Cumulative e-File History 2023

Federal

Tax Return 3856WW

Taxpayer
KIDS IN NEED OF DEVELOPMENT **EDUCATION AND**

Return Type 990

Account 575Y

Submitted Date	2024-10-15 21:33:01
Acknowledgement Date	2024-10-15 21:59:31
Status	Accepted
Submission ID	71247120242895000141

Form 990

Return of Organization Exempt From Income Tax

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

Do not enter social security numbers on this form as it may be made public.

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

OMB No. 1545-0047

2023

Open to Public Inspection

Department of the Treasury Internal Revenue Service

A F	or th	e 2023 cal	endar year, or tax year beginning		and en	ding						
ь.			C Name of organization KIDS IN	NEED OF DEVELOPMEN	NT ED	UCAT:	ION AN	D	D Em	oloyer ide	entification	number
В 0	Check if a	applicable:	RELIEF KINDER USA									
	Addre	ss change	Doing business as						75-	29990	028	
	Name	change	Number and street (or P.O. box if ma	ail is not delivered to street address)			Room/su	ıite	E Tele	phone n	umber	
	Initial	return	PO BOX 224846						(97	2)66	4-1991	<u>L</u>
	Final	return/terminated	City or town, state or province, cour	itry, and ZIP or foreign postal code					G Gro	ss receip	ts\$	
	Amen	ded return	DALLAS, TX 75222								2,165,	,295.
	Applic	ation pending	F Name and address of principal office	r: DALELL MOHMED				H(a) Is this		return for	Ye	es X No
			PO BOX 224846, DALLAS	S, TX 75222				H(b) Are all	linates? subordii	nates include	d? Ye	es No
ī	Tax-ex	xempt status:	') (insert no.) 4947(a	a)(1) or	5	527	If "No	," attacl	a list. See	instructions	i.
J	Webs	ite: WV	WW.KINDERUSA.ORG		,,,			H(c) Group	o exemp	tion numb	er	
ĸ	Form	of organization		Association Other		L Yea	ar of forma	tion: 2002				ile: TX
_	art I			1 1							<u> </u>	
	1		scribe the organization's mission o	r most significant activities: TF	IE ORG	GANT	ZATTON	PROVI	DES	ATD	TN THE	
Ф	-	•	AND DEVELOPMENT OF C									
anc			AL DISASTERS.	MILEDICEIV WITO THEE VIC	01110	01 .	1111	11110				
ern	2	Check this		discontinued its operations o	or disno	sed of	more	than 25%	of i	ts net	assets	
Activities & Governance	3		of voting members of the governing	•	•				1	3	assets.	5
ಶ	4		of independent voting members of t							4		<u>5</u>
ies	5		ber of individuals employed in cale							5		3
Ĭ₹	6									6		<u>5</u>
Act	72		ber of volunteers (estimate if necesselated business revenue from Part V							7a		
										7 b		
_	D	inet unitera	ated business taxable income from	Form 990-1, Part I, line 11				Prior Ye		7.0	Curren	t Voor
		Cantribust	and and grants (Dort VIII line 4h)							0		
ne	8		ons and grants (Part VIII, line 1h)					1,228			∠,⊥8	36,885.
Revenue	9		service revenue (Part VIII, line 2g)							NE		NONE
Re	10		nt income (Part VIII, column (A), line						5,01			5,467.
	11		enue (Part VIII, column (A), lines 5,						5,88			27,057.
	12		enue - add lines 8 through 11 (must					1,186				55,295.
	13		nd similar amounts paid (Part IX, colu					979	9,64		1,23	34,953.
	14		paid to or for members (Part IX, colu					104		NE		NONE
ses	15		other compensation, employee bene					182	182,176.			42,640.
Expenses	16 a		nal fundraising fees (Part IX, column				-		NC	NE		NONE
Ä	b		draising expenses (Part IX, column (_			_		
	17		enses (Part IX, column (A), lines 11						2,33			44,517.
	18		enses. Add lines 13-17 (must equal					1,354		_		22,110.
_ v	19	Revenue	less expenses. Subtract line 18 from	n line 12				-16				43,185.
ts o								nning of Cui		_	End of	
sser	20		ets (Part X, line 16)						3,07			98,286.
Net Assets or Fund Balances	21		lities (Part X, line 26)						6,40			<u>39,665.</u>
			s or fund balances. Subtract line 21	from line 20	<u> </u>			716	5,67	5.	1,25	58,621.
	rt II		ture Block									
Une	der pe	nalties of pe	rjury, I declare that I have examined the plete. Declaration of preparer (other than	is return, including accompanying s	schedules of which	and sta	atements, a	and to the b	est of	my knov	vledge and	belief, it is
	,	,	F (p p						
Sig	ın											
He		Signature of	of officer					Date	9			
116	16											
			nt name and title									
Dair	1	Print/Type	e preparer's name	Preparer's signature		Date		Check		if PTIN	l	
Paid	a parer	BRUCE	E BERNSTIEN					self-e	mploye	d P0	142434	<u> 1</u> 3
	parer Only	Firm's nan	ne BRUCE E BERNSTIE	N & ASSOCIATES				Firm's EIN				
_	. Ciliy	Firm's add	ress 10440 N CENTRAL EXPE	RESSWAY STE 1040 DALLAS, TX	75231			Phone no.		214	-706-0	840
Ma	y the	IRS discu	uss this return with the prepare	shown above? See instructi	ions.						X Yes	No
For	Pape	rwork Red	luction Act Notice, see the separat	e instructions.							_	90 (2023)

Form 990 (2023)
Part III Statement of Brogram Service Accomplishments

Pa	art III	Statement of Program Service Accomplishments	
1	Briefly	Check if Schedule O contains a response or note to any line in this Part III	
•	-	ORGANIZATION PROVIDES AID IN THE RELIEF AND DEVELOPMENT OF	
		DREN WHO ARE VICTIMS OF MAN-MADE AND NATURAL DISASTERS.	
		MIN THE VICTIME OF THE TEND THIS MITCHED DISTRICT.	
2	Did the	organization undertake any significant program services during the year which were not listed on the	
		orm 990 or 990-EZ?	X No
	If "Yes,"	describe these new services on Schedule O.	
3		e organization cease conducting, or make significant changes in how it conducts, any program	
		s?Yes	X No
		describe these changes on Schedule O.	
4		e the organization's program service accomplishments for each of its three largest program services, as mea es. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations t	
		es. Section 301(c)(3) and 301(c)(4) organizations are required to report the amount of grants and allocations t Il expenses, and revenue, if any, for each program service reported.	o omers
	(Code:) (Expenses \$ 1,393,523. including grants of \$ 1,176,948.) (Revenue \$)
		LOPMENT- WOMEN EMPOWERMENT COOPERATIVES AND FARMERS.	. ′
		ATION PROJECTS- SCHOOL AND MOBILE LIBRARY FOR CHILDREN;	
		ITIONAL MEALS FOR CHILDREN IN SHCOOLS.	
	(0.		`
4b	(Code:		.)
	<u>EMER</u>	GENCY RELIEF	
4c	(Code:) (Expenses \$ including grants of \$) (Revenue \$)
4d	Other p	rogram services (Describe on Schedule O.)	
	(Expens		
46	Total nr	rogram service expenses 1 462 203	

4e Total p JSA 3E1020 2.000 Form 990 (2023) Page **3**

Part	V Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
	complete Schedule A	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions.	2	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 similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors			21
Ū	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If			
	"Yes," complete Schedule D, Part I	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			21
•	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If</i> "Yes,"			
0	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	-		Λ
9	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		v
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments	9		X
10	or in 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,	10		Λ
11				
•	VII, VIII, IX, or X, as applicable. Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"			
а		11a	Х	
h	complete Schedule D, Part VI	па	Λ	
D		116		v
_	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
C	Did the organization report an amount for investments-program related in Part X, line 13, that is 5% or more	110		v
الم	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
a	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets	444		3.5
_	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.	11d	37	X
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	X	
ī	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	446	3.7	
40-	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	X	
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	40-	3.7	
	Schedule D, Parts XI and XII.	12a	X	
D	Was the organization included in consolidated, independent audited financial statements for the tax year? If	401		
40	"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	37	X
	Did the organization maintain an office, employees, or agents outside of the United States?	14a	X	
D	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	4.46	37	
45	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b	X	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or	45	3.7	
40	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	X	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other	4.0		
47	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on	4-		
40	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			
4-	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?			
	If "Yes," complete Schedule G, Part III	19		X
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	_		
	domestic government on Part IX. column (A), line 1? If "Yes." complete Schedule I, Parts I and II	21	1	X

