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Form 990

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

benefit trust or private foundation)
 The organization may have to use a copy of this return to satisfy state reporting requirements.

2012

Open to Public Inspection

<u>A</u>	For the	2012 calendar year, or tax year beginning and o	ending						
В	Check if applicable	C Name of organization		D Employer identific	r identification number				
	Addres: change	JUST KIDS CHILD DEVELOPMENT CENTER, IN	NC						
	Name change	Doing Business As		30-00	083132				
	Initial return	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite						
	Termin- ated	120 SHAVER-JOHNSON STREET		434	793-2404				
	Amende	City, town, or post onice, state, and ZIP code		G Gross receipts \$	299,561.				
	Applica tion pending	DANVILLE, VA 24540		H(a) is this a group re					
	pending	F Name and address of principal officer KATHY ATKINS	_	for affiliates?	Yes X No				
		222 CLARKSON DRIVE, DANVILLE, VA 24540		H(b) Are all affiliates incl	luded?Yes No				
		mpt status X 501(c)(3) 501(c)() ◀ (insert no.) 4947(a)(1) c	or 527	7	list. (see instructions)				
		e: ▶ N/A		H(c) Group exemption					
		organization: X Corporation	L Year	of formation: 2002 M	State of legal domicile: VA				
ě	1 E	Briefly describe the organization's mission or most significant activities. ${ m {f TO}\ { m {f PI}}}$			ITH				
Activities & Governance	2	COMPREHENSIVE SERVICES TO ASSIST WITH CHI							
er	2 (Check this box (if the organization discontinued its operations or dispos	sed of more	e than 25% of its net as	sets.				
્ટ્રે	3 1	Number of voting members of the governing body (Part VI, line 1a)		3	6				
<u>«</u>	4 1	Number of independent voting members of the governing body (Part VI, line 1b)		4	3				
ties	5 1	otal number of individuals employed in calendar year 2012 (Part V, line 2a)		5	18				
ξį	6 1	Total number of volunteers (estimate if necessary)		6	0				
Ac	7 a l	Total unrelated business revenue from Part VIII, column (C), line 12		7a	0.				
	l br	Net unrelated business taxable income from Form 990-T, line 34		7b	0.				
	8 (Contributions and grants (Part VIII, line 1h)		Prior Year 37,077.	Current Year 46,721.				
Revenue	9 6	Program service revenue (Part VIII, line 2g) RECEIVEI)	7	265,232.	252,840.				
š	10	nvestment income (Part VIII, column (A), lines 3, 4, and 7d)	0.						
ă	11 (Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c,(and 11e) 0 2013	787	0. 50.	0.				
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		302,359.	299,561.				
		Grants and similar amounts paid (Part IX, column (A), lines (-3)	15	0.	0.				
		Benefits paid to or for members (Part IX, column (A), line 4) GDEN 111		0.	0.				
S	1	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		187,162.	177,343.				
Expenses	16a F	Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.				
Ž	- b 7	Fotal fundraising expenses (Part IX, column (D), line 25)	<u>97. </u>						
ш	17 (Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		117,597.	<u> 128,815.</u>				
	L	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		304,759.	<u>306,158.</u>				
	19 F	Revenue less expenses Subtract line 18 from line 12		<2,400.	><6,597.				
ts or			Be	eginning of Current Year	End of Year				
Net Assets or	20	Fotal assets (Part X, line 16)		7,457.	8,513.				
et d	21	Fotal liabilities (Part X, line 26)		36,423.	44,076.				
	<u>22 ∣</u> Part II	Net assets or fund balances Subtract line 21 from line 20 Signature Block		<28,966.	> <35,563.				
		ties of perjury, I declare that I have examined this return, including accompanying schedule:	e and etatom	nents, and to the heat of m	u knowledge and helief it is				
		i, and complete. Declaration of preparer (other than officer) is based on all information of wh			y Kilowieuge aliu Deliel, il 15				
	0, 00,100	Vother Other Process	non proparo	S/14/20	12				
Sig	an I	Signature of officer		Date ///	13				
	ere	KATHY ATKINS, PRESIDENT							
• • • •		Type or print name and title							
		Print/Type preparer's name Preparer's signeriure	1	Date , Check	PTIN				
Pa		ROBERT D. DORR	n C/A	Date 14/13 Check in self-employee	P00281767				
Preparer Firm's name FOSTER & DORR P.C. Firm's EIN 54-1348538									
	e Only	Firm's address P.O. BOX 2100							
_		DANVILLE, VA 24541-0100		Phone no. (<u>434) 792-2101</u>				
Ma	ay the IF	S discuss this return with the preparer shown above? (see instructions)			X Yes No				
232	2001 12-10	0-12 LHA For Paperwork Reduction Act Notice, see the separate instruction	ons.		Form 990 (2012)				

