign		
	Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign		
	Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; don't file with Form 990)	Yes	X No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? # "Yes,"		
	the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect To		
	Certain Foreign Corporations (see Instructions for Form 5471)	Yes	X No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a		
	qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621,		
	Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund		
	(see Instructions for Form 8621)	Yes	X No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? /f "Yes,"		
	the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain		
	Foreign Partnerships (see Instructions for Form 8865)	Yes	X No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If		
	"Yes," the organization may be required to separately file Form 5713, International Boycott Report (see		
	Instructions for Form 5713; don't file with Form 990)	Yes	X No

#### SCHEDULE I (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

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

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

Attach to Form 990.

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

2018

Open to Public Inspection

Employer identification number

Schedule I (Form 990) (2018)

KARS 4 KI	DS INC.					4.	22-3746050
Part I General Information on Grants a	and Assistance						
Does the organization maintain records criteria used to award the grants or assi	stance?			riariariariariariariariariaria	Section 1 to the case and a control of the case of the	the state of the s	The state of the s
2 Describe in Part IV the organization's pr	ocedures for mon	itoring the use of gran	t funds in the Unite	d States.			
Circuito dila Strici / teoletarico te				[사람이 [19] 전 그리고 [1] [1] 나 그 그리	anization answered "	Yes" on Form 990, Part	: IV, line 21, for any
recipient that received more than		140			(f) Method of	To As About a Section and	4.75
(a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
OORAH INC. 1805 SWARTHMORE AVENUE LAKEWOOD, NJ 08701	22-3746051	501(C)(3)	32,594,159.	o.			SEE SCHEDULE I, PART IV
2 Enter total number of section 501(c)(3) a 3 Enter total number of other organization		The second secon					

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

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
	Trodipionio	odon grane	- Custi decisianos		
				1	
			+	i i	
				4	
Part IV Supplemental Information. Provide the information	equired in Part I, line	e 2; Part III, colum	n (b); and any other a	dditional information.	
PART I, LINE 2:					
KARS 4 KIDS MONITORS AND REVIEWS	OORAH'S II	NTERNAL C	ONTROLS TO	ENSURE THAT	
THEY OPERATE AND DISTRIBUTE FUNDS	IN ACCOR	DANCE WITH	H THE ORGAN	IZATION'S	
OBJECTIVES. KARS 4 KIDS ALSO REV	FWS THE DI	מווו. דים הדי	ANI AMMITAT.	AIIDTT	_
		JOHID OI	AN ANNOAL	AUDII	
PERFORMED BY INDEPENDENT AUDITORS					
PART II, LINE 1(H):					
FUNDED PROGRAMS INCLUDE: SCHOOL I	PLACEMENT A	AND TUITIO	ON ASSISTAN	CE,	
A 15-30-10 (15-10-10 M 15-10 A 15-10 M					

### SCHEDULE M (Form 990)

**Noncash Contributions** 

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.

Attach to Form 990.

KARS 4 KIDS INC.

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

Name of the organization

Employer identification number 22-3746050

Pai	Types of Property	(a) Check if applicable	(b) Number of contributions or	(c) Noncash contribution amounts reported on	Method of noncash contri		_	S
4	Art - Works of art		items contributed	Form 990, Part VIII, line 1g				
2	Art - Historical treasures							
3	Art - Fractional interests							
4	Books and publications							
5	Clothing and household goods			E Ator Fix	LIALL TO	37.00	-	J
6	Cars and other vehicles	X	143,062	70,468,814.	VALUED AT	SALES	5 P	RIC
7	Boats and planes	X	2,005	1,182,491.	VALUED AT	SALES	5 P	RIC
8	Intellectual property							
9	Securities - Publicly traded							
10	Securities - Closely held stock				1			
11	Securities - Partnership, LLC, or trust interests							
12	Securities - Miscellaneous				T			
13	Qualified conservation contribution - Historic structures							
14	Qualified conservation contribution - Other		E -21	1	Ta angular			
15	Real estate - Residential	X	19		NRV			
16	Real estate - Commercial	X	12	1,348,600.	NRV			
17	Real estate - Other	X	118	2,335,120.	NRV			
18	Collectibles							
19	Food inventory							
20	Drugs and medical supplies							
21	Taxidermy							
22	Historical artifacts							
23	Scientific specimens							
24	Archeological artifacts							
25	Other • ()							
26	Other ()	ļ			D.E.			
27	Other • ()							
28	Other (	11			1			
29	Number of Forms 8283 received by the organ for which the organization completed Form 82							
							Yes	No
30a	During the year, did the organization receive by							
	must hold for at least three years from the dat					200		х
h	exempt purposes for the entire holding period If "Yes," describe the arrangement in Part II.	Caratatata	£0.264.04040404040404	*************		. 30a		25
31	Does the organization have a gift acceptance	policy that n	earlires the review	of any nonstandard contrib	utions?	31		х
	Does the organization hire or use third parties				.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
	contributions?			cit, process, or seir noricasi		32a	Х	
b	If "Yes," describe in Part II.							
33	If the organization didn't report an amount in describe in Part II.	column (c) fo	r a type of propert	y for which column (a) is ch	ecked,			