Page 4

Part IV Checklist of Required Schedules (continued)

r all	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			
22	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23		Х
24 a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			21
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b			
	through 24d and complete Schedule K. If "No," go to line 25a	24a		Х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
	to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25 a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior			
	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?			
	If "Yes," complete Schedule L, Part I	25b		X
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%	26		v
27	controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part II.</i> Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key	26		X
21	employee, creator or founder, substantial contributor or employee thereof, a grant selection committee			
	member, or to a 35% controlled entity (including an employee thereof) or family member of any of these			
	persons? If "Yes," complete Schedule L, Part III	27		Х
28	Was the organization a party to a business transaction with one of the following parties? (See the Schedule L,			
	Part IV, instructions for applicable filing thresholds, conditions, and exceptions).			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			
	"Yes," complete Schedule L, Part IV	28a		Х
	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		X
С	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If			
	"Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in noncash contributions? <i>If "Yes," complete Schedule M</i>	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
24	conservation contributions? If "Yes," complete Schedule M	30		X
31 32	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If</i> "Yes," complete Schedule N, Part I Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If</i> "Yes,"	31		X
JZ	complete Schedule N, Part II	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	- T		- 21
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		Х
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		Х
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		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		Х
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and	31		Λ
55	19? Note: All Form 990 filers are required to complete Schedule O	38	Х	
Part		,		
	Check if Schedule O contains a response or note to any line in this Part V	<u></u>		
			Yes	No
	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 1a 6			
	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and			
	reportable gaming (gambling) winnings to prize winners?	1c	X	

Form 990 (2023) Page **5**

Par	Statements Regarding Other IRS Filings and Tax Compliance (continued)		Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 3			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х	
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b		
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over,			
	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	X	
b	If "Yes," enter the name of the foreign country BELGIUM			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods	_		
	and services provided to the payor?	7a		X
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	l _		
	required to file Form 8282?	7c		X
	If "Yes," indicate the number of Forms 8282 filed during the year	70		v
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e 7f		X
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7g		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7 9 7 h		
8	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the	711		
0	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
	Section 501(c)(7) organizations. Enter:			
	Initiation fees and capital contributions included on Part VIII, line 12			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders			
b	Gross income from other sources. (Do not net amounts due or paid to other sources			
	against amounts due or received from them.)			
	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			
	Section 501(c)(29) qualified nonprofit health insurance issuers.	420		
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note: See the instructions for additional information the organization must report on Schedule O.			
D	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			
•	The organization of the property of the proper			
	Enter the amount of reserves on hand	14a		X
	If "Yes," has it filed a Form 720 to report these payments? <i>If "No," provide an explanation on Schedule O</i>	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			
. •	excess parachute payment(s) during the year?	15		Х
	If "Yes," see the 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		Х
-	If "Yes," complete Form 4720, Schedule O.			
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities			
	that would result in the imposition of an excise tax under section 4951, 4952, or 4953?	17		
	If "Yes," complete Form 6069.			

Form 990 (2023) KIDS IN NEED OF DEVELOPMENT EDUCATION AND Part VI

75-2999028 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 on Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI

Sect	ion A. Governing Body and Management							
			Yes	No				
1a	Enter the number of voting members of the governing body at the end of the tax year							
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar							
b	committee, explain on Schedule O. Enter the number of voting members included on line 1a, above, who are independent. 1b 5							
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with							
_	any other officer, director, trustee, or key employee?	2		Х				
3	Did the organization delegate control over management duties customarily performed by or under the direct							
·	supervision of officers, directors, trustees, or key employees to a management company or other person?	3		Х				
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		Х				
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		Х				
6	Did the organization have members or stockholders?	6		Х				
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint							
·u	one or more members of the governing body?	7a		Х				
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,							
	stockholders, or persons other than the governing body?	7b		Х				
8	Did the organization contemporaneously document the meetings held or written actions undertaken during							
•	the year by the following:							
а	The governing body?	8a	Х					
b	Each committee with authority to act on behalf of the governing body?	8b	Х					
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at							
•	the organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9		Х				
Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)								
			Yes	No				
10a	Did the organization have local chapters, branches, or affiliates?	10a		X				
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,							
	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b						
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	X					
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990.							
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	X					
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give							
	rise to conflicts?	12b	X					
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"							
	describe on Schedule O how this was done	12c	X					
13	Did the organization have a written whistleblower policy?	13	X					
14	Did the organization have a written document retention and destruction policy?	14	X					
15	Did the process for determining compensation of the following persons include a review and approval by							
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?							
а	The organization's CEO, Executive Director, or top management official	15a		X				
b	Other officers or key employees of the organization	15b	X					
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.							
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement	4.0						
	with a taxable entity during the year?	16a		X				
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its							
	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the	401						
Cast	organization's exempt status with respect to such arrangements?	16b						
	on C. Disclosure							
17	List the states with which a copy of this Form 990 is required to be filed SEE SCHEDULE O	F /		044:				
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-7 (3)s only) available for public inspection. Indicate how you made these available. Check all that apply. X Own website X Another's website X Upon request Other (explain on Schedule O)	I (sec	tion 5	01(c)				
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of and financial statements available to the public during the tax year.	f inter	est p	olicy,				
20	State the name, address, and telephone number of the person who possesses the organization's books and record DALELL MOHMED PO BOX 224846 DALLAS, TX 75222	ls.						

9726641991

Form **990** (2023)

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, **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 the 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, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) 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.

See the instructions for the order in which to list the persons above.

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

(A) Name and title	(B) Average hours per week	Position (do not check more box, unless person i officer and a director				is both	an	(D) Reportable compensation from the	(E) Reportable compensation from related	(F) Estimated amount of other compensation
	(list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/ 1099-MISC/ 1099-NEC)	organizations (W-2/ 1099-MISC/ 1099-NEC)	from the organization and related organizations
(1) DALELL MOHMED	40.00									
EXECUTIVE DIRECTOR	NONE			Х				134,340.	NONE	5,378.
(2) DR. LAILA AL-MARAYATI	2.00									
CHAIR	NONE	Х		Х				NONE	NONE	NONE
(3) DR. BASIL ABDELKARIM	2.00									
DIRECTOR	NONE	X						NONE	NONE	NONE
(4) DR. JESS GHANNAM	2.00									
DIRECTOR	NONE	X						NONE	NONE	NONE
(5) DR. BASSIL KUBLAOUI	2.00									
SECRETARY	NONE	Х		Х				NONE	NONE	NONE
(6) MARGARET KING	2.00									
TREASURER	NONE	X		Х				NONE	NONE	NONE
_(7)										
(8)										
(9)										
(10)										
<u>(11)</u>										
(12)										
<u>(13)</u>										
(14)		-								

Form **990** (2023)

Form 990 (2023) Page **8**

Pa	rt VII Section A. Officers, Directors, Tru	ıstees, Ke	y Em	plc	ye	es,	and F	ligl	hest Compensat	ed Employ	yees (c	es (continued)							
	(A) Name and title	(B) Average hours per week (list any hours for	Average Position (do not check more tek (list any nours for Officer and a direct				is both or/trust	an ee)	(D) Reportable compensation from the	(E) Reporta compensati relate organiza	on from	(F) Estima amoun othe	t of ation						
		related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	(W-2/1099	-MISC)	from ti organiza and rela organiza	tion ted						
	Sub-total Total from continuation sheets to Part VII, Se	ection A						>	134,340. NONE		NONE NONE	5	,378. NONE						
	Total (add lines 1b and 1c)							► re	134,340.	\$100,000	NONE	5	,378.						
_	reportable compensation from the organization		1030		<u> </u>		1			φ100,000	O1								
3	Did the organization list any former offic employee on line 1a? If "Yes," complete Schedu											Ye	s No X						
4	For any individual listed on line 1a, is the sorganization and related organizations greindividual.	eater than	\$15	0,0	00?	. If	"Yes	,"	complete Schedu	le J for	such	4	X						
5	Did any person listed on line 1a receive or for services rendered to the organization? If "Ye	accrue co	mpen	sati	on f	from	any	un	related organization	on or indivi	idual	5	X						
Se	ction B. Independent Contractors																		
1	Complete this table for your five highest com compensation from the organization. Report c year.																		
	(A) Name and business add	lress							(B) Description of se	rvices	С	(C) ompensatio	n						