	990 (2012) JUST KIDS CHILD DEVELOPMENT CENTER, INC 30-0083132 Page 2
Pai	Statement of Program Service Accomplishments
	Check if Schedule O contains a response to any question in this Part III
1	Briefly describe the organization's mission:
	TO PROVIDE A SAFE ENVIRONMENT THAT FOSTERS HEALTHY EMOTIONAL,
	INTELLECTUAL, PHYSICAL AND SOCIAL DEVELOPMENT FOR CHILDREN AGES TWO
	THROUGH TWELVE.
2	Did the organization undertake any significant program services during the year which were not listed on
	the prior Form 990 or 990-EZ?
	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?
•	If "Yes," describe these changes on Schedule O
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses
7	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and
	·
	revenue, if any, for each program service reported
4a	(Code) (Expenses \$28.60. including grants of \$) (Revenue \$252,840.)
	TO PROVIDE A SAFE ENVIRONMENT THAT FOSTERS HEALTHY EMOTIONAL,
	INTELLECTUAL, PHYSICAL AND SOCIAL DEVELOPMENT FOR CHILDREN AGES TWO
	THROUGH TWELVE.
	•
4b	(Code) (Expenses \$
4c	(Code) (Expenses \$
4d	Other program services (Describe in Schedule O.)
	(Expenses \$ including grants of \$) (Revenue \$)
4e	Total program service expenses ► 228,860.
	Form 990 (2012)
23200 12-10	2

			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_	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	_ 2	<u>X</u>	
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			v
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect	3		<u> </u>
•	during the tax year? If "Yes," complete Schedule C, Part II	4		х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		x
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		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for			
	amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		X
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		<u> </u>
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI		.	
h	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total	11a	X	
b	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		х
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total	110		- 11
Ī	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		х
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		x
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a		_X
b	Was the organization included in consolidated, independent audited financial statements for the tax year?	i		
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
U	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization	ITD		
	or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals			
	located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		X
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a	-	X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	000	(0015)
		rorm	990	(2012)

			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the			
	United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		x
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		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
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K If "No", go to line 25	24a		Х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a			
	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		Х
b	Is the organization aware that it engaged in an excess benefit transaction with a 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
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a	X	
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b	X	
С	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		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		X
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		X
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
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	<u> </u>	X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?]	
	If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?			
	Note. All Form 990 filers are required to complete Schedule O	38	Х	

Form 990 (2012) JUST KIDS CHILD DEVELOPMENT CENTER, 30-0083132 Part V Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response to any question in this Part V Ye<u>s</u> No 1a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 0 b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? X 1c 2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, 18 filed for the calendar year ending with or within the year covered by this return b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? 2b X Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? Х За b If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O 4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? X 4a **b** If "Yes," enter the name of the foreign country See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts. 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? X 5a X b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5b 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 X any contributions that were not tax deductible as charitable contributions? 6a b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 6b 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 services provided to the payor? X 7a b If "Yes," did the organization notify the donor of the value of the goods or services provided? 7b c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required X to file Form 8282? 7c d If "Yes," indicate the number of Forms 8282 filed during the year Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7е Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 7f If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? 7g g If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? 7h h Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year? 8 Sponsoring organizations maintaining donor advised funds. a Did the organization make any taxable distributions under section 4966? 9a b Did the organization make a distribution to a donor, donor advisor, or related person? 9b Section 501(c)(7) organizations. Enter: 10 a Initiation fees and capital contributions included on Part VIII, line 12 10a Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b Section 501(c)(12) organizations, Enter: a Gross income from members or shareholders 11a Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them) 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12a b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 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 X 14a Did the organization receive any payments for indoor tanning services during the tax year? 14a

