Form **990**

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

OMB No. 1545-0047

Open to Rublic

Department of the Treasury Internal Revenue Service

► The organization may have to use a copy of this return to satisfy state reporting requirements.

Α	For the 2	012 calen	dar year, or tax year b	eginning		, 201	2, and endir	ng		,		
В	Check if app	olicable:	С						D Employ	er Identif	ication Number	
	Addres	s change	Kids In Need	of Developm	nent, Ed	ucation	١,		75-2	29990	28	
	Name	change	and Relief K		,		• •		E Telepho			
	Initial r	•	P.O. Box 2248						972	-664-	-1991	
	Termin		Dallas, TX 75	222					7,2	004	<u> </u>	
	\vdash	ed return							G Gross re	<u> :</u> خ	3640	00
	_	ation pending	F Name and address of pr	inginal officers				H(a) Is this	a group retur			X No
	Applica	ation pending	· ·					1 ''				No No
_	Tay ayan	nt status	Same As C Abo		anart no \	4947(a)(1)	or 527	If 'No,'	affiliates incl attach a list.	(see inst	ructions)	
÷		npt status	X 501(c)(3) 501(c		nsert no.)	4947(a)(1)	01 027	1				
<u>J</u>	Websit		w.kinderusa.o		7				exemption nu			
K		rganization:	X Corporation Trust	Association	Other ►] 1	Year of Forma	tion: 200	2 IVI s	State of le	gal domicile: TX	
LK.	inteller :	Summar	y ha tha avanciantianta		:::6:t							
	1 Bri	eny descri	be the organization's r	nission or most s	ignificant ac	tivities: _	<u>l'he Orga</u>	<u>mizati</u>	on pro	vide	<u>s_aid_in_th</u>	<u>ne_</u> _
Se			nd development	or currar	<u>en wno a</u>	are vic	tims or	<u>_man-ma</u>	a <u>de anc</u>	<u>nat</u>	urai	
lan		saster	<u>'S.</u>									
ler.	2 Ch	eck this bo	if the organi	zation discontinue								
Activities & Governance			oting members of the g							3	215.	5
৹ধ			dependent voting men							4		<u>5</u>
ies			of individuals employ							5		
፷			of volunteers (estima							6		0
Aci			ed business revenue fr							7 a		0.
	b Net	unrelated	l business taxable inco	me from Form 9	90-T, line 34	l				7 b		0.
									rior Year		Current Year	r
ø.	1		and grants (Part VIII,						694,7	96.	764,0)37.
Revenue			rice revenue (Part VIII									
eve			come (Part VIII, colur						1	.55.		62.
Œ			e (Part VIII, column (A									
			- add lines 8 through						694,9		764,0	
			milar amounts paid (F						359,9	92.	179,8	<u>882.</u>
	I .		to or for members (Pa									
ø	 15 Sal	aries, othe	er compensation, emp		191,1	.78.	189,1	.51.				
ße	16a Pro	fessional	fundraising fees (Part	IX, column (A), I	ine 11e)					1		
Expenses	b Tot	al fundrais	sing expenses (Part IX	, column (D), line	e 25)►		94,452.					
Ω	17 Oth	er expens	es (Part IX, column (A	A), lines 11a-11d.					219,1	83	210,1	40
			es. Add lines 13-17 (m						770,3		579,1	
			expenses. Subtract li						-75,4		184,9	
8									ng of Curren		End of Year	
sets alan	20 Tot	al assets ((Part X, line 16)					Degillini	197,5		331,5	
A B	21 Tot		s (Part X, line 26)						91,8		40,9	
Net Assets Fund Balanc	22 Net		fund balances. Subtra						105,6		290,6	
		Signatur		200 11110 27 110117 11	110 20			• • •	105,0	90.1	290,0	07.
				turn including account				-f	due en dibelief	14 1- 4		
com	plete. Declara	ation of prepa	are that I have examined this re rer (other than officer) is base	ed on all information of	f which preparer	has any know	ledge.	of my knowled	age and bener	, it is true,	correct, and	

Sig	ın	Signatur	re of officer					Da	ite			
He	re	Dale	ell D Mohmed					Eveci	utive I	Di rec	rtor	
	. •		print name and title.					DACC	ucive i	DITE	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
		Print/Type p	reparer's name	Preparer's sign	nature		Date		Check	X if	PTIN TIN	
Pa	:A	Mike D)unson	Mil	(Q	•^	3/7	1,2	self-employ		P00897068	
	eparer	Firm's name		on, CPA	/Curs	v ~		, , ,	Jon-employ	cu ,	100091000	
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Mar	the IDS	discuss thi	Dallas, TX is return with the prep		a? (saa inst	ructions)	4		Phone no.	(972	- I I	NI-
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Par	990 (2012) Kids In Need of Development, Education,	75-2999028	Page 2
WIFE CO.	Statement of Program Service Accomplishments		
	Check if Schedule O contains a response to any question in this Part III		X
1	Briefly describe the organization's mission:		
	The Organization provides aid in the relief and development of ch	ildren who are	•
	victims of man-made and natural disasters.		
2	Did the organization undertake any significant program services during the year which were not listed on	the prior	
_	Form 990 or 990-EZ?	· —	X No
	If 'Yes,' describe these new services on Schedule O.		
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services	vices? Yes	X No
·	If 'Yes,' describe these changes on Schedule O.		
4	·	es as measured by e	nenses
7	Describe the organization's program service accomplishments for each of its three largest program service Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the am	ount of grants and allo	cations to
	others, the total expenses, and revenue, if any, for each program service reported.		
4 a	(Code: 156, 677. including grants of \$ 89,777.) (R	evenue \$)
	Development - child nutrition, sustainable projects for women and	l farmers	
		·	
A I.	(Ooder) / (Fyrance & 126 F02 including groups of & 60 602) (F	·	
40	(Code:) (Expenses \$136, 583. including grants of \$69, 683.) (F	evenue ş)
	Health - Nutritional, Neo Natal, Psychosocial		
4 c	(Code:) (Expenses \$ 81,072, including grants of \$ 14,172,) (F	evenue \$	
4 c	(Code:) (Expenses \$81,072. including grants of \$14,172.) (Feducational projects - school for academically challenged students))
4 c	(Code:) (Expenses \$ 81,072. including grants of \$ 14,172.) (Figure 2 decational projects - school for academically challenged students))
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	Educational projects - school for academically challenged studen		
	Educational projects - school for academically challenged studen		
4 d	Educational projects - school for academically challenged studen)