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization ► NONE

75-2999028

Form 990 (2023) KID Part VIII Statement of Revenue

1 (41		Check if Schedule O contains a respon	nse or note to an	ny line in this Part V	/III		
				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
ts,	1a	Federated campaigns 1a					
Contributions, Gifts, Grants, and Other Similar Amounts	b	Membership dues 1b					
פֿאַ	С	Fundraising events 1c					
fts, ar A	d	Related organizations 1d					
פֿיַפּ	е	Government grants (contributions) 1e					
ns, Sin	f	All other contributions, gifts, grants,					
er je		and similar amounts not included above . 1f	2,186,885.				
ğ	q	Noncash contributions included in					
di		lines 1a-1f 1g	\$				
g E	h	Total. Add lines 1a-1f		2,186,885.			
			Business Code				
Se	2a						
e ₹	b						
Sun	C						
ameve	d						
Program Service Revenue	e						
<u>L</u>	f	All other program service revenue					
	g	Total. Add lines 2a-2f		NONE			
	3	Investment income (including dividends,					
		other similar amounts)		5,467.			5,467.
	4	Income from investment of tax-exempt bond		NONE			
	5	Royalties		NONE			
		(i) Real	(ii) Personal				
	6a	Gross rents 6a					
	b	Less: rental expenses 6b					
	С	Rental income or (loss) 6c NONE	NONE				
	d	Net rental income or (loss)		NONE			
	7a	Gross amount from (i) Securities	(ii) Other				
		sales of assets					
		other than inventory 7a					
ne	b	Less: cost or other basis					
evenue		and sales expenses 7b					
	С	Gain or (loss)					
er	d	Net gain or (loss)		NONE			
Other R	8a	Gross income from fundraising					
0		events (not including \$					
		of contributions reported on line					
		1c). See Part IV, line 18 8a	NONE				
	b	Less: direct expenses	NONE				
	С	Net income or (loss) from fundraising events		NONE			
	9a	Gross income from gaming					
		activities. See Part IV, line 19 9a	NONE				
	b	Less: direct expenses	NONE				
	C	Net income or (loss) from gaming activities		NONE			
	10a	Gross sales of inventory, less	NONE				
		returns and allowances	NONE				
	b c	Less: cost of goods sold		NONE			
	_	Tet instance of theory from sales of inventory.	Business Code	NOINE			
ous }		LOSS ON CURRENCY EXCHANGE	900099	-28,065.			-28,065.
Miscellaneous Revenue	11a	OTHER INCOME	900099	1,008.	1,008.		20,000.
ella	b	<u> </u>		1,000.	1,000.		
Sc	c d	All other revenue					
Σ	e	Total. Add lines 11a-11d		-27,057.			
	12	Total revenue. See instructions		2,165,295.	1,008.		-22,598.

75-2999028

Part IX Statement of Functional Expenses

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

	Check if Schedule O contains a resp	onse or note to any line	e in this Part IX		
	not include amounts reported on lines 6b, 7b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21	NONE			
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22	NONE			
3	Grants and other assistance to foreign				
	organizations, foreign governments, and				
	foreign individuals. See Part IV, lines 15 and 16	1,234,953.	1,234,953.		
4	Benefits paid to or for members	NONE			
5	Compensation of current officers, directors,				
	trustees, and key employees	139,718.	108,637.	22,345.	8,736.
6	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	NONE			
7	Other salaries and wages	102,922.	80,027.	16,460.	6,435.
8	Pension plan accruals and contributions (include	NONE			
	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits	NONE			
10	Payroll taxes	NONE			
	Fees for services (nonemployees):	170177			
	Management	NONE		4 602	
	Legal	4,603.		4,603.	
	Accounting	15,340.		15,340.	
	Lobbying	NONE			
	Professional fundraising services. See Part IV, line 17	NONE			
	Investment management fees	NONE			
g	Other. (If line 11g amount exceeds 10% of line 25, column	26 564			26 564
40	(A), amount, list line 11g expenses on Schedule O.)	26,564. 4,129.			26,564 4,129
	Advertising and promotion	NONE			4,129
13	Office expenses	9,735.	7,569.	1,557.	609
14 15		NONE	7,303.	1,557.	007
16	Royalties	20,719.	16,110.	3,314.	1,295
17	Occupancy	15,556.	12,397.	1,373.	1,786
	Payments of travel or entertainment expenses	13,330.	12,357.	1,373.	1,700
	for any federal, state, or local public officials	NONE			
19	Conferences, conventions, and meetings	NONE			
	Interest	NONE			
	Payments to affiliates	NONE			
	Depreciation, depletion, and amortization	119.		119.	
	Insurance	3,043.		3,043.	
24					
	above. (List miscellaneous expenses on line 24e. If				
	line 24e amount exceeds 10% of line 25, column				
	(A), amount, list line 24e expenses on Schedule O.)				
а	FUNDRAISING	21,924.			21,924
b	FEES	13,651.	2,510.	2,954.	8,187
c	PRINTING	3,381.			3,381
d	DUES AND MEMBERSHIP	2,639.		2,639.	
е	All other expenses	3,114.		1,238.	1,876
	Total functional expenses. Add lines 1 through 24e	1,622,110.	1,462,203.	74,985.	84,922
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and				
	fundraising solicitation. Check here if following SOP 98-2 (ASC 958-720)				

Form 990 (2023) Page **11**

Balance Sheet Part X (A) Beginning of year End of year 1,185,777. 691,311. 1 2 NONE 2 Savings and temporary cash investments....... NONE 3 NONE 3 NONE 26,377. 82,033. 4 Accounts receivable, net 4 Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% NONE 5 NONE Loans and other receivables from other disqualified persons (as defined NONE under section 4958(f)(1)), and persons described in section 4958(c)(3)(B), NONE 6 NONE NONE NONE 8 NONE NONE 9 NONE 10 a Land, buildings, and equipment: cost or other 8,953 basis. Complete Part VI of Schedule D 10a 510. 629. 10c 16,314. 11 Investments - publicly traded securities ... SEE SCHEDULE O...... 16,423. 11 12 Investments - other securities. See Part IV, line 11 NONE 12 NONE 13 Investments - program-related. See Part IV, line 11. NONE 13 NONE 14,476. 14 14 NONE 15 13,862. 13,652. 15 763,078. 16 1,298,286. Total assets. Add lines 1 through 15 (must equal line 33) 16 17 19,415. 17 12,163. 18 NONE 18 15,200. 19 NONE 19 NONE Deferred revenue 20 NONE 20 NONE 21 Escrow or custodial account liability. Complete Part IV of Schedule D NONE 21 NONE 22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% NONE 22 NONE 23 Secured mortgages and notes payable to unrelated third parties NONE 23 NONE NONE 24 NONE 24 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X 26,988. 12,302. 25 26 Total liabilities. Add lines 17 through 25..... 39<u>,665</u>. 46,403 26 X Organizations that follow FASB ASC 958, check here Balances and complete lines 27, 28, 32, and 33. 27 Net assets without donor restrictions 716,675 27 1,258,621. Net assets with donor restrictions. 28 NONE 28 NONE Fund Organizations that do not follow FASB ASC 958, check here and complete lines 29 through 33. Assets or 29 Capital stock or trust principal, or current funds 29 30 Paid-in or capital surplus, or land, building, or equipment fund 30 31 Retained earnings, endowment, accumulated income, or other funds 31 Net 32 716,675. 32 1,258,621. Total liabilities and net assets/fund balances.... 33 763,078. 33 1,298,286.