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If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O

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

	Check if Schedule O contains a response to any question in this Part VI			X								
Sec	tion A. Governing Body and Management											
			Yes	No								
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 5											
	If there are material differences in voting rights among members of the governing body, or if the governing											
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.											
þ	Enter the number of voting members included in line 1a, above, who are independent 1b 3											
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other	,										
	officer, director, trustee, or key employee?	2	_X									
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision											
	of officers, directors, or trustees, or key employees to a management company or other person?	3_		X								
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X								
5												
6	Did the organization have members or stockholders?	6		_X_								
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or											
	more members of the governing body?	7a		<u>X</u>								
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			İ								
	persons other than the governing body?	7b		X								
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:											
а	The governing body?	8a	X									
b	Each committee with authority to act on behalf of the governing body?	8b	X									
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 in Schedule O	9		_X								
Sec	tion 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		<u> </u>								
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 in Schedule O the process, if any, used by the organization to review this Form 990			ĺ								
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		L								
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe											
	in Schedule O how this was done	12c		L								
13	Did the organization have a written whistleblower policy?	13	ļ <u>.</u>	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	<u> </u>	X								
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)	1										
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a											
	taxable entity during the year? .	16a		X								
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation											
	ın joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's											
	exempt status with respect to such arrangements?	16b										
Sec	tion C. Disclosure											
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, and 990-T (Section 501(c)(3)s only)	avaılat	ole									
	for public inspection. Indicate how you made these available. Check all that apply.											
	Own website Another's website X Upon request Other (explain in Schedule O)											
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, are	d finai	ncial									
	statements available to the public during the tax year.											
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the organization of the person who possesses the books and records of the organization of the organization of the person who possesses the books and records of the organization o	tion 🕨	-									
	THE ORGANIZATION - 434 793-2404											
	120 SHAVER-JOHNSON STREET, DANVILLE, VA 24540											

Form 990 (2012)	JUST	KIDS	CHILD	DEVELOPMENT	CENTER,	INC	_30-0083132	Page 7
Part VII Compensation	of Offic	cers, Dir	rectors, T	rustees, Key Emp	loyees, High	est Con	npensated	
Employees, ar	nd Indep	endent	Contract	tors				

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

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

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

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

(A) Name and Title	(B) Average hours per week	box	Position (do not check more than one box, unless person is both an officer and a director/trustee)					(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
1) KATHY C ATKINS	40.00		1							
RESIDENT/TREASURER		X		Х		<u> </u>		5,200.	0.	1,151
2) RHONDA A WORRELL	40.00									
VICE PRESIDENT		X	ļ	X		<u> </u>		26,000.	0.	4,080
3) MICHAEL W WORRELL	1.00								_ :	_
SECRETARY		X	<u> </u>	X	_	<u> </u>		0.	0.	0
4) GEORGE SAGAN	1.00									
DIRECTOR	1 00	X	<u> </u>	_	ļ		-	0.	0.	0
5) LINDA BAILEY	1.00									
DIRECTOR	1 00	X	-			-	-	0.	0.	C
6) MAE GREENE DIRECTOR	1.00	$ \mathbf{x} $						0.	0.	(
		-								
						-				
						-				
		-	_							_
		-	-	_		-				_
	-	\dashv		1			1			