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?// 'Yes,' complete Schedule A	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I	3		Х
4	Section 501(c)(3) organizations Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If 'Yes,' complete Schedule C, Part II	4		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If 'Yes,' complete Schedule C, Part III	5		Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If 'Yes,' complete Schedule D, Part I	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If 'Yes,' complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III.	8		Х
9	for amounts not listed in Part X; or provide credit counseling, debt management credit repair, or debt negotiation services? If 'Yes,' complete Schedule D, Part IV	9		Х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If 'Yes,' complete Schedule D, Part V	10		Х
11	If the organization's answer to any of the following questions is 'Yes', then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.			
	a Did the organization report an amount for land, buildings and equipment in Part X, line 10?// 'Yes,' complete Schedule D, Part VI	11 a	х	
	b Did the organization report an amount for investments – other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? <i>If 'Yes,' complete Schedule D, Part VII</i>	11 b		Х
	c Did the organization report an amount for investments – program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VIII.	11 c		Х
	d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part IX	11 d		X
	e Did the organization report an amount for other liabilities in Part X, line 25?If 'Yes,' complete Schedule D, Part X	11 e		X
	f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If 'Yes,' complete Schedule D, Part X	11 f		X
12	2a Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI, and XII	12a	Х	
	b Was the organization included in consolidated, independent audited financial statements for the tax year? If 'Yes,' and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI and XII is optional	12 b		X
	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13	v	X
14	la Did the organization maintain an office, employees, or agents outside of the United States?	14a	X	
	b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? <i>If 'Yes,' complete Schedule F, Parts I and IV</i>	14b	Х	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If 'Yes,' complete Schedule F, Parts II and IV	15	Х	,
16	5 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If 'Yes,' complete Schedule F, Parts III and IV	16		Х
17	column (A), lines 6 and 11e? If 'Yes,' complete Schedule G, Part I (see instructions)	17		Х
18	B Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II.	18		X
19	complete Schedule G, Part III	19		X
20	a Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H	20	ļ	X
	b If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?	20 b		

Har	Checklist of Required Schedules (continued)			
			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and It	21		Х
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If 'Yes,' complete Schedule I, Parts I and III.	22		Х
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? <i>If 'Yes,' complete Schedule J</i>	23		Х
24 =				<u> </u>
	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, and that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No,'go to line 25	24a		х
Ł	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		<u> </u>
	c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
C	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) and 501(c)(4) organizationsDid the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I	25a		Х
t	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		Х
26	Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If 'Yes,' complete Schedule L, Part II	26		Х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If 'Yes,' complete Schedule L, Part III.	27		X
	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28a		X
t	A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28b		Х
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If 'Yes,' complete Schedule L, Part IV	28c		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If 'Yes,' complete Schedule M.</i>	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II.	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If 'Yes,' complete Schedule R, Part I	33		х
34	Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Parts II, III, IV, and V, line 1	34		Х
35 a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	olf '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		Х
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? <i>If 'Yes,' complete Schedule R, Part VI.</i>	37		Х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	38	Х	
BAA		Form	990 ((2012)

TEEA0104L 08/08/12

Form 990 (2012) Kids In Need of Development, Education, Part V Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response to any question in this Part V		Ш
1 a Enter the number reported in Pay 3 of Form 1006. Enter 0, if not applicable	Yes N	0
1 a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	$\frac{0}{0}$	
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	
2 a 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	0	
b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	
Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. (see instructions)		
3 a Did the organization have unrelated business gross income of \$1,000 or more during the year?		<u>X</u>
b If 'Yes' has it filed a Form 990-T for this year? <i>If 'No,' provide an explanation in Schedule O.</i>	3b	
4 a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, financial account in a foreign country (such as a bank account, securities account, or other financial account)?	a 4a X	
b If 'Yes,' enter the name of the foreign country: ► Belgium		
See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.		
5 a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		X
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5 b	X
c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?	5 c	
6 a 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?	e 6b	
7 Organizations that may receive deductible contributions under section 170(c).		
a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and	7.	X
services provided to the payor?		
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to fi		
Form 8282?	7c	X
d If 'Yes,' indicate the number of Forms 8282 filed during the year		
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e	X
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f	X
g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g	
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a		
Form 1098-C?	7 h	200
8 Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organization9id the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8	
9 Sponsoring organizations maintaining donor advised funds.		
a Did the organization make any taxable distributions under section 4966?	9a	1466
b Did the organization make a distribution to a donor, donor advisor, or related person?		
10 Section 501(c)(7) organizations.Enter:		
a Initiation fees and capital contributions included on Part VIII, line 12		
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10 b		
11 Section 501(c)(12) organizations.Enter:		
a 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.)		
12 a Section 4947(a)(1) non- exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	
b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year 12b		
13 Section 501(c)(29) qualified nonprofit health insurance issuers.		
a 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.		
b Enter the amount of reserves the organization is required to maintain by the states in		
which the organization is licensed to issue qualified health plans		
c Enter the amount of reserves on hand		
14a Did the organization receive any payments for indoor tanning services during the tax year?		X
b If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in Schedule O	14b	

Form 990 (2012) Kids In Need of Development, Education, 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 in Schedule O. See instructions.

Check if Schedule O contains a response to any question in this Part VI.

<u>sec</u>	ction A. Governing Body and Management				
1	a Enter the number of voting members of the governing body at the end of the tax year	1a 5		Yes	No
1	b Enter the number of voting members included in line 1a, above, who are independent	1 b 5			
		L	4		
2	Did any officer, director, trustee, or key employee have a family relationship or a business re officer, director, trustee or key employee?		2		X
3	Did the organization delegate control over management duties customarily performed by or u of officers, directors or trustees, or key employees to a management company or other person Did the organization make any significant changes to its governing documents	nder the direct supervision	3		Х
4	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		5		X
6	Did the organization have members or stockholders?		6		X
7	a Did the organization have members, stockholders, or other persons who had the power to elemembers of the governing body?	ect or appoint one or more	7a		X
	Are any governance decisions of the organization reserved to (or subject to approval by) mer stockholders, or other persons other than the governing body?		7 b	a was a way of	X
8	Did the organization contemporaneously document the meetings held or written actions unde the following: The governing body?		8 a	X	
	b Each committee with authority to act on behalf of the governing body?		8 b		
			0.5		
	Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who car organization's mailing address? If 'Yes,' provide the names and addresses in Schedule O		9		X
Sec	tion B. Policies (This Section B requests information about policies not requ	ired by the Internal Rev	enue	Code) .)
				Yes	No
	a Did the organization have local chapters, branches, or affiliates?		10 a		<u>X</u>
	o If 'Yes,' did the organization have written policies and procedures governing the activities of such chapters, affiliates, a operations are consistent with the organization's exempt purposes?		10 b		
	a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the		11 a	X	I MANAGEMENT OF THE PARTY OF TH
	b Describe in Schedule O the process, if any, used by the organization to review this Form 990			V	
	a Did the organization have a written conflict of interest policy? <i>If 'No,' go to line 13</i> b Were officers, directors or trustees, and key employees required to disclose annually interest		12 a	Х	
	to conflicts?		12 b	Х	
	c Did the organization regularly and consistently monitor and enforce compliance with the polic Schedule O how this is doneSee. Schedule O	y: II Tes, describe III	12 c	Х	
13	Did the organization have a written whistleblower policy?		13	X	
14	Did the organization have a written document retention and destruction policy?		14	Χ	
15	Did the process for determining compensation of the following persons include a review and persons, comparability data, and contemporaneous substantiation of the deliberation and dec	cision?			
	a The organization's CEO, Executive Director, or top management official		15 a	- 17	X
	Other officers of key employees of the organization See. Schedule .0		15 b	X	
16	a Did the organization invest in, contribute assets to, or participate in a joint venture or similar	arrangement with a			
İ	taxable entity during the year? Jef 'Yes,' did the organization follow a written policy or procedure requiring the organization to participation in joint venture arrangements under applicable federal tax law, and taken steps organization's exempt status with respect to such arrangements?	evaluate its	16 a		X
Sec	tion C. Disclosure			l	
17	List the states with which a copy of this Form 990 is required to be filed ► None				
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, a inspection. Indicate how you make these available. Check all that apply.	•	vailable	e for p	ublic
		ner (explain in Schedule O)			
19 20	Describe in Schedule 0 whether (and if so, how) the organization makes its governing documents, conflict of interest the public during the tax year. See Schedule 0 State the name, physical address, and telephone number of the person who possesses the b				
	State the traine innustral address, and telephone humber of the hereon who hossesses the h	DOKS and records of the ord:	nizatio	n'	