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Form **990** (2023)

Form 990 (2023) Page **12**

Part .	XI Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI					
1	Total revenue (must equal Part VIII, column (A), line 12)	1		2,1	65,	<u> 295</u> .
2	Total expenses (must equal Part IX, column (A), line 25)	2		1,6	22,	<u>110</u> .
3	Revenue less expenses. Subtract line 2 from line 1	3		5	43,	<u> 185</u>
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4		7	16,	<u>675</u>
5	Net unrealized gains (losses) on investments	5			4,	<u>709</u> .
6	Donated services and use of facilities	6				
7	Investment expenses	7				
8	Prior period adjustments	8			-5,	<u>948</u>
9	Other changes in net assets or fund balances (explain on Schedule O)	9				
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line					
	32, column (B))	10		<u>1,2</u>	58,	<u>621</u> .
Part	·					
	Check if Schedule O contains a response or note to any line in this Part XII					
			ſ		Yes	No
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," ex	крlain	on			
	Schedule O.					
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?			2a		_X_
	If "Yes," check a box below to indicate whether the financial statements for the year were cor	npiled	or			
	reviewed on a separate basis, consolidated basis, or both:					
	Separate basis Consolidated basis Both consolidated and separate basis					
b	Were the organization's financial statements audited by an independent accountant?			2b	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audit	ted or	ı a 📗			
	separate basis, consolidated basis, or both:					
	X Separate basis Consolidated basis Both consolidated and separate basis					
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for over	ersight	of			
	the audit, review, or compilation of its financial statements and selection of an independent accounta	nt?		2c	X	
	If the organization changed either its oversight process or selection process during the tax year, e	xplain	on			
	Schedule O.					
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set fo					
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?			3a		_X_
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not und	lergo	the			
	required audit or audits, explain why on Schedule O and describe any steps taken to undergo such a	udits -		3b		

SCHEDULE A (Form 990)

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.

Name of the organization $\,$ KIDS IN NEED OF DEVELOPMENT EDUCATION AND

OMB No. 1545-0047 Inspection

Employer identification number

Department of the Treasury Internal Revenue Service

Attach to Form 990 or Form 990-EZ.

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

REI	LIE	F KINDER USA						999028
Pa	rt I	Reason for Public Cha	arity Status. (All	organizations must	comple	ete this p	part.) See instruction	ns.
The	orga	anization is not a private fou	ndation because it	is: (For lines 1 through	gh 12, ch	eck only	one box.)	
1		A church, convention of chu	urches, or associa	tion of churches desci	ribed in s	ection 1	70(b)(1)(A)(i).	
2	Щ	A school described in section	on 170(b)(1)(A)(ii)	. (Attach Schedule E	(Form 99	90).)		
3	Щ	A hospital or a cooperative	•	•		٠,		
4		A medical research organiz	-	conjunction with a hos	spital de	scribed in	n section 170(b)(1)(A)	(iii). Enter the
		hospital's name, city, and st						
5		An organization operated f		a college or universit	y owne	d or ope	erated by a governme	ental unit described in
_		section 170(b)(1)(A)(iv). (C	• •					
6	\vdash	A federal, state, or local go	_			-		46
7	X	An organization that norma	=	•	рроп п	om a go	vernmental unit of in	om the general public
Q		described in section 170(b) A community trust describe			Dort II \			
8 9	\vdash	An agricultural research org					Lin conjunction with a	land-grant college
3		or university or a non-land-	=			-		
		university:	grant concess or ag	grioditaro (oco motraot	10110). L		namo, ony, and otato o	Title college of
10		An organization that norma	Ilv receives (1) mo	ore than 331/3 % of its	support	from cor	ntributions, membersh	nip fees, and gross
		receipts from activities rela	ted to its exempt f	unctions, subject to c	ertain ex	ceptions	s; and (2) no more tha	n 331/3 % of its
		support from gross investmacquired by the organizatio						Dusinesses
11		An organization organized a					•	
12		An organization organized a	and operated exclu	sively for the benefit o	f, to per	form the	functions of, or to car	rry out the purposes of
		one or more publicly suppo	rted organizations	described in section 5	09(a)(1) or sect	ion 509(a)(2). See se	ction 509(a)(3). Check
		the box on lines 12a throug	h 12d that describ	es the type of suppor	ting orga	anization	and complete lines 1	2e, 12f, and 12g.
а		$oxedsymbol{oxed}$ Type I. A supporting orga	•	•	-		• , , ,	
		the supported organization	on(s) the power to	regularly appoint or e	lect a m	ajority of	the directors or truste	ees of the
		$_{_}$ supporting organization. $ m ``$	•	•				
b		☐ Type II. A supporting org	-				· · ·	
		control or management of			the sam	e persor	ns that control or mar	age the supported
		organization(s). You must	•					II - Cata master des 20
С		☐ Type III functionally integ						ily integrated with,
d		its supported organization Type III non-functionally		•				tod organization(s)
u		that is not functionally into			-			
		requirement (see instructi	-	-	-		· ·	a an attentiveness
е		Check this box if the orga	•	=				II. Type III
		functionally integrated, or					** **	, ,,,
f	En	ter the number of supported						
g	Pro	ovide the following information	on about the suppo	orted organization(s).				
	(i) N	ame of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-10	` '	organization ur governing	(v) Amount of monetary support (see	(vi) Amount of other support (see
				above (see instructions))		ment?	instructions)	instructions)
					Yes	No		
(A)								
(B)								
(C)								
(D)								
(E)								
(E)								
Tota	al							
								1

Schedule A (Form 990) 2023 Page 2

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.)

Sec	tion A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	937,084.	940,658.	1,312,257.	1,202,132.	2,186,885.	6,579,016.
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						NONE
3	The value of services or facilities furnished by a governmental unit to the organization without charge						NONE
4	Total. Add lines 1 through 3	937,084.	940,658.	1,312,257.	1,202,132.	2,186,885.	6,579,016.
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)						NONE
6	Public support. Subtract line 5 from line 4						6,579,016.
_	tion B. Total Support						0,3.3,010.
	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
7	Amounts from line 4	937,084.	940,658.	1,312,257.	1,202,132.	2,186,885.	6,579,016.
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources		1,073.	2,473.	4,078.	5,467.	13,091.
9	Net income from unrelated business activities, whether or not the business is regularly carried on						NONE
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						NONE
11	Total support. Add lines 7 through 10						6,592,107.
12	Gross receipts from related activities, etc. (s	see instructions) .				12	
13	First 5 years. If the Form 990 is for organization, check this box and stop here						
	tion C. Computation of Public Sup		_	4.4 1 (0)		4.4	00 00 %
14	Public support percentage for 2023 (lin		=			14	99.80 % 99.86 %
15	Public support percentage from 2022 331/3% support test - 2023. If the org					15	
16a							
b	box and stop here . The organization qu 331/3% support test - 2022. If the org			-			
D	this box and stop here. The organization						
172	10%-facts-and-circumstances test - 2	-		-			
1 <i>1</i> a	10% or more, and if the organization	_					
	Part VI how the organization meets					-	-
	organization			_			
h	10%-facts-and-circumstances test - 2						
D	15 is 10% or more, and if the organization	_					
	in Part VI how the organization meets					=	-
	organization			-	-	-	
18	Private foundation. If the organization						
	instructions						

Schedule A (Form 990) 2023 Page **3**

(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.)

Calendar year (or fiscal year beginning in) (a) 2019 (b) 2020 (c) 2021 (d) 2022 (e) 2023 (f) Total in the control of the contr	Sec	tion A. Public Support				<u> </u>	,	
1 of the, grate, contributions, and memberathic tools received, the or included any invasional grates 1, 2 of these receives from entireliating memberation in any activity that it related to the organization's two-eworphy purpose - or organization is two-eworphy purpose - organization's two-eworphy purpose - organization's two-eworphy purpose - or organization of its obhaid - or organization without otherge - organization organization without otherge - organization organization without otherge - organization of the organization of organization of organization of organization of organization of			(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
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2 Gross receipts from antinisons, mechanides addit or services performed, or finalities furnished in any activity that is related to the organization's ties exemply purpose. 3 Gross receipts from activities that are rot an unrelated that or business under section \$1.0 and unrelated that or business is under section \$1.0 and unrelated that or business is under section \$1.0 and unrelated that or business is under section \$1.0 and unrelated that or business is under section \$1.0 and unrelated business activities on the than disqualified persons. 6 Total, Add lines \$1 through \$5. 7a Amounts included on lines \$1. 2, and \$3 section \$6.00 and \$1.0 and \$1. and								
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translated in any activity that is related to the organization's tax exempt purpose		sold or services performed, or facilities						
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organization without charge	5	The value of services or facilities						
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Part IV Supporting Organizations

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

Section A	. All	Supporting	Organizations
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- Yes No 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. 1 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2). 2 Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer 3a lines 3b and 3c below. Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination. Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes." explain in Part VI what controls the organization put in place to ensure such use. Was any supported organization not organized in the United States ("foreign supported organization")? It "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below. Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations. Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes. 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes, answer lines 5b and 5c 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?
 - Substitutions only. Was the substitution the result of an event beyond the organization's control?
- Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- 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).
- Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? If "Yes," complete Part I of Schedule L (Form 990).
- Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
 - Did one or more disqualified persons (as defined on 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 on 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 line 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.)