		JUST KIDS					_					<u>)83</u>	<u>132</u>	<u>P</u> a	age 8
Par	t VII Section A. Officers	, Directors, Trus	tees, Key Em	oloy	ees,	and	d Hi	ghe	st C	ompensated Employ	ees (continued)				
	(A)		(B)			_ (0				(D)	(E)	i		(F)	
	Name and title		Average	(do not check more than one						Reportable Reportable			Es	stimate	ed
			hours per	box, unless person is both an officer and a director/trustee)					h an	compensation	compensatio		an	nount	of
			week (list any					Jiruus	(66)	from	from related		other		
			hours for	lirecto				_		the	organizations (W-2/1099-MIS			compensation	
			related) o o	stee			sate		organization (W-2/1099-MISC)	(44-271033-14110	,0,		from the organization	
			organizations	truste	al tru		ag.	ш		(** 2/ 1000 *********************************			-	d relate	
			below	Individual bustee or directol	institutional trustee	a	Key employee	esto	JG.				orga	anızatı	ons
			line)	upul	Instr	Officer	Č.	Highest compensated employee	Form						
						l						ŀ			
										_					
							Ì								
								<u> </u>							
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			ļ		ļ	-	<u> </u>	 	_						
				ļ											
			1				_	Ļ		24 000		_			
	Sub-total									31,200		0.		5,2	
	Total from continuation		I, Section A							31,200	•	0.			<u>0.</u>
	Total (add lines 1b and 1	-			14.			<u> </u>			0.000 - 6			5,2	<u> 31.</u>
2	Total number of individual		ot ilmited to tr	iose	IISTE	ea a	DOV	e) wr	10 r	eceived more than \$10	ou,uuu or reportab	е			0
	compensation from the or	gariization									·····			Yes	No
3	Did the organization list ai	ov former officer	director or tri	ieto	a ka	N/ Or	mole	2000	or	highest compansated	employee on	ſ			
•	line 1a? If "Yes," complete	•			C, KC	, y C1	пріс	Jycc	, 01	riigilest compensated	employee on		3		Х
4	For any individual listed o				omn	ens	atior	n and	i oti	her compensation from	the organization	Ì			
•	and related organizations										Title organization		4	[х
5	Did any person listed on li	-									vidual for services				
•	rendered to the organizati]	5		х
Sec	tion B. Independent Cont														
1	Complete this table for yo	ur five highest co	mpensated in	dep	ende	ent c	ont	racto	ors 1	that received more tha	n \$100,000 of com	npens	ation	from	
	the organization. Report of	compensation for	the calendar y	ear	endı	ıng v	vith	or w	rthir	n the organization's tax	year.	·			
		(A)								(B)			(0	C)	
	Na	me and business	address	N	ONI	Ξ				Description of	services	C		nsatio	n
								_							_
									- 1						
						_			_						
				_											
											ļ				
	Takahara da da da									<u> </u>					
2	Total number of independ		=	ot l	ımıte	ed to		_	stec	d above) who received	more than	ı			
	\$100,000 of compensation	on from the organ	zation					0				—		000	0015
													⊢0rm	33U (2012)

299,561.

Total revenue. See instructions.

252,840

0

0.

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 not include amounts reported on lines 6b,	(A) Total expenses	(B) Program service	(C) Management and	(D) Fundraising
7b,	8b, 9b, and 10b of Part VIII.	. Otal Onpolisos	expenses	general expenses	expenses
1	Grants and other assistance to governments and				
	organizations in the United States. See Part IV, line 21		_		-
2	Grants and other assistance to individuals in				
	the United States. See Part IV, line 22				
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				
	United States. See Part IV, lines 15 and 16	_			
4	Benefits paid to or for members			_	
5	Compensation of current officers, directors,				
	trustees, and key employees	31,200.	19,500.	11,700.	
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	126,934.	94,290.	32,644.	
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)				_
9	Other employee benefits	7,717.	7,717.		
0	Payroll taxes	11,492.	11,492.		
1	Fees for services (non-employees).				
а	Management				
b	Legal				
С	Accounting				
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other (If line 11g amount exceeds 10% of line 25,				
_	column (A) amount, list line 11g expenses on Sch O.)				
12	Advertising and promotion	297.			297
13	Office expenses	1,452.		1,452.	7.7
14	Information technology	2,894.	1,447.	1,447.	
15	Royalties			, <u> </u>	
16	Occupancy	57,626.	46,634.	10,992.	
17	Travel	•			
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23	Insurance	11,932.	5,966.	5,966.	
24	Other expenses. Itemize expenses not covered				
•	above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A)				
а	amount, list line 24e expenses on Schedule 0.) FOOD	21,405.	21,405.		
a b	DOLLT DATE DESIGNAT AND MA	18,399.	8,734.	9,665.	
_	חווחו	7,677.	7,677.	7,003.	
2	MAN COMPERE ACREEMENT	3,119.	1,011•	3,119.	•
d	All other expenses	4,014.	3,998.	16.	
	·	306,158.	228,860.	77,001.	297
2 <u>5</u>	Total functional expenses. Add lines 1 through 24e	300,130.	440,000.		491
26	Joint costs. Complete this line only if the organization	1			
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				

Form **990** (2012)

Total liabilities and net assets/fund balances

7,457.