Form 990 (2012) Kids In Need of				75-29990			
Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors							
Check if Schedule O contains a					<u> </u>		
Section A. Officers, Directors, Trus	stees, Key	Employees, and H	ighest Compensa	ted Employees	,		
1 a Complete this table for all persons requir 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 ke 							
 List the organization's five current high who received reportable compensation (Box organization and any related organizations. 	nest compens 5 of Form W	sated employees (other ' '-2 and/or Box 7 of Form	than an officer, directon 1099-MISC) of more	or, trustee, or key emp than \$100,000 from th	loyee) e		
 List all of the organization's former off of reportable compensation from the organiz 	icers, key em ation and an	nployees, and highest co by related organizations.	mpensated employees	s who received more the	nan \$100,000		
 List all of the organization's former dir organization, more than \$10,000 of reportab 	ectors or tru le compensa	steesthat received, in the tion from the organization	ne capacity as a forme on and any related org	r director or trustee of anizations.	the		
List persons in the following order: individua employees; and former such persons.	I trustees or	directors; institutional tr	ustees; officers; key e	mployees; highest con	npensated		
X Check this box if neither the organization	n nor any rela	ated organization compe	ensated any current of	ficer, director, or truste	эе.		
		(C)					
(A) Name and Title	Average hours per	osition (do not check more than e box, unless person is both an officer and a director/trustee)	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation from the		

(A) Name and Title	(B) Average hours per	I one bo	x, un	less r	erso	c more t n is both or/trusted	n an	(D) Reportable compensation from	(E) Reportable compensation from	(F) Estimated amount of other compensation
	hours per week (list any hours for related organiza- tions below dotted line)		Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	from the organization and related organizations
(1) Dalell D Mohmed	40_									
Executive Direc	0	X		X				0.	0.	0.
(2) Jess Ghannam, Ph.d.	2	ļ								
Secretary	0	X				ļ		0.	0.	0.
(3) Basil Abdelkarim, MD	2]								
Board Member	0	X						0.	0.	0.
(4) Bassil Kublaoui, MD	2	ļ								_
Board Member	0	X						0.	0.	0.
(5) Laila Al-Marayati, MD	2	X						0.	0.	0.
Chairperson (6) Amal Alkalla	2	<u> </u>						J	0.	<u> </u>
Treasurer	0	X						0.	0.	0.
(7)	"	^\					 	•	<u> </u>	
		t								
(8)								34444141414141		
(9)										
(10)										
(11)										
(12)										
(13)										
(14)		-								

Part VIII Section A. Officers, Directors, Truste		y Er	npl			and	Hi	ghest Comper	isated Employed	es (cont)
(A) Name and title	Average hours per week	offic	Position (do not check more than one cox, unless person is both an officer and a director/trustee)				ee)	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation
	(list any hours	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	from the organization and related organizations
(15)									The second secon	
(16)										
(17)	 									
(18)										
(19)										
(20)		-								
(21)										
(22)										
(23)										
(24)										
(25)										
1 b Sub-total	1 A						> > >	0. 0. 0.	0. 0.	0 0
2 Total number of individuals (including but not limite from the organization ► 0	ed to the	ose I	stec	l ab	ove)	who	rec	ceived more than	\$100,000 of reporta	able compensation
3 Did the organization list any former officer, director on line 1a? <i>If</i> 'Yes,' complete Schedule J for such	or trus	tee, <i>al</i>	кеу	emp	oloye	ee, or	hig	ghest compensate	d employee	Yes No
4 For any individual listed on line 1a, is the sum of return the organization and related organizations greater such individual.	eportabl than \$1	le co 50,00	mpe 00?	nsa If 'Y	tion es'	and comp	othe lete	er compensation : Schedule J for	from	. 4 X
5 Did any person listed on line 1a receive or accrue for services rendered to the organization? <i>If 'Yes,'</i>	compen	satio	n fr	om :	any	unrel	ate	d organization or	individual	
Section B. Independent Contractors										
Complete this table for your five highest compensation from the organization. Report compensation.		for	the	cale	nda	r yea	r er			
(A) Name and business addre	ss							Description	of services	(C) Compensation
2 Total number of independent contractors (including \$100,000 in compensation from the organization	-	t lim	ited	to t	hose	liste	ed a	bove) who receive	ed more than	
PAA	_ `	TEEA							5400	Form 990 (201