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Part	Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and			
	11c below, the governing body of a supported organization?	11a		
b	A family member of a person described on line 11a above?	11b		
С	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c,			
Sacti	provide detail in Part VI. on B. Type I Supporting Organizations	11c		
occii	on B. Type roupporting organizations		Yes	No
				110
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers,			
	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 officers, directors, or trustees were allocated among the			
	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part			
	VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.			
Socti	on C. Type II Supporting Organizations	2		
Secu	on C. Type it Supporting Organizations		Yes	Nο
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors		103	110
•	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		
Secti	on D. All Type III Supporting Organizations			
_	Did the consideration of the constant of the constant of the constant of the CO constant		Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior			
	tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of			
	the organization's governing documents in effect on the date of notification, to the extent not previously			
	provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).	2		
2	By reason of the relationship described on line 2, above, did the organization's supported organizations have			
3	a significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		
Secti	on E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see ins	structio	ons).	
а	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
С	The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see			
2	Activities Test. Answer lines 2a and 2b below.		Yes	NO
а	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.	2a		
b	Did the activities described on line 2a, above, constitute activities that, but for the organization's			
D	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.	2b		
3	Parent of Supported Organizations. Answer lines 3a and 3b below.			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
_	trustees of each of the supported organizations? If "Yes" or "No," provide details in Part VI .	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes." describe in Part VI the role played by the organization in this regard.	3h		

Page 6 Schedule A (Form 990) 2023

Pa	art V Type III Non-Functionally Integrated 509(a)(3) Supporting Orga	nization	<u>S</u>			
1	1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI). See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E.					
Se	ection A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)		
1	Net short-term capital gain	1				
2	Recoveries of prior-year distributions	2				
3	Other gross income (see instructions)	3				
4	Add lines 1 through 3.	4				
5	Depreciation and depletion	5				
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6				
_7	Other expenses (see instructions)	7				
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8				
Se	ection B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)		
1	Aggregate fair market value of all non-exempt-use assets (see					
	instructions for short tax year or assets held for part of year):					
a	Average monthly value of securities	1a				
_	Average monthly cash balances	1b				
C	Fair market value of other non-exempt-use assets	1c				
	Total (add lines 1a, 1b, and 1c)	1d				
e	Discount claimed for blockage or other factors (explain in detail in Part VI):					
2	Acquisition indebtedness applicable to non-exempt-use assets	2				
3	Subtract line 2 from line 1d.	3				
4	Cash deemed held for exempt use. Enter 0.015 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 0.035.	6				
7	Recoveries of prior-year distributions	7				
8	Minimum Asset Amount (add line 7 to line 6)	8				
Se	ection C - Distributable Amount			Current Year		
1	Adjusted net income for prior year (from Section A, line 8, column A)	1				
2	Enter 0.85 of line 1.	2				
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3				
4		4				
5	Income tax imposed in prior year	5				
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6				
7			ited Type III supporting	n organization		
'	(see instructions).	ny miegla	ited Type in Supporting	y organization		

Schedule A (Form 990) 2023

Page 7

Schedule A (Form 990) 2023

Part	Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)					
Sect	Current Year					
1	Amounts paid to supported organizations to accomplish exempt purposes	1				
2	Amounts paid to perform activity that directly furthers exempt purposes of supported					
	organizations, in excess of income from activity	2				
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	3				
4	Amounts paid to acquire exempt-use assets	4				
5	Qualified set-aside amounts (prior IRS approval required - provide details in Part VI)	5				
6	Other distributions (describe in Part VI). See instructions.	6				
7	Total annual distributions. Add lines 1 through 6.	7				
8	Distributions to attentive supported organizations to which the organization is responsive					
	(provide details in Part VI). See instructions.	8				
9	Distributable amount for 2023 from Section C, line 6	9				
10	Line 8 amount divided by line 9 amount	10				

Section E - Distribution Allocations (see instructions)		(i) Excess Distributions	(ii) Underdistributions Pre-2023	(iii) Distributable Amount for 2023
1	Distributable amount for 2023 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2023			
	(reasonable cause required - explain in Part VI). See			
	instructions.			
3	Excess distributions carryover, if any, to 2023			
a	From 2018			
b	From 2019			
C	From 2020			
d	From 2021			
е	From 2022			
f	Total of lines 3a through 3e			
g	Applied to underdistributions of prior years			
h	Applied to 2023 distributable amount			
i	Carryover from 2018 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4	Distributions for 2023 from			
	Section D, line 7: \$			
a	Applied to underdistributions of prior years			
b	Applied to 2023 distributable amount			
C	Remainder. Subtract lines 4a and 4b from line 4.			
5	Remaining underdistributions for years prior to 2023, 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 2023. Subtract lines 3h			
	and 4b from line 1. For result greater than zero, explain in			
	Part VI. See instructions.			
7	Excess distributions carryover to 2024. Add lines 3j			
	and 4c.			
8	Breakdown of line 7:			
а	Excess from 2019			
b	Excess from 2020			
С	Excess from 2021			
d	Excess from 2022			
е	Excess from 2023			

Schedule A (Form 990) 2023

Schedule B (Form 990)

Department of the Treasury

Name of the organization

Internal Revenue Service

Schedule of Contributors

Attach to Form 990, 990-EZ, or 990-PF.
Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2023

Employer identification number

KIDS IN NEED OF DEVELOPMENT EDUCATION AND RELIEF KINDER USA 75-2999028 Organization type (check one): Filers of: Section: X Form 990 or 990-EZ 501(c)(3) (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. **General Rule** For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions. **Special Rules** For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line

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

Schedule B (Form 990) (2023)

2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990).

Schedule B (Form 990) (2023) Page **2**

Name of organization KIDS IN NEED OF DEVELOPMENT EDUCATION AND RELIEF KINDER USA

Employer identification number 75–2999028

Part I	Contributors (see instructions).	Use duplicate copies of Part I if additional space is needed.

		T ,,	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1_	ASHRAF KHALAF 2260 HORIZON LIGHT COURT HENDERSON, NV 89052	\$\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

Name of organization KIDS IN NEED OF DEVELOPMENT EDUCATION AND RELIEF KINDER USA

Employer identification number 75-2999028

Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		¢	
		\$	

Schedule B (Form 990) (2023) Page **4**

Name of organization **Employer identification number** KIDS IN NEED OF DEVELOPMENT EDUCATION AND 75-2999028 RELIEF KINDER USA Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once. See instructions.) \$ Use duplicate copies of Part III if additional space is needed. (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. (b) Purpose of gift (c) Use of gift (d) Description of how gift is held from Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

SCHEDULE D (Form 990)

Supplemental Financial Statements Complete if the organization answered "Yes" on Form 990,

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.