Form	990 (2012) JUST KIDS CHILD DEVELOPMENT CENTER, INC	30-008	<u> 3132</u>	Pag	_{le} 12
Pa	t XI Reconciliation of Net Assets				
	Check if Schedule O contains a response to any question in this Part XI		_		
1	Total revenue (must equal Part VIII, column (A), line 12)	1		<u>9,5</u>	
2	Total expenses (must equal Part IX, column (A), line 25)	2	30	<u>6,1</u>	<u>58.</u>
3	Revenue less expenses. Subtract line 2 from line 1	3			<u>97.</u> >
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	<2	<u>8,9</u>	<u>66.</u> >
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
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	<3	5,5	<u>63.</u> >
Pa	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII				
				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," explain in Schedul	e O.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	ed 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		<u>X</u>
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	ite basis,			
	consolidated basis, or both				
	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 oversight of t	he audıt,			
	review, or compilation of its financial statements and selection of an independent accountant?		2c		
	If the organization changed either its oversight process or selection process during the tax year, explain in Sc	nedule O.			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the S	ingle Audit			
	Act and OMB Circular A-133?		За		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	uired audit			
	and the second control of the desire of the control of the second of the		1 0-	ı	ı

232012 12-10-12

Form **990** (2012)

SCHEDULE A

Department of the Treasury Internal Revenue Service

(Form 990 or 990-EZ)

Public Charity Status and Public Support

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

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

OMB No 1545-0047

Open to Public Inspection

Name of the organization

Employer identification number

			DS CHILD DEV						3	0-0083	132		
Part I	Reason	or Public Char	ity Status (All organiza	ations mus	t complete	e this part) See inst	ructions					
he organ	nization is not a	private foundation	because it is. (For lines 1	through 1	1, check of	only one b	ox.)						
1	A church, cor	vention of churches	s, or association of churc	ches descr	ibed in se	ction 170	b)(1)(A)(i)						
2	A school desc	cribed in section 17	0(b)(1)(A)(ii). (Attach Scl	hedule E.)									
3 🖳	A hospital or	a cooperative hospi	tal service organization o	described i	n section	170(b)(1)(A)(iii).						
4 📖	A medical res	earch organization of	operated in conjunction	with a hosi	oital descr	ibed in se	ction 170	(b)(1)(A)(iii	i). Enter t	he hospital'	s name) ,	
	city, and state												
5	=	•	benefit of a college or ur	niversity ov	vned or op	erated by	a governr	nental unit	describ	ed in			
	section 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(I	o)(1)(A)(vi). (Comple	te Part II)										
8 🖳	A community	trust described in s	ection 170(b)(1)(A)(vi). ((Complete	Part II)								
9 LXJ	An organizati	on that normally rec	eives: (1) more than 33 1	1/3% of its	support fr	om contri	outions, m	nembership	o fees, a	nd gross rec	eipts fr	om	
		•	nctions - subject to certa	•		•				•			
			axable income (less sect	ion 511 tax	x) from bu	sinesses a	cquired b	y the orga	nization	after June 3	0, 1975	,	
		509(a)(2). (Complete	•										
10	_	-	perated exclusively to tes	•	-			•			_		
11	•	-	perated exclusively for th		-					•		r	
	•		ations described in section		-) See sec	ction 509(a	a)(3). Ch	eck the box	that		
			organization and comple		_			. —					
	a Type I		•	ype III - Fur	•	•	,	• •		n-functionally			
е 📖		•	at the organization is not		-	-	-		•	•		l .	
		•	han one or more publicly		-				a(a)(1) or	section 509	(a)(2).		
f	•		ten determination from t	ine ino ina	ititis a ry	ре і, туре	ii, or Type	# III					
_		ganization, check the	organization accepted ar	y aft or co	ontribution	from any	of the follo	owing pers	eone?				
g	_		lirectly controls, either al					=		1	Yes	No	
		-	upported organization?	one or tog	Culci Willi	persons o	CSCIIDCU	iii (ii) aila (i	iii) DCiO	11g(i)	163	110	
	-		n described in (i) above?							11g(ii)			
		· ·	person described in (i) o		97					11g(iii)			
h	• •	•	about the supported or							(* ig(/)			
••		one wing intermedien	about the supported of	garnzanon	(0)								
(i) Name	e of supported	(ii) EIN	(iii) Type of organization	(iv) Is the o	roanization	(v) Did you	i notify the	(vi) ls	the	(vii) Amount	of mone	oton.	
` '	anization	(11) = 114	(described on lines 1-9	in col. (i) lis		organizat	ion in col.	organizatio	on in col.	sup		stat y	
0.8	, aca.io		above or IRC section	governing	document?	(i) of your	support?	Ü.S.	.2	4-61	, , ,		
			(see instructions))	Yes	No	Yes	No	Yes	No				
								ļ					
			-					ļ	ļ				
		-		-		-							
				1				-	 				
Tatal		Ì		1									