ULCIL		Check if Schedule O c		nse to any question	on in this Part VIII.			[]
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
<u> </u>	1 a	Federated campaigns	1a	inter til de som skiller skammer eller som er skille som er ble kannel fra skille skille til skille skille ski Til skille s				
888	b	Membership dues	1b					
\ <u>\</u> \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \	С	Fundraising events	1с					
병	d	Related organizations	1 d					
SS	е	Government grants (contribution	ns) 1 e					
CONTRIBUTIONS, GIFTS, GRANTS AND OTHER SIMILAR AMOUNTS	f	All other contributions, gifts, grasimilar amounts not included at	ants, and	764,037.				
N N	-	Noncash contributions included	·					
	<u>h</u>	Total. Add lines 1a-1f			764,037.			
PROGRAM SERVICE REVENUE	2-		-	Business Code				
8	2 a b							
길	C							
贸	q							
AM	e							
쯍	f	All other program service	revenue					
8	g	Total. Add lines 2a-2f						
	3	Investment income (inclu	ıdina dividends.	interest and				
		other similar amounts)			62.	62.		
	4	Income from investment	•	· ·				
	5	Royalties	(i) Real	(ii) Personal				
	6 2	Gross rents	(i) Real	(ii) Feisonai				
		Less: rental expenses		<u> </u>				130
		Rental income or (loss)						
		Net rental income or (los	s)	<u> </u>				
		Gross amount from sales of	(i) Securities	(ii) Other				100 (cm)
	<i>,</i> a	assets other than inventory.						
	b	Less: cost or other basis						
		and sales expenses						
		Gain or (loss)						
	-	Net gain or (loss)						
띨	8 a	Gross income from fundr (not including. \$	aising events					
Š		of contributions reported	on line 1c).					
뿙		See Part IV, line 18	•					
OTHER REVENUE	b	Less: direct expenses						
Ö	С	Net income or (loss) from	n fundraising ev	vents				
	9 a	Gross income from gamin See Part IV, line 19	ng activities.					(4) (2)
	b	Less: direct expenses	b)				
	С	Net income or (loss) from	n gaming activi	ties 🟲				
	10 a	Gross sales of inventory,	less returns					30 SOL
		and allowances						
		Less: cost of goods sold		I				
		Net income or (loss) from		Business Code				
	11 a			3				
	b							
	С							
	d	All other revenue						
		Total. Add lines 11a-11d						
	12	Total revenue. See instru	ctions		764,099.	62.	0.	0.

Part X Statement of Functional Expenses Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A). Check if Schedule O contains a response to any question in this Part IX..... (D) (A) Total expenses Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII. Program service Management and Fundraising expenses general expenses expenses Grants and other assistance to governments and organizations in the United States. See Grants and other assistance to individuals in the United States. See Part IV, line 22..... Grants and other assistance to governments. organizations, and individuals outside the United States. See Part IV, lines 15 and 16. 179,882 179,882 Benefits paid to or for members..... Compensation of current officers, directors, trustees, and key employees.... 8,252 81,857 73,605 Compensation not included above, to 0 0 Other salaries and wages..... 69,027 5,328 63,699. Pension plan accruals and contributions (include section 401(k) and section 403(b) Other employee benefits..... 26,292 14,607. 1,622 10,063. 11,975. 5,837. 1,078. 5,060. 11 Fees for services (non-employees): 11,598 9,626. 1,044 928. c Accounting..... 13,126 10,895 1,181 1,050. e Professional fundraising services. See Part IV, line 17. . . f Investment management fees..... g Other. (If line 11g amt exceeds 10% of line 25, col-10,648 8,838 958 852. umn (A) amt, list line 11g expenses on Sch O). 12 13 38,734 33,699 3,873 1,162. Information technology 6,534 5,423 588. 523. 15 Royalties..... Occupancy..... 2,733 16 30,368 25,206 2,429. 17 20,844 1,876. 2,501. 16,467 Payments of travel or entertainment expenses for any federal, state, or local public officials...... 19 Conferences, conventions, and meetings.... 44,772 37,161 4,029 3,582. 20 21 22 Depreciation, depletion, and amortization.... 1,466 1,466. Insurance..... Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)..... 22,790 18,916. 2,051 1,823. a Other expenses 9,751 7,801 1,170 780. b Bank and credit card charges -482 -482 Foreign currency exchange loss Ч e All other expenses..... 25 Total functional expenses. Add lines 1 through 24e. . . . 579,182 447,481 37,249 94,452. 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).....

		Check if Schedule O contains a response to any qu	estion in this Part X				
				(A) Beginning of year		(B) End of year	
	1	Cash – non-interest-bearing		185,589.	1	318,891.	
	2	Savings and temporary cash investments			2		
	3	Pledges and grants receivable, net			3		
	4	Accounts receivable, net			4	175.	
	5	Loans and other receivables from current and former of trustees, key employees, and highest compensated er Part II of Schedule L	officers, directors, nployees. Complete		5		
	6	Loans and other receivables from other disqualified pe section 4958(f)(1)), persons described in section 4958 employers and sponsoring organizations of section 50 beneficiary organizations (see instructions). Complete	ersons (as defined under (c)(3)(B), and contributing 1(c)(9) voluntary employees' Part II of Schedule L		6		
A	7	Notes and loans receivable, net			7		
ASSETS	8	Inventories for sale or use			8		
Ī	9		Prepaid expenses and deferred charges				
J	10 a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	1 1	6,800.	9	6,700.	
		Less: accumulated depreciation		3,928.	10 c	4,562.	
	11	Investments – publicly traded securities	L	3,320.	11	4,502.	
	12	Investments – other securities. See Part IV, line 11			12		
	13	Investments – program-related. See Part IV, line 11			13		
	14	Intangible assets		14			
	15	Other assets. See Part IV, line 11	1,185.	15	1 105		
	16	Total assets. Add lines 1 through 15 (must equal line 3			16	1,185. 331,513.	
	17	Accounts payable and accrued expenses	O-7)	8,230.	17	8,486.	
	18	Grants payable		83,582.	18	32,420.	
	19	Deferred revenue.		03,302.	19	32,420.	
	20	Tax-exempt bond liabilities		20			
Ī	21	Escrow or custodial account liability. Complete Part I	V of Schedule D		21		
ABILIT	22	Loans and other payables to current and former office key employees, highest compensated employees, and Complete Part II of Schedule L	ers, directors, trustees, I disqualified persons.		22		
-1	23	Secured mortgages and notes payable to unrelated th			23		
E	24	Unsecured notes and loans payable to unrelated third	•		24	2.11.11111	
	25	Other liabilities (including federal income tax, payable and other liabilities not included on lines 17-24). Com	·		25		
	26	Total liabilities. Add lines 17 through 25		91,812.	26	40,906.	
HHZ		Organizations that follow SFAS 117 (ASC 958), check lines 27 through 29, and lines 33 and 34.	k here X and complete			10 mg	
Ą	27	Unrestricted net assets		105,690.	27	270,607.	
ANNELS	28	Temporarily restricted net assets			28	20,000.	
	29	Permanently restricted net assets			29		
OR F		Organizations that do not follow SFAS 117 (ASC 958 and complete lines 30 through 34.), check here► ☐				
F DZD	30	Capital stock or trust principal, or current funds			30		
	31	Paid-in or capital surplus, or land, building, or equipm	nent fund		31		
L A	32	Retained earnings, endowment, accumulated income,			32		
野々しくZCEの	33	Total net assets or fund balances		105,690.	33	290,607.	
Š	34	Total liabilities and net assets/fund balances		197,502.	34	331,513.	
BA	A				· · · · · · · · · · · · · · · · · · ·	Form 990 (2012)	