2023

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

Name	of the organization KIDS IN NEED OF DEVELOPMENT EDUCATION AND	Employer identification number
REI	IEF KINDER USA	75-2999028
Pa	rt I Organizations Maintaining Donor Advised Funds or Other Similar Funds o	r Accounts
	Complete if the organization answered "Yes" on Form 990, Part IV, line 6.	
	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	
2	Aggregate value of contributions to (during year).	
3	Aggregate value of grants from (during year)	
4	Aggregate value at end of year	
5	Did the organization inform all donors and donor advisors in writing that the assets held	I in donor advised
	funds are the organization's property, subject to the organization's exclusive legal control? .	Yes L No
6	Did the organization inform all grantees, donors, and donor advisors in writing that grant f	funds can be used
	only for charitable purposes and not for the benefit of the donor or donor advisor, or for	
	conferring impermissible private benefit?	Yes No
Pa	rt II Conservation Easements	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 7.	
1	Purpose(s) of conservation easements held by the organization (check all that apply).	
		of a historically important land area
		of a certified historic structure
	Preservation of open space	
2	Complete lines 2a through 2d if the organization held a qualified conservation contribution in	
	easement on the last day of the tax year.	Held at the End of the Tax Year
а	Total number of conservation easements	2a
b	Total acreage restricted by conservation easements	2b
С.	Number of conservation easements on a certified historic structure included on line 2a	2c
d	Number of conservation easements included on line 2c acquired after July 25, 2006, and	
•	not on a historic structure listed in the National Register	2d
3	Number of conservation easements modified, transferred, released, extinguished, or term	ninated by the organization during the
	tax year	
4 5	Number of states where property subject to conservation easement is located	ution handling of
3	violations, and enforcement of the conservation easements it holds?	
6	Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing	
U	Stan and volunteer nours devoted to monitoring, inspecting, nanding of violations, and emotioning	conservation easements during the year
7	Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing of	conservation easements during the year
'	Amount of expenses incurred in monitoring, inspecting, nationing of violations, and emoting t	conservation easements during the year
8	Does each conservation easement reported on line 2d above satisfy the requirements of se	ction 170(h)(4)(B)(i)
•	and section 170(h)(4)(B)(ii)?	
9	In Part XIII, describe how the organization reports conservation easements in its revenue ar	
•	sheet, and include, if applicable, the text of the footnote to the organization's financial state	•
	organization's accounting for conservation easements.	
Pa	rt III Organizations Maintaining Collections of Art, Historical Treasures, or Other	er Similar Assets
	Complete if the organization answered "Yes" on Form 990, Part IV, line 8.	
1a	If the organization elected, as permitted under FASB ASC 958, not to report in its revenue of art, historical treasures, or other similar assets held for public exhibition, education,	ue statement and balance sheet works
	of art, historical treasures, or other similar assets held for public exhibition, education, service, provide in Part XIII the text of the footnote to its financial statements that describes	, or research in furtherance of public
b	If the organization elected, as permitted under FASB ASC 958, to report in its revenue s	
b	art, historical treasures, or other similar assets held for public exhibition, education, or resprovide the following amounts relating to these items:	search in furtherance of public service,
	(i) Revenue included on Form 990, Part VIII, line 1	
	(ii) Assets included in Form 990, Part X	
2	If the organization received or held works of art, historical treasures, or other similar	assets for financial gain, provide the
	following amounts required to be reported under FASB ASC 958 relating to these items:	
а	Revenue included on Form 990, Part VIII, line 1	
b	Assets included in Form 990, Part X	\$

		S IN NEED OF					999028	Page 2
	rt III Organizations Maintaini					<u>'</u>		,
3	Using the organization's acquisition		other records, chec	ck any of t	the follow	ving that make sigr	nificant us	e of its
	collection items (check all that app	iy).	. 🖂 .					
а	Public exhibition			or exchan	ge progra	m		
b	Scholarly research		e Othe	r				
С	Preservation for future gene							
4	Provide a description of the organ	nization's collections	s and explain how	they furth	er the or	ganization's exemp	t purpose	in Part
	XIII.							
5	During the year, did the organization					_	¬	
	assets to be sold to raise funds rath		ained as part of the	organizati	on's colle	ction?	Yes	No
Pa	rt IV Escrow and Custodial A		no" on Form 000	Dort IV Lin		anartad an amau	ot on For	
	Complete if the organiza 990, Part X, line 21.	ition answered Ye	es on Form 990,	Part IV, III	ie 9, or r	eported an amoui	it on For	m
1.0	<u> </u>	too quotodion or c	sthar intermedians	for contrib	utiono or	other coasts not		
та	Is the organization an agent, trus		-			_	Vac	
L	included on Form 990, Part X? If "Yes," explain the arrangement in						Yes	No
b	ii res, explain the arrangement ii	I Part Alli and Com	piete trie following ta	able.		A m a unt		
_	Paginning halanca			4		Amount		
	Beginning balance				C			
	Additions during the year				d			
e	Distributions during the year				e			
f 20	Ending balance Did the organization include an am					account liability?	Yes	No
	If "Yes," explain the arrangement in							H
	rt V Endowment Funds	T all Alli. Check ii	ere ii trie explanatio	ii iias beeii	provided	III F alt Alli		
Га	Complete if the organiza	ation answered "Y	es" on Form 990	Part IV lir	ne 10			
		(a) Current year	(b) Prior year		ears back	(d) Three years back	(e) Four ye	ears back
	Danis dan afasa an halasa	(a) Carront year	(2) :) 50	(4)		(a) mee yeare baen	(6) . 64.)	
	Beginning of year balance							
	Contributions							
С	Net investment earnings, gains,							
	and losses							
	Grants or scholarships							
е	Other expenditures for facilities							
	and programs							
	Administrative expenses							
g ລ	End of year balance	of the current year	and halanas (line 1s	r oolumn (c	2)) hold or			
2 a	Provide the estimated percentage Board designated or quasi-endown		end balance (line rç %	j, column (a	a)) neid as) .		
	Permanent endowment		,,					
	Term endowment %							
•	The percentages on lines 2a, 2b, a		100%.					
3a	Are there endowment funds not in	•		t are held a	and admi	nistered for the		
Ju	organization by:	2000000000000000000000000000000000	organization tha	. a.o noid (Y	es No
	(i) Unrelated organizations?						3a(i)	
	(ii) Related organizations?						3a(ii)	
h	If "Yes" on line 3a(ii), are the relate						3b	
	Describe in Part XIII the intended u		· · · · · · · · · · · · · · · · · · ·					

Pa	Part VI Land, Buildings, and Equipment								
	Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.								
	Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value				
1 a	Land								
b	Buildings								
С	Leasehold improvements								
d	Equipment		5,296.	5,296.					
е	Other		3,657.	3,147.	510.				
	al. Add lines 1a through 1e. (Column (d) musi	510.							

Schedule D (Form 990) 2023

75-2999028

Part VII	Investments - Other Securities		Deat N/ line 44h Oce Form 000	Deat V. Bas 40
	Complete if the organization answered		i .	
	(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuat Cost or end-of-year mark	
(1) Financ	ial derivatives			
(2) Closely	y held equity interests			
(3) Other_				
(A)				
(B)				
(C)				
(D)				
(E)				
(F)				
(G)				
(H)				
	nn (b) must equal Form 990, Part X, line 12, col. (B))			
Part VIII	Investments - Program Related Complete if the organization answered	d "Yes" on Form 990	, Part IV, line 11c. See Form 990,	Part X, line 13.
	(a) Description of investment	(b) Book value	(c) Method of valuat	
			Cost or end-of-year mark	et value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
	nn (b) must equal Form 990, Part X, line 13, col. (B))			
Part IX	Other Assets			
	Complete if the organization answered	d "Yes" on Form 990	, Part IV, line 11d. See Form 990,	
	(a) De	escription		(b) Book value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
	lumn (b) must equal Form 990, Part X, line 15,	col. (B))		
Part X	Other Liabilities Complete if the organization answered line 25.	d "Yes" on Form 990), Part IV, line 11e or 11f. See For	m 990, Part X,
		otion of liability		(b) Book value
1. (1) Fede	eral income taxes	otion of hability		(b) book value
_ ` '				12 202
	TING LEASE LIABILITY			12,302.
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)	man (h) may at agus al Farma OCO Barri V 15 OF 1 (50)	1		10 202
ı otal. (Colui	mn (b) must equal Form 990, Part X, line 25, col. (B))			12,302.