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

Schedule A (Form 990 or 990-EZ) 2012

232021 12-04-12

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

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

Sec	tion A. Public Support						
Cale	ndar year (or fiscal year 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.")			•			
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to				1		
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions						-
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included				•		
	on line 1 that exceeds 2% of the						
	amount shown on line 11,			-			
	column (f)						
6	Public support. Subtract line 5 from line 4						
Sec	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
7	Amounts from line 4						
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties				•		
	and income from similar sources			·			
9	Net income from unrelated business						_
	activities, whether or not the						
	business is regularly carried on						
10	Other income Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part IV)						
11	Total support. Add lines 7 through 10		<u> </u>				
12	Gross receipts from related activities,	etc. (see instruct	ons)			12	
13	First five years. If the Form 990 is for	•	s first, second, thi	rd, fourth, or fifth t	ax year as a sectio	n 501(c)(3)	
	organization, check this box and stor						
	ction C. Computation of Publ					, ,	
	Public support percentage for 2012 (•	column (f))		14	<u> </u>
	Public support percentage from 2011	•	·			15	%
16a	a 33 1/3% support test - 2012. If the c	-			14 is 33 1/3% or r	nore, check this bo	ox and
	stop here. The organization qualifies		-				. ▶□
t	o 33 1/3% support test - 2011. If the	-			d line 15 is 33 1/3%	6 or more, check th	nis box
	and stop here. The organization qual	· ·	• • •				
178	a 10% -facts-and-circumstances tes	`	-				
	and if the organization meets the "fac		· ·	•	•	rt IV how the organ	nization
	meets the "facts-and-circumstances"	-	•		_	·=	▶∟
t	o 10% -facts-and-circumstances tes	`				•	
	more, and if the organization meets the				•		,
	organization meets the "facts-and-circ		=		· · · · · ·		. ►
18	Private foundation. If the organization	on ala not check a	box on line 13, 16	oa, 160, 1/a, or 17			
					Sch	edule A (Form 990	or 990-EZ) 2012