Forn	1990 (2012) Kids In Need of Development, Education, 75	-2999028	Pa	ge 12
Pa	Reconciliation of Net Assets			
	Check if Schedule O contains a response to any question in this Part XI			<u> </u>
1	Total revenue (must equal Part VIII, column (A), line 12)		764,0	
2	Total expenses (must equal Part IX, column (A), line 25)		579,	<u>182.</u>
3	Revenue less expenses. Subtract line 2 from line 1		184,9	917.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))		105,6	<u> 590.</u>
5	Net unrealized gains (losses) on investments			
6	Donated services and use of facilities	1		
7	Investment expenses			
8	Prior period adjustments		···	
9	Other changes in net assets or fund balances (explain in Schedule O)	9		0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	290,	607.
Pa	Time Financial Statements and Reporting			•
(Ivaniana)	Check if Schedule O contains a response to any question in this Part XII			П
			Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other			10.4
	If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O.			
2:	a Were the organization's financial statements compiled or reviewed by an independent accountant?		2 a	X
_	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or review separate basis, consolidated basis, or both:			
	Separate basis Consolidated basis Both consolidated and separate basis			A SERVICE CONTRA
1	b Were the organization's financial statements audited by an independent accountant?		2 b X	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separ basis, consolidated basis, or both:	ate		
	X Separate basis			
•	c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of review, or compilation of its financial statements and selection of an independent accountant?	the audit,	2c X	
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.			
3	a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Audit Act and OMB Circular A-133?	Single	3 a	Х
١	b If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the record or audits, explain why in Schedule O and describe any steps taken to undergo such audits	uired audit	3 b	
BAA			Form 990	(2012)

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

Public Charity Status and Public Support

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

► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

OMB No. 1545-0047

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Employer identification number

Schedule A (Form 990 or 990-EZ) 2012

lame of the organization Kids In Need of Development, Education,											
	and Relief Kind	ler-USA					75-29	99028	}		
Paril	Reason for Public Charity Stat	us (All organizations m	nust cor	nplete	this pa	art.) S	ee inst	ruction	ıs.		
he o	rganization is not a private foundation be	cause it is: (For lines 1 thro	ugh 11, d	check or	ly one b	ox.)					
1	A church, convention of churches or a	association of churches desc	cribed in	section	170(b)(1)(A)(i).					
2	A school described in section 170(b)(1)(A)(ii). (Attach Schedule E)								
3	A hospital or a cooperative hospital s			ion 170	bX1XAX	(iii).					
4											
•	name, city, and state:	atou in conjunction man a r					/(-/(- 9	(,			
5	An organization operated for the benefit of a college or university owned or operated by a governmental unit described insection 170(b)(1)(A)(iv). (Complete Part II.)										
6		A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).									
7	An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.)										
8	A community trust described in section	**	e Part II.	.)							
9	An organization that normally receives: (1) more than 33-1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions — subject to certain exceptions, and (2) no more than 33-1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.)										
10	An organization organized and opera	=									
11	An organization organized and operated of supported organizations described in sect supporting organization and complete	ion 509(a)(1) or section 509(a)	perform (2). See s	the functi section 5	ons of, or 109(a)(3).	r carry o Check t	ut the pu he box th	irposes of nat descri	f one or more bes the type	e publicly of	
	a Type I b Type II	c ☐ Type III — Functio	nally inte	grated	d		Гуре III -	- Non-fu	unctionally	integrate	ed
е	By checking this box, I certify that the other than foundation managers and section 509(a)(2).	1 1 * '	-	-	directly b rganizati	y one o	or more scribed i	disqualif in section	ied persons n 509(a)(1)	or	
f	If the organization received a written check this box	determination from the IRS	that is a	Type I,	Type II	or Type	III supp	orting o	rganization	,	
g	Since August 17, 2006, has the organ	nization accepted any gift of	r contrib	ution fro	m any o	f the fo	llowing	persons	?		
										Yes N	Vo
	(i) A person who directly or indirect below, the governing body of the	tly controls, either alone or e supported organization?	together	with pe	rsons de	scribed	in (ii) a	ınd (iii)	11 g (i)		
	(ii) A family member of a person d										
	(iii) A 35% controlled entity of a per	rson described in (i) or (ii) a	above?						. 11 g (iii)		
h	Provide the following information abo								,		
	(i) Name of supported organization (ii) EIN		(iv)	s the	(v) Did yo	u notify	(vi)	s the	(vii) Amoun	t of moneta	ıry
	organization	(iii) Type of organization (described on lines 1-9 above or IRC section	organiz	ation in	the organi column (i	zation in	organiz	ration in	sup	port	
		(see instructions)	your go	verning ment?	supp	ort?	organize	nn (i) ed in the S.?			
			Yes	No	Yes	No	Yes	No			
			1	1							—
(A)	- defined to										
(B)											
(C)											
(D)											
E)								i de la companya de			
Γotal											

BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support								
Cale begi	ndar year (or fiscal year nning in) ►	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total	
1	Gifts, grants, contributions, and membership fees received. (Do not include any 'unusual grants.)	810,887.	1,028,368.	679,452.	694,796.	744,037.	3,957,540.	
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0.	
3	The value of services or facilities furnished by a governmental unit to the organization without charge						0.	
4	Total. Add lines 1 through 3	810,887.	1,028,368.	679,452.	694,796.	744,037.	3,957,540.	
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)						0.	
6	Public support. Subtract line 5 from line 4						3,957,540.	
<u>Sec</u>	tion B. Total Support							
Cale begi	ndar year (or fiscal year nning in) ►	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total	
7	Amounts from line 4	810,887.	1,028,368.	679,452.	694,796.	744,037.	3,957,540.	
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	4,888.	1,215.	615.	115.	62.	6,895.	
9	Net income from unrelated business activities, whether or not the business is regularly carried on						0.	
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						0.	
11	Total support. Add lines 7 through 10						3,964,435.	
12	Gross receipts from related activ	ities, etc (see inst	tructions)				0.	
13	First five years. If the Form 990 organization, check this box and	s for the organiza	ation's first, secon	d, third, fourth, or	fifth tax year as	a section 501(c)(3)	
	tion C. Computation of Pu	blic Support P	'ercentage					
	Public support percentage for 20						99.83%	
15	Public support percentage from 2	2011 Schedule A,	Part II, line 14			15	99.76%	
16 a	33-1/3% support test— 2012. If t and stop here. The organization	he organization d qualifies as a pub	id not check the b licly supported or	ox on line 13, and ganization	d the line 14 is 33	-1/3% or more, cl	neck this box	
b	33-1/3% support test — 2011. If the and stop here. The organization	ne organization di qualifies as a put	d not check a box plicly supported or	on line 13 or 16a ganization	, and line 15 is 3	3-1/3% or more, o	heck this box	
17 a	10%-facts-and-circumstances te or more, and if the organization the organization meets the 'facts'	meets the 'facts-a	ind-circumstances	' test. check this l	box and stop here	Explain in Part I	V how	
	10%-facts-and-circumstances te or more, and if the organization organization meets the 'facts-and	meets the 'facts-a d-circumstances' t	ind-circumstances test. The organiza	' test, check this l tion qualifies as a	box and stop here publicly supporte	• Explain in Part I ed organization	V how the ►	
18	Private foundation.If the organiz	ation did not ched	ck a box on line 1	3, 16a, 16b, 17a,	or 17b, check this	box and see inst	ructions ►	

Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Sec	tion A. Public Support						
Calen	dar year (or fiscal yr beginning in)►	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1	Gifts, grants, contributions and membership fees received. (Do not include any 'unusual grants.')					1000	
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's						
3	tax-exempt purpose Gross receipts from activities that are not an unrelated trade						
4	or business under section 513. Tax revenues levied for the organization's benefit and either paid to or expended on	.,	- Mankowski			The state of the s	
5	its behalf The value of services or facilities furnished by a governmental unit to the organization without charge						
	Total. Add lines 1 through 5 Amounts included on lines 1, 2, and 3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year.						
С	Add lines 7a and 7b						
8	Public support (Subtract line 7c from line 6.)						
Sec	tion B. Total Support						
Calen	dar year (or fiscal yr beginning in)►	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
9	Amounts from line 6						
	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975.						
_	Add lines 10a and 10b						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in						
	Part IV.)						
13	Part IV.)						
13 14	Part IV.)	s for the organiza	tion's first, secon	d, third, fourth, or	fifth tax year as a	a section 501	(c)(3)
14	Total support. (Add Ins 9, 10c, 11, and 12.) First five years. If the Form 990 i organization, check this box and		·	d, third, fourth, or	fifth tax year as a	a section 501	(c)(3)
14 Sec	Total support. (Add Ins 9, 10c, 11, and 12.) First five years. If the Form 990 i organization, check this box and tion C. Computation of Pu	blic Support F	Percentage				
14 Sec 15	Total support. (Add Ins 9, 10c, 11, and 12.) First five years. If the Form 990 i organization, check this box and tion C. Computation of Pul Public support percentage for 20	blic Support F 12 (line 8, columi	Percentage n (f) divided by lir	ne 13, column (f))			15 8
14 Sec 15 16	Total support. (Add Ins 9, 10c, 11, and 12.) First five years. If the Form 990 i organization, check this box and tion C. Computation of Pu Public support percentage for 20 Public support percentage from 2	blic Support F 12 (line 8, columi 2011 Schedule A,	Percentage n (f) divided by lin Part III, line 15 .	ne 13, column (f))			
14 Sec 15 16 Sec	Total support. (Add Ins 9, 10c, 11, and 12.) First five years. If the Form 990 i organization, check this box and tion C. Computation of Pul Public support percentage for 20 Public support percentage from 20 Total Support percentage from 20 Total Support percentage from 20 Total Support percentage from 20	blic Support F 12 (line 8, columi 2011 Schedule A, estment Incol	Percentage n (f) divided by lin Part III, line 15 . me Percentage	ne 13, column (f))			15 % 16 %
14 Sec 15 16 Sec 17	Total support. (Add Ins 9, 10c, 11, and 12.) First five years. If the Form 990 i organization, check this box and tion C. Computation of Pul Public support percentage for 20 Public support percentage from 2 tion D. Computation of Inv Investment income percentage for	blic Support F 12 (line 8, columi 2011 Schedule A, estment Incor or 2012 (line 10c,	Percentage n (f) divided by lin Part III, line 15. me Percentage column (f) divided	ne 13, column (f)) e d by line 13, colur	nn (f)		15 % 16 %
14 Sec 15 16 Sec 17 18	Total support. (Add Ins 9, 10c, 11, and 12.) First five years. If the Form 990 i organization, check this box and tion C. Computation of Pul Public support percentage for 20 Public support percentage from 2 tion D. Computation of Inv Investment income percentage for Investment Inve	blic Support F 12 (line 8, columi 2011 Schedule A, estment Incor or 2012 (line 10c, rom 2011 Schedul	Percentage n (f) divided by lir Part III, line 15. me Percentage column (f) divided e A, Part III, line	ne 13, column (f)) e d by line 13, colur 17	mn (f)		15 % 16 % 17 % 18 %
14 Sec 15 16 Sec 17 18 19 a	Total support. (Add Ins 9, 10c, 11, and 12.) First five years. If the Form 990 i organization, check this box and tion C. Computation of Pulpulic support percentage for 20 Public support percentage from 2 tion D. Computation of Investment income percentage for Investment income percentage for 33-1/3% support tests—2012. If is not more than 33-1/3%, check	blic Support F 12 (line 8, column 2011 Schedule A, estment Incor or 2012 (line 10c, rom 2011 Schedul the organization of this box and stop	Percentage In (f) divided by lin Part III, line 15. IN Percentage Column (f) divided E A, Part III, line Idid not check the In here. The organi	ne 13, column (f)) e d by line 13, colur 17	mn (f))nd line 15 is more s a publicly suppo	than 33-1/3%	15 % 16 % 17 % 18 % 6, and line 17 tion
14 Sec 15 16 Sec 17 18 19 a	Total support. (Add Ins 9, 10c, 11, and 12.) First five years. If the Form 990 i organization, check this box and tion C. Computation of Pul Public support percentage for 20 Public support percentage from 2 tion D. Computation of Inv Investment income percentage from 1 to 10 to	blic Support F 12 (line 8, column 2011 Schedule A, estment Incor or 2012 (line 10c, rom 2011 Schedul the organization of this box and stop	Percentage In (f) divided by lin Part III, line 15. IN Percentage Column (f) divided E A, Part III, line Idid not check the In here. The organi	ne 13, column (f)) e d by line 13, colur 17	mn (f))nd line 15 is more s a publicly suppo	than 33-1/3%	15 % 16 % 17 % 18 % 6, and line 17 tion

Schedu	le A	(Form	990 or	990-E	EZ) 20	12	Kids	In	Need	l of	Dev	elop	ment,	Educ	ation	١,	75-2 <u>9</u>	<u>99028</u>		Page 4
(Pariti	<u>V</u>	Supp l Part	emen II, line instru	t al In t e 17a	f <mark>orma</mark> or 1	a tion. 7b; a	Com and P	plete art l	this p	art to	o prov Also	vide th comp	ne expl plete ti	anatior his par	ns requi t for ar	ired by ny add	Part l	I, line 1 inforn	0; nation.	
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	· - -																			

SCHEDULE D (Form 990)

Supplemental Financial Statements

► Complete if the organization answered 'Yes,' to Form 990, Part IV, lines 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ► Attach to Form 990. ► See separate instructions.