^{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 FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII . X

JSA
3E1270 1.000

Schedule D (Form 990) 2023

Part	Reconciliation of Revenue per Audited Financial Statements With Revenue per Return Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.	n	
1	Total revenue, gains, and other support per audited financial statements	1	2,170,004.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
а	Net unrealized gains (losses) on investments		
b	Donated services and use of facilities		
С	Recoveries of prior year grants		
d	Other (Describe in Part XIII.)		
е	Add lines 2a through 2d	2e	4,709.
3	Subtract line 2e from line 1	3	2,165,295.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIII.)		
С	Add lines 4a and 4b	4c	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	2,165,295.
Part	Reconciliation of Expenses per Audited Financial Statements With Expenses per Retu Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.	ırn	
1	Total expenses and losses per audited financial statements	1	1,622,110.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
а	Donated services and use of facilities		
b	Prior year adjustments	.	
С	Other losses	.	
d	Other (Describe in Part XIII.)		
е	Add lines 2a through 2d	2e	1 600 110
3	Subtract line 2e from line 1	3	1,622,110.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	-	
b	Other (Boothboart are Ann.)	4c	
С 5	Add lines 4a and 4b	5	1,622,110.
	XIII Supplemental Information		1,022,110.
Provid	e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; F XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional inform		
SEE	SUPPLEMENTAL PAGE		

FIN 48 (ASC 740)

FORM 990, SCHEDULE D, PART X, LINE 2

THE ORGANIZATION IS EXEMPT FROM FEDERAL INCOME TAXES UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE, EXCEPT TO THE EXTENT IT HAS UNRELATED BUSINESS INCOME. FOR THE YEAR ENDED DECEMBER 31, 2023, THE ORGANIZATION HAD NO MATERIAL NET UNRELATED BUSINESS INCOME. ACCORDINGLY, NO PROVISION FOR INCOME TAXES IS REFLECTED IN THE ACCOMPANYING FINANCIAL STATEMENTS.

THE ORGANIZATION HAS CONCLUDED THAT IT DOES NOT HAVE ANY UNRECOGNIZABLE TAX BENEFITS RESULTING FROM THE CURRENT OR PRIOR PERIOD TAX POSITIONS.

ACCORDINGLY, NO ADDITIONAL DISCLOSURES HAVE BEEN MADE ON THE FINANCIAL STATEMENTS REGARDING ASC 740, INCOME TAXES. THE ORGANIZATION DOES NOT HAVE ANY OUTSTANDING INTEREST OR PENALTIES, AND NONE HAVE BEEN RECORDED IN THE STATEMENT OF ACTIVITIES AND CHANGE IN NET ASSETS FOR THE YEAR ENDED DECEMBER 31, 2023. THE ORGANIZATION'S INFORMATIONAL RETURN FILED ARE GENERALLY SUBJECT TO EXAMINATION FOR THREE YEARS AFTER THE LATER OF THE DUE DATE OR DATE OF FILING. AS A RESULT, THE ORGANIZATION IS NO LONGER SUBJECT TO INCOME TAX EXAMINATIONS BY TAX AUTHORITIES FOR YEARS PRIOR TO 2020.

SCHEDULE F (Form 990)

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.

2023
Open to Public Inspection

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

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

lame	of the organization KIDS IN NEED	OF DEVELO	PMENT EDUC	CATION AND		Employer identifica	tion number
	IEF KINDER USA			75-2999028			
Part	General Information o Form 990, Part IV, line 14		Outside the	United States. Comple	ete if the	organization a	nswered "Yes" or
1	For grantmakers. Does the org	ganization mai	ntain records	to substantiate the amou	int of its	grants and	
	other assistance, the grantees'	eligibility for t	he grants or	assistance, and the selec	tion crite	ria used to	
	award the grants or assistance?						X Yes No
	For grantmakers. Describe in I outside the United States.	Part V the org	anization's pro	ocedures for monitoring t	he use o	f its grants and	d other assistance
	Activities per Region. (The follow	vina Part I. line	3 table can be	e duplicated if additional sp	ace is nee	eded.)	
-	(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in the region	(d) Activities conducted in the region (by type) (such as, fundraising, program services, investments, grants to recipients located in the region)	(e) If acti a pro describe	vity listed in (d) is gram service, e specific type of (s) in the region	(f) Total expenditures for and investments in the region
(1)	MIDDLE EAST AND NORTH AFRICA		1	GRANTMAKING			1,199,981.
(2)	EUROPE			GRANTMAKING			6,259.
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							
(13)							
(14)							
(15)							
(16)							
(17)							
3a	Subtotal		1.				1,206,240.
b	Total from continuation sheets to Part I						
С			1.				1,206,240.