Schedule M (Form 990) 2018

Schedule M (Form 990) 2018 KARS 4 KIDS INC.	22-3746050 Page 2
Part II Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and is reporting in Part I, column (b), the number of contributions, the number of items received, or a contributions.	33, and whether the organization
this part for any additional information.	
SCHEDULE M, LINE 32B:	
THE ORGANIZATION UTILIZES THIRD PARTY TOWING COMPANIES	AND AUCTION
HOUSES TO TOW, EVALUATE, AND SELL OR SCRAP DONATED VEHI	CLES.
	-

### SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

# Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information. Attach to Form 990 or 990-EZ.

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

Open to Public Inspection

Employer identification number

OMB No. 1545-0047

KARS 4 KIDS INC.

22-3746050

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION: KARS 4 KIDS, INC. FUNDS EDUCATIONAL AND YOUTH PROGRAMS FOR JEWISH CHILDREN AND FAMILIES IN COMMUNITIES ACROSS THE UNITED STATES. OUR FULL SUITE OF PROGRAMS INCLUDES SCHOOL PLACEMENT AND TUITION ASSISTANCE, MENTORSHIP AND EXTRACURRICULAR PROGRAMS, FAMILY RETREATS AND SUMMER OUR WIDE ARRAY OF SERVICES IS DESIGNED TO IMPACT EVERY ASPECT OF CAMPS. A CHILD'S DEVELOPMENT FROM THE ACADEMIC TO THE SOCIAL AND CULTURAL. THIS HOLISTIC APPROACH INVOLVES SCHOOL, FAMILY AND COMMUNITY WORKING TOGETHER TO DEVELOP OUR YOUTH INTO PRODUCTIVE AND RESPONSIBLE ADULTS.

FORM 990, PART VI, SECTION B, LINE 11B:

THE CPA FIRM SENDS THE CONTROLLER A DRAFT COPY OF THE COMPLETED FORM 990. CONTROLLER REVIEWS THE FORM 990 AND SENDS IT TO THE BOARD OF DIRECTORS FOR REVIEW AND COMMENTS. AFTER THE BOARD OF DIRECTORS REVIEWS THE FORM 990, THEY NOTIFY THE CONTROLLER OF ANY COMMENTS THEY HAVE REGARDING THE FORM THE CONTROLLER SENDS THE FORM 990 BACK TO THE CPA FIRM WITH THE COMMENTS. THE CPA FIRM INCORPORATES THOSE COMMENTS INTO THE FORM 990, AND SENDS A NEW DRAFT OF THE COMPLETED FORM 990 TO THE CONTROLLER FOR APPROVAL. AFTER THE CONTROLLER APPROVES THE FORM 990 HE NOTIFIES THE CPA FIRM AND A FINAL VERSION OF THE FORM 990 IS SENT TO THE PRESIDENT TO BE SIGNED AND FILED.

FORM 990, PART VI, SECTION B, LINE 12C:

EMPLOYEES AND BOARD MEMBERS ARE REQUIRED TO DISCLOSE ANY POTENTIAL CONFLICT OF INTEREST ON AN ANNUAL BASIS. FAILURE TO DISCLOSE A POTENTIAL CONFLICT OF OR ENGAGING IN A PRACTICE DETERMINED TO BE A CONFLICT OF INTEREST INTEREST, LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Schedule O (Form 990 or 990-EZ) (2018)

Name of the organization  KARS 4 KIDS INC.	Employer identification number 22-3746050
MAY RESULT IN DISCIPLINARY ACTION UP TO AND INCLUDING TER	RMINATION.
FORM 990, PART VI, LINE 17, LIST OF STATES RECEIVING COPY	OF FORM 990:
AL, KS, AR, CA, CO, CT, FL, GA, HI, IL, ND, KY, ME, MA, MI, MN, MS, NH, NJ,	NM, NY, NC, VA, WV, ND
FORM 990, PART VI, SECTION C, LINE 19:	
UPON REQUEST, THE PUBLIC MAY VIEW THE ORGANIZATION'S GOVE	RNING DOCUMENTS
AND RELATED DOCUMENTS AT THE ADDRESS LOCATED ON PAGE 1 OF	FORM 990.
PART XII LINE 2C	
THIS PROCESS HAS NOT CHANGED FROM PRIOR YEAR.	

### SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships

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

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

Open to Public Inspection

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

KARS 4 KIDS INC.

Employer identification number 22-3746050

(a)  Name, address, and EIN (if applicable)  of disregarded entity	<b>(b)</b> Primary activity	(c) Legal domicile (state of foreign country)	Legal domicile (state or Total income		(e) of-year ass	ets Direct	<b>(f)</b> controlling ntity	9
R4R LLC - 37-1763240			4					
1805 SWARTHMORE AVE			4.67	5.0		S		
LAKEWOOD, NJ 08701	REAL ESTATE	NEW JERSEY	1,037	,102.	14,025,0	15 KARS 4 KIDS	KARS 4 KIDS INC.	
k4k media llc - 81-3696626								
1805 SWARTHMORE AVE						40.00		
LAKEWOOD, NJ 08701	ADVERTISING	NEW JERSEY		0.		0 KARS 4 KIDS		
Part II Identification of Related Tax-Exempt Orgorganizations during the tax year.  (a)  Name, address, and EIN of related organization	ganizations. Complete if the organizat  (b)  Primary activity	ion answered "Yes" on Form 99  (c)  Legal domicile (state or foreign country)	0, Part IV, line 34, I (d) Exempt Code section	(e) Public ch status (if s	arity (	nore related tax-ex  (f)  Direct controlling entity	Section cont	g) \$12(b)(13 rolled ity?
		- I		15.5.752)			Yes	NO
OORAH INC - 22-3746051								
					=			
OORAH INC 22-3746051 1805 SWARTHMORE AVE LAKEWOOD, NJ 08701	OUTREACH	NEW JERSEY	501(C)3	LINE 7				х

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

(a) Name, address, and EIN of related organization	Primary activity  Legs domic (state foreign	(c) Legal domicile (state or	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionale allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?	(k) Percentag ownership
		country)					Yes	No	K-1 (Form 1065)	Yes No	
								Ц			
		ļ.	1:								
							111				
		P-					-	10-0			

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or toreign	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year	(h) Percentage ownership	Section 512(b)(13) controlled entity?	
		country)		or musiy		assets		Yes	No
				141			4		

Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

Yes

Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

a	Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity				1a		X
					1b	Х	
C	Gift, grant, or capital contribution from related organization(s)				1c		X
d	Loans or loan guarantees to or for related organization(s)				1d	X	
е	Loans or loan guarantees by related organization(s)				1e		X
f	Dividends from related organization(s)				1f		X
g	Sale of assets to related organization(s)	***			1g		X
h	Purchase of assets from related organization(s)				1h		X
į	Exchange of assets with related organization(s)				1i		X
j	Lease of facilities, equipment, or other assets to related organization(s)	manananananananana	nanananananananananananan		_1j.		X
k	Lease of facilities, equipment, or other assets from related organization(s)				1k		X
					10		X
					1m		X
	b Gift, grant, or capital contribution to related organization(s) c Gift, grant, or capital contribution from related organization(s) d Loans or loan guarantees to or for related organization(s) e Loans or loan guarantees by related organization(s)  f Dividends from related organization(s)  g Sale of assets to related organization(s) h Purchase of assets from related organization(s) i Exchange of assets with related organization(s) j Lease of facilities, equipment, or other assets to related organization(s) l Performance of services or membership or fundraising solicitations for related performance of services or membership or fundraising solicitations by related sharing of facilities, equipment, mailing lists, or other assets with related or Sharing of paid employees with related organization(s)  p Reimbursement paid to related organization(s) for expenses Reimbursement paid by related organization(s) for expenses r Other transfer of cash or property to related organization(s) c Other transfer of cash or property from related organization(s) lf the answer to any of the above is "Yes," see the instructions for information or related organization Name of related organization				1n	X	
р	Reimbursement paid to related organization(s) for expenses				1p		X
					1q		X
r	Other transfer of cash or property to related organization(s)				1r		X
					1s		X
					-		
		Transaction		(d) Method of determining amount in	olved	t	
1)							
2)							
3)		(					
AX.		4	- 1				
4)							_
5)	, T						
61	13						

Page 4

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

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

(a) Name, address, and EIN of entity	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	<b>(d)</b> Predominant income (related, unrelated, excluded from tax under sections 512-514)	(e) Are all partners sec. 501(c)(3) orgs.? Yes No	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations  Yes No	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	General or managing partner?	(k) Percentag ownership
						÷	- x - x -		<b>.</b>	
				-		*	* *		<b>.</b>	
							4 4			,
										10