OMB No. 1545-0047 2012 Open to Public Inspection
Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization

	ds In Need of Development, Edu d Relief Kinder-USA	acation,			75-299	99028			
	Organizations Maintaining Donor A the organization answered 'Yes'	dvised Funds or Other Simi	lar Funds or A	ccounts. C					
		(a) Donor advised fu				other acco	unts		
1	Total number at end of year								
2	Aggregate contributions to (during year)								
3	Aggregate grants from (during year)								
4	Aggregate value at end of year								
5	Did the organization inform all donors and dor are the organization's property, subject to the	nor advisors in writing that the a organization's exclusive legal c	ssets held in dor	nor advised f	unds	Yes		No	
6	6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?								
7	Conservation Easements. Comp						<u> </u>		
	Purpose(s) of conservation easements held by			toronni	330, 1 a	it iv, iiiie	, , .		
'	Preservation of land for public use (e.g., r	·	ਿਕਸ਼ਸ਼ਮਾ. □Preservation o	of an historic	ally impor	tant land a	raa		
	Protection of natural habitat	ecreation or education)	Preservation of		•		ca		
	Preservation of open space	L		n a continea	ilistorio st	ractare			
2		on held a qualified conservation	contribution in t	the form of a	conserva	ition easem	ent c	n the	
				H	leld at the	e End of the	е Тах	Year	
	a Total number of conservation easements			2a					
	b Total acreage restricted by conservation easer	ments		2b					
	c Number of conservation easements on a certification	fied historic structure included in	n (a)	2c					
	d Number of conservation easements included in structure listed in the National Register	n (c) acquired after 8/17/06, and	d not on a histori	ic 2 d			. 114		
3	Number of conservation easements modified, tax year ►	transferred, released, extinguis	hed, or terminate	ed by the org	anization	during the		4.1	
4	Number of states where property subject to co	onservation easement is located	>						
5	Does the organization have a written policy re and enforcement of the conservation easemer	garding the periodic monitoring	, inspection, han	dling of viola	itions,	Yes		No	
6	Staff and volunteer hours devoted to monitorin	ng, inspecting, and enforcing co	nservation easer	ments during	the year				
7	Amount of expenses incurred in monitoring, ir ►\$	nspecting, and enforcing conser	vation easement	s during the	year				
8	Does each conservation easement reported or and section 170(h)(4)(B)(ii)?	n line 2(d) above satisfy the req	uirements of sec	tion 170(h)(4	l)(B)(i) [Yes		No	
9	In Part XIII, describe how the organization repinclude, if applicable, the text of the footnote conservation easements.	ports conservation easements in to the organization's financial st	its revenue and tatements that de	expense states	atement, a organizati	and balance ion's accou	she nting	et, and for	
Pa	Organizations Maintaining Collect Complete if the organization ans	tions of Art, Historical Tre swered 'Yes' to Form 990,	asures, or Oth Part IV, line	n <mark>er Similar</mark> 8.	Assets.	,			
1	a If the organization elected, as permitted under art, historical treasures, or other similar assets in Part XIII, the text of the footnote to its finar	s held for public exhibition, edu	cation or resear	nue statemer ch in furthera	it and bala ance of pu	ance sheet ublic service	work e, pro	s of ovide,	
	b If the organization elected, as permitted under historical treasures, or other similar assets he following amounts relating to these items:	ld for public exhibition, education	on, or research ir	n furtherance	of public	e sheet wor service, pr	ks of ovide	art, the	
	(i) Revenues included in Form 990, Part VIII,					·			
	(ii) Assets included in Form 990, Part X								
	If the organization received or held works of a amounts required to be reported under SFAS						wing	_	
	a Revenues included in Form 990, Part VIII, line								
	b Assets included in Form 990, Part X				▶ Ş	,			

Schedule D (Form 990) 2012 Kids In Need Paralli Organizations Maintaining Collections	of Development,	Education, al Treasures, or Oth	75-299 ner Similar Assets (9028 continuec	Page 2				
3 Using the organization's acquisition, accessic items (check all that apply):									
a Public exhibition	d ☐ Loan o	r exchange programs							
b Scholarly research	e Other								
c Preservation for future generations			All						
4 Provide a description of the organization's co	llections and explain how	they further the organia	zation's exempt purpose	e in					
5 During the year, did the organization solicit o to be sold to raise funds rather than to be ma	r receive donations of art, aintained as part of the org	historical treasures, or ganization's collection?	other similar assets	Yes	No				
Park IV Escrow and Custodial Arrangements. (reported an amount on Form 99)	Complete if the organizati 90, Part X, Iine 21.	on answered 'Yes' to	Form 990, Part IV, line	9, or					
1 a Is the organization an agent, trustee, custodi on Form 990, Part X?	an, or other intermediary f	or contributions or other	er assets not included	Yes	□No				
b If 'Yes,' explain the arrangement in Part XIII and complete the following table:									
B : : 1 1				Amount					
c Beginning balance									
d Additions during the year									
e Distributions during the year									
f Ending balance			1	Yes	□ No				
b If 'Yes,' explain the arrangement in Part XIII.				1	No				
bit res, explain the attaingement in ratt XIII.	Check here if the explaint	ion has been provided	III F all All		·· [_]				
Part V. Endowment Funds. Complete if	the organization ansy	vered 'Yes' to Forn	n 990 Part IV line	10					
(a) Curre			(d) Three years	(e) Four	years				
1 a Beginning of year balance			, , , , , , , , , , , , , , , , , , , ,						
b Contributions									
c Net investment earnings, gains,		45							
and losses									
e Other expenditures for facilities and programs									
f Administrative expenses									
g End of year balance									
2 Provide the estimated percentage of the curre	ent year end balance (line	1g, column (a)) held a	as:						
a Board designated or quasi-endowment	8								
b Permanent endowment ►	%								
c Temporarily restricted endowment ►	8								
The percentages in lines 2a, 2b, and 2c shou	ild equal 100%.								
3 a Are there endowment funds not in the posses organization by:	ssion of the organization t	nat are held and admir	nistered for the	Ye	es No				
(i) unrelated organizations				. 3a(i)					
(ii) related organizations									
b If 'Yes' to 3a(ii), are the related organizations									
4 Describe in Part XIII the intended uses of the	organization's endowmer	it funds.		L	- 				
Part VII Land, Buildings, and Equipmer	nt. See Form 990, Pa	art X, line 10.							
Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Bool	k value				
1 a Land									
b Buildings	1								
c Leasehold improvements		PHA							
d Equipment		13,662.	9,100.		4,562.				
e Other		3,538.	3,538.	···	0.				
Total. Add lines 1a through 1e. (Column (d) must e	equal Form 990, Part X, co	Numn (B), line 10(c).).			4,562.				
BAA			Sched	ule D (Forn	n 990) 2012				