organization section and EIN grant cash grant cash noncash of noncash valuation (if applicable) grant disbursement assistance assistance (book, FMV,	Schedule F (Form 990) 2023	KIDS IN NEED	OF DEVELOPMENT ED	UCATION AND	D 7	75-2999028			Page 2
(a) Name of ciganization (b) Region (c) Pegion (d) Pegion (e) Amount of cash grant (f) Manner of cash grant (f) Man	Part II								ered "Yes" on	Form 990
(2) MIDDLE EAST/NORTH AFRICA FOOD 589,601. BANK WIRE (3) NIDDLE EAST/NORTH AFRICA FOOD 14,960. BANK WIRE (4) MIDDLE EAST/NORTH AFRICA FOOD 40,844. BANK WIRE (5) MIDDLE EAST/NORTH AFRICA FOOD 38,046. BANK WIRE (6) MIDDLE EAST/NORTH AFRICA EDUCATION 98,543. BANK WIRE (7) MIDDLE EAST/NORTH AFRICA EDUCATION 30,157. BANK WIRE (8) MIDDLE EAST/NORTH AFRICA EDUCATION 77,905. BANK WIRE (9) MIDDLE EAST/NORTH AFRICA DEVELOPMENT 77,905. BANK WIRE (10) MIDDLE EAST/NORTH AFRICA DEVELOPMENT 21,037. BANK WIRE (11) MIDDLE EAST/NORTH AFRICA DEVELOPMENT 21,037. BANK WIRE (11) MIDDLE EAST/NORTH AFRICA DEVELOPMENT 21,037. BANK WIRE (11) MIDDLE EAST/NORTH AFRICA DEVELOPMENT 25,007. BANK WIRE (12) MIDDLE EAST/NORTH AFRICA DEVELOPMENT 5,001. BANK WIRE (13) EUROPE/ICELAND/GREENLAND RENT 5,001. BANK WIRE	1	(a) Name of	(b) IRS code section and EIN	1	(d) Purpose of	(e) Amount of	(f) Manner of cash	(g) Amount of noncash	of noncash	(i) Method of valuation (book, FMV, appraisal, other)
(3) MIDDLE EAST/NORTH AFRICA FOOD 14,960. BANK WIRE (4) MIDDLE BAST/NORTH AFRICA FOOD 40,844. BANK WIRE (5) MIDDLE BAST/NORTH AFRICA FOOD 38,046. BANK WIRE (6) MIDDLE BAST/NORTH AFRICA EDUCATION 98,543. BANK WIRE (7) MIDDLE BAST/NORTH AFRICA EDUCATION 30,157. BANK WIRE (8) MIDDLE BAST/NORTH AFRICA FOOD 10,030. BANK WIRE (9) MIDDLE BAST/NORTH AFRICA DEVELOPMENT 77,905. BANK WIRE (10) MIDDLE BAST/NORTH AFRICA DEVELOPMENT 21,037. BANK WIRE (11) MIDDLE BAST/NORTH AFRICA DEVELOPMENT 150,596. BANK WIRE (12) MIDDLE BAST/NORTH AFRICA EDUCATION 26,634. BANK WIRE (13) BUROPE/ICELAND/GRENIAND BENT 5,001. BANK WIRE (14)	(1)			MIDDLE EAST/NORTH AFRICA	FOOD/EDUCATI	106,876.	BANK WIRE			
(4) MIDDLE EAST/NORTH AFRICA FOOD 40,844. BANK WIRE (5) MIDDLE EAST/NORTH AFRICA FOOD 38,046. BANK WIRE (6) MIDDLE EAST/NORTH AFRICA EDUCATION 98,543. BANK WIRE (7) MIDDLE EAST/NORTH AFRICA EDUCATION 30,157. BANK WIRE (8) MIDDLE EAST/NORTH AFRICA FOOD 10,010. BANK WIRE (9) MIDDLE EAST/NORTH AFRICA DEVELOPMENT 77,905. BANK WIRE (10) MIDDLE EAST/NORTH AFRICA DEVELOPMENT 21,037. BANK WIRE (11) MIDDLE EAST/NORTH AFRICA DEVELOPMENT 22,037. BANK WIRE (12) MIDDLE EAST/NORTH AFRICA DEVELOPMENT 50,007. BANK WIRE (13) EUROPE/ICELAND/GREENLAND ERNT 5,001. BANK WIRE (14) (15)	(2)			MIDDLE EAST/NORTH AFRICA	FOOD/EDUCATI	509,601.	BANK WIRE			
(5) MIDDLE EAST/NORTH AFRICA (6) MIDDLE EAST/NORTH AFRICA MIDDLE EAST/NORTH AFRICA (7) MIDDLE EAST/NORTH AFRICA (8) MIDDLE EAST/NORTH AFRICA (9) MIDDLE EAST/NORTH AFRICA (10) MIDDLE EAST/NORTH AFRICA MIDDLE EAST/N	(3)			MIDDLE EAST/NORTH AFRICA	FOOD	14,960.	BANK WIRE			
(6) MIDDLE EAST/NORTH AFRICA EDUCATION 98,543. BANK WIRE (7) MIDDLE EAST/NORTH AFRICA EDUCATION 30,157. BANK WIRE (8) MIDDLE EAST/NORTH AFRICA FOOD 10,010. BANK WIRE (9) MIDDLE EAST/NORTH AFRICA DEVELOPMENT 77,905. BANK WIRE (10) MIDDLE EAST/NORTH AFRICA DEVELOPMENT 21,037. BANK WIRE (11) MIDDLE EAST/NORTH AFRICA FOOD/EDUCATI 150,596. BANK WIRE (12) MIDDLE EAST/NORTH AFRICA EDUCATION 26,634. BANK WIRE (13) EUROPE/ICELAND/GREENLAND FENT 5,001. BANK WIRE (14) (15)	(4)			MIDDLE EAST/NORTH AFRICA	FOOD	40,844.	BANK WIRE			
(7) MIDDLE EAST/NORTH AFRICA EDUCATION 30,157. BANK WIRE (8) MIDDLE EAST/NORTH AFRICA FOOD 10,010. BANK WIRE (9) MIDDLE EAST/NORTH AFRICA DEVELOPMENT 77,905. BANK WIRE (10) MIDDLE EAST/NORTH AFRICA DEVELOPMENT 21,037. BANK WIRE (11) MIDDLE EAST/NORTH AFRICA FOOD/EDUCATI 150,596. BANK WIRE (12) MIDDLE EAST/NORTH AFRICA EDUCATION 26,634. BANK WIRE (13) EUROPE/ICELAND/GREENLAND RENT 5,001. BANK WIRE (14) (15)	(5)			MIDDLE EAST/NORTH AFRICA	FOOD	38,046.	BANK WIRE			
(8) MIDDLE EAST/NORTH AFRICA FOOD 10,010. BANK WIRE (9) MIDDLE EAST/NORTH AFRICA DEVELOPMENT 77,905. BANK WIRE (10) MIDDLE EAST/NORTH AFRICA DEVELOPMENT 21,037. BANK WIRE (11) MIDDLE EAST/NORTH AFRICA FOOD/EDUCATI 150,596. BANK WIRE (12) MIDDLE EAST/NORTH AFRICA EDUCATION 26,634. BANK WIRE (13) EUROPE/ICELAND/GREENLAND RENT 5,001. BANK WIRE (14) (15)	(6)			MIDDLE EAST/NORTH AFRICA	EDUCATION	98,543.	BANK WIRE			
(10) MIDDLE EAST/NORTH AFRICA DEVELOPMENT 77,905. BANK WIRE (110) MIDDLE EAST/NORTH AFRICA DEVELOPMENT 21,037. BANK WIRE (111) MIDDLE EAST/NORTH AFRICA FOOD/EDUCATI 150,596. BANK WIRE (12) MIDDLE EAST/NORTH AFRICA EDUCATION 26,634. BANK WIRE (13) EUROPE/ICELAND/GREENLAND RENT 5,001. BANK WIRE (14) (15)	(7)			MIDDLE EAST/NORTH AFRICA	EDUCATION	30,157.	BANK WIRE			
(10) MIDDLE EAST/NORTH AFRICA MIDDLE EAST/NORTH AFRICA FOOD/EDUCATI 150,596. BANK WIRE (12) MIDDLE EAST/NORTH AFRICA EDUCATION 26,634. BANK WIRE (13) EUROPE/ICELAND/GREENLAND RENT 5,001. BANK WIRE (14) (15)	(8)			MIDDLE EAST/NORTH AFRICA	FOOD	10,010.	BANK WIRE			
(11) MIDDLE EAST/NORTH AFRICA FOOD/EDUCATI 150,596. BANK WIRE (12) MIDDLE EAST/NORTH AFRICA EDUCATION 26,634. BANK WIRE (13) EUROPE/ICELAND/GREENLAND RENT 5,001. BANK WIRE (14) (15)	(9)			MIDDLE EAST/NORTH AFRICA	DEVELOPMENT	77,905.	BANK WIRE			
(12) MIDDLE EAST/NORTH AFRICA EDUCATION 26,634. BANK WIRE (13) EUROPE/ICELAND/GREENLAND RENT 5,001. BANK WIRE (14) (15)	(10)			MIDDLE EAST/NORTH AFRICA	DEVELOPMENT	21,037.	BANK WIRE			
(13) EUROPE/ICELAND/GREENLAND RENT 5,001. BANK WIRE (14) (15)	(11)			MIDDLE EAST/NORTH AFRICA	FOOD/EDUCATI	150,596.	BANK WIRE			
(14) (15)	(12)			MIDDLE EAST/NORTH AFRICA	EDUCATION	26,634.	BANK WIRE			
(15)	(13)			EUROPE/ICELAND/GREENLAND	RENT	5,001.	BANK WIRE			
	(14)									
(16)	(15)									
	(16)									

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

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16. Part III can be duplicated if additional space is needed.

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

Yes

Yes

X	No

X No

Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," 5 the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships (see the Instructions for Form 8865)

Certain Foreign Corporations (see the Instructions for Form 5471)

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 the Instructions for Form 8621)

Yes

Did the organization have any operations in or related to any boycotting countries during the tax year? If 6 "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see the Instructions for Form 5713; don't file with Form 990)

Yes

Schedule F (Form 990) 2023

Part V

Supplemental InformationProvide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information (see instructions).

PROCEDURES FOR MONITORING THE USE OF THE GRANTS AND OTHER ASSISTANCE

FORM 990, SCHEDULE F, LINE 2

PROFESSIONAL AUDITS AND SITE VISITATIONS.

SCHEDULE 0 (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

OMB No. 1545-0047 Inspection

75-2999028

Department of the Treasury Internal Revenue Service

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

REVIEW PROCESS

Name of the organization

FORM 990, PART VI, LINE 11B

KIDS IN NEED OF DEVELOPMENT EDUCATION AND

THE BOARD OF DIRECTORS MEETS AND DISCUSSES THE FORM 990 BEFORE FILING.

MONITORING AND ENFORCING COMPLIANCE WITH THE CONFLICT OF INTEREST POLICY

FORM 990, PART VI, LINE 11C

DISCLOSE CONFLICT, DISCUSS AND RESOLVE THE ISSUE.

THE PROCESS OF DETERMINING COMPENSATION

FORM 990, PART VI, LINE 15B

BOARD DOES DUE DILIGENCE - EVALUATION / VOTE / % RAISE - BUT NOT BASED ON COMPARABLE DATA, ETC.

AVAL OF GOV DOCS & FIN STMTS TO GENERAL PUBLIC

FORM 990, PART VI, LINE 19

FINANCIAL STATEMENTS ARE AVAILABLE ON THE WEBSITE. OTHER INFORMATION IS AVAILABLE THROUGH GUIDESTAR AND THROUGH BBB GIVING ALLIANCE.

FORM 990, PART VI, LINE 17 - STATES

AK,AZ,AR,CA,CT,
DC,FL,GA,HI,IL,KS,KY,LA,ME,MD,MA,MI,
MN,MS,MO,NH,NJ,NM,NY,NC,ND,OH,OK,OR,PA,
RI,SC,TN,UT,VA,WA,WV,WI,

Name of the organization

KIDS IN NEED OF DEVELOPMENT EDUCATION AND

To a suppose the organization number of the organization num

FORM 990, PART X - INVESTMENTS - PUBLICLY TRADED SECURITIES

DESCRIPTION ENDING COST

DESCRIPTION BOOK VALUE OR FMV

OTHER INVESTMENT 16,314.

TOTALS 16,314.