Schedule D (Form 990) 2012 Kids In Need of Development, Educat		75-2999028	Page 4
Part XI Reconciliation of Revenue per Audited Financial Statements V			
1 Total revenue, gains, and other support per audited financial statements		1	764,099.
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:			,
a Net unrealized gains on investments	2 a		
b Donated services and use of facilities			
c Recoveries of prior year grants	<u></u>		
d Other (Describe in Part XIII.).	<u> </u>		
e Add lines 2a through 2d			
3 Subtract line 2e from line 1		3	764,099.
4 Amounts included on Form 990, Part VIII, line 12, but not on line1:			
a Investment expenses not included on Form 990, Part VIII, line 7b	4 a		
b Other (Describe in Part XIII.)	4 b		
c Add lines 4a and 4b		4c	
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			764,099.
Rant XIII Reconciliation of Expenses per Audited Financial Statements	 		7017033.
1 Total expenses and losses per audited financial statements			E70 100
•		• • •	579,182.
2 Amounts included on line 1 but not on Form 990, Part IX, line 25:			
a Donated services and use of facilities			
b Prior year adjustments			
c Other losses			
d Other (Describe in Part XIII.).	2 d		
e Add lines 2a through 2d		2e	
3 Subtract line 2e from line 1		3	579,182.
4 Amounts included on Form 990, Part IX, line 25, but not on line1:			
a Investment expenses not included on Form 990, Part VIII, line 7b	4 a		
b Other (Describe in Part XIII.)			
c Add lines 4a and 4b		4c	
5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.).			579,182.
Part XIII Supplemental Information			373,102.
Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Pa line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also com			b; Part V, rmation.
BAA		Schedule D (F	orm 990) 2012

Schedule F (Form 990)

Statement of Activities Outside the United States

Complete if the organization answered 'Yes' to Form 990, Part IV, line 14b, 15, or 16.
 ► Attach to Form 990.
 ► See separate instructions.

Open to Public Inspection

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Employer identification number

75-2999028

Kids In Need of Development, Education, General Information on Activities Outside the United States. Complete if the organization answered 'Yes' to Form 990, Part IV, line 14b.

- For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?.... X Yes
- 2 For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States. Part V

3 Activities per Region. (The	following Part I, I	ine 3 table can be	e duplicated if additional space	e is needed.)	
(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e.g., fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region
(1) Palastina			Cranta	Development,	02 005
(1) Palestine		ATTACK TO THE STATE OF THE STAT	Grants	health	93,995.
(2) Belgium	1	1			0.
(3) Kenya			Grants	Relief	6,250.
(4) Lebanon			Grants	Health, Education	79,637.
(5)					
(6)					
(7)	1 10 10 10 10 10 10 10 10 10 10 10 10 10				
(8)					
(9)					
(10)					
(11)					
(12)					
<u>(13)</u>					
(14)					
(15)					
(16)		701-701-701-701-701-701-701-701-701-701-			
(17)					***
3 a Sub-total	1	1			179,882.
b Total from continuation sheets to Part I					
c Totals (add lines 3a and 3b)	1	1			179,882.

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

Schedule F (Form 990) 2012

Schedule F (Form 990) 2012 Kids In Need of Development, Education,

Rational Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered 'Yes' to Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

Page 3

75-2999028

Parill Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered 'Yes' to Form 990, Part IV, line 16. Part III can be duplicated if additional space is needed. Kids In Need of Development, Education, Schedule F (Form 990) 2012

(h) Method of valuation (book, FMV, appraisal, other) Schedule F (Form 990) 2012 (g) Description of non-cash assistance (f) Amount of non-cash assistance (e) Manner of cash disbursement (d) Amount of cash grant (c) Number of recipients (b) Region (a) Type of grant or assistance (18) BAA € (2) 4 8 (OL) <u>E</u> (12) (13) (14) (12) (91) (1) ල (5) 9 8 ව

	the recommendation of the second of the seco	-2999028	Page 4
Par	Foreign Forms		
1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If 'Yes,' the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	… Yes	X No
2	Did the organization have an interest in a foreign trust during the tax year? If 'Yes,' the organization may be required to file Form 3520, Annual Return To Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A)	… Yes	X No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If 'Yes,' the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect To Certain Foreign Corporations. (see Instructions for Form 5471)	Yes	X No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If 'Yes,' the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621)	Yes	X No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If 'Yes,' the organization may be required to file Form 8865, Return of U.S. Persons With Respect To Certain Foreign Partnerships. (see Instructions for Form 8865)	…	X No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If 'Yes,' the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form 5713)	Yes	X No
BAA	TEEA3505L 12/17/12	Schedule F (For	m 990) 2012

Schedule F	(Form 990) 2012	Kids In Need	of Development,	Education,	75-2999028	Page 5
PartV	Supplemental	Information				
Transaction of the Control of the Co	Complete this	part to provide the	information require	d by Part I, line 2	(monitoring of funds); Par	t I, line 3,
	column (f) (ac	counting method;	amounts of investm	ents vs expenditu	res per region); Part II, lin in (c) (estimated number onal information (see instr	ie 1
	(accounting m	ethod); Part III (ad	counting method);	and Part III, colum	in (c) (estimated number	Ot (uctions)
						uctions).
Part	<u>I, Line 2 - Gran</u>	<u>tmakers Explanat</u>	<u>ion For Monitoring</u>	<u>Use of Funds Out</u>	<u>side US </u>	
Prof	ressional au	dits and site	visitations			
	copronar ag	7112 7117 7116 -	ATOTOG CTOHO!			
						
	.					
						

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

OMB No. 1545-0047

Open to Public linepedition

Department of the Treasury Internal Revenue Service

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.

Name of the organization Kids In Need of Development, Education,	Employer identification number								
and Relief Kinder-USA	75-2999028								
Form 990, Part III, Line 4d - Other Program Services Description									
Emergency Relief									
Form 990, Part VI, Line 11b - Form 990 Review Process									
After filing, board of directors meet and discusses the Form 990.									
Form 990, Part VI, Line 12c - Explanation of Monitoring and Enforcement of Conflicts									
Disclose conflict, review and resolve.									
Form 990, Part VI, Line 15b - Compensation Review & Approval Process - Officers & Key Employees									
Board of Directors make decision by majority vote.									
Form 990, Part VI, Line 19 - Other Organization Documents Publicly Availab	ole								
For state registrations									