Schedule A (Form 990 or 990-EZ) 2012 JUST KIDS CHILD DEVELOPMENT CENTER, INC 30-0083132 Page 3 Part III 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	etion A. Public Support	olow, picase comp	noto i dit ii j						
Cale	ndar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total		
	Gifts, grants, contributions, and				·		· · · · · · · · · · · · · · · · · · ·		
	membership fees received (Do not								
	include any "unusual grants ")	23,806.	19,127.	27,777.	37,077.	46,721.	154,508.		
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	236,118.	207,730.	225,074.			1186994.		
3	Gross receipts from activities that								
	are not an unrelated trade or bus- iness under section 513								
4	Tax revenues levied for the organ-		_						
	ızatıon's benefit and either paid to								
	or expended on its behalf				. <u>-</u>				
5	The value of services or facilities								
	furnished by a governmental unit to								
	the organization without charge					·			
6	Total. Add lines 1 through 5	259,924.	226,857.	252,851.	302,309.	299,561.	1341502.		
7 a	Amounts included on lines 1, 2, and						_		
	3 received from disqualified persons						0.		
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						0.		
c	Add lines 7a and 7b			·			0.		
	Public support (Subtract line 7c from line 6)						1341502.		
	ction B. Total Support								
Cale	ndar year (or fiscal year beginning in) ►	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total		
9	Amounts from line 6	259,924.	226,857.	252,851.	302,309.	299,561.	1341502.		
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources								
b	Unrelated business taxable income								
	(less section 511 taxes) from businesses acquired after June 30, 1975								
,	Add lines 10a and 10b				1	-			
-	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on								
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV.)		•						
13	Total support. (Add lines 9, 10c, 11, and 12)	259,924.	226,857.	252,851.	302,309.	299,561.	1341502.		
14	First five years. If the Form 990 is for	the organization's	s first, second, thir	d, fourth, or fifth ta					
	check this box and stop here					·	ightharpoonup		
Se	ction C. Computation of Publ	ic Support Pe	rcentage	_		· · · · · · · · · · · · · · · · · · ·			
15	Public support percentage for 2012 (ine 8, column (f) d	ıvıded by lıne 13, c	column (f))			100.00 %		
16	Public support percentage from 2011			·		16	<u>100.00 %</u>		
Se	ection D. Computation of Investment Income Percentage								
17	7 Investment income percentage for 2012 (line 10c, column (f) divided by line 13, column (f)) 17 .00 %								
18	,					18	%		
19a	a 33 1/3% support tests - 2012. If the	=				•			
	more than 33 1/3%, check this box a	•	•	, -	• • •		►X		
ł	33 1/3% support tests - 2011. If the	_				-			
	line 18 is not more than 33 1/3%, che		•	•		•			

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

► Complete if the organization answered "Yes," to Form 990, Part IV, line 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 Open to Public Inspection

Name of the organization

Employer identification number

	JUST KIDS CHILD DEVELOPMENT CEN		30-0083132
Par	rt I Organizations Maintaining Donor Advised Funds or Other S	imilar Funds or A	ccounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, line 6.		
	(a) Donor advised	funds (b) Funds and other accounts
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 donor advisors in writing that the assets hel	id in donor advised fun	de
·	are the organization's property, subject to the organization's exclusive legal control?	a iii adiidi aaridda iaii	Yes No
6	Did the organization inform all grantees, donors, and donor advisors in writing that gra	int funds can be used o	
•	for charitable purposes and not for the benefit of the donor or donor advisor, or for any		·
	impermissible private benefit?	, o pa. pode co	Yes No
Pai	irt II Conservation Easements. Complete if the organization answered "Yes	to Form 990. Part IV.	
1	Purpose(s) of conservation easements held by the organization (check all that apply).		
•		ervation of an historical	ly important land area
		ervation of a certified hi	
	Preservation of open space	n ration of a continuo in	
2	Complete lines 2a through 2d if the organization held a qualified conservation contribu	ition in the form of a co	onservation easement on the last
_	day of the tax year	Allon in the form of a co	onservation easement on the last
	day of the tax your		Held at the End of the Tax Year
а	Total number of conservation easements		2a
h	Total acreage restricted by conservation easements		2b
-	Number of conservation easements on a certified historic structure included in (a)		2c
4	Number of conservation easements included in (c) acquired after 8/17/06, and not on	a historic structure	20
u	listed in the National Register	a mistorio stractare	2d
3	Number of conservation easements modified, transferred, released, extinguished, or to	erminated by the organ	
·	year ▶	on middle by the organ	medicin denning the tax
4	Number of states where property subject to conservation easement is located		
5	Does the organization have a written policy regarding the periodic monitoring, inspecti	ion, handling of	
•	violations, and enforcement of the conservation easements it holds?	,	Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservati	on easements during t	
7	Amount of expenses incurred in monitoring, inspecting, and enforcing conservation ea		
8	Does each conservation easement reported on line 2(d) above satisfy the requirement	•	
_	and section 170(h)(4)(B)(ii)?		Yes No
9	In Part XIII, describe how the organization reports conservation easements in its rever	nue and expense stater	ment, and balance sheet, and
	include, if applicable, the text of the footnote to the organization's financial statements	•	•
	conservation easements		3
Pa	art III Organizations Maintaining Collections of Art, Historical Tre	asures, or Other	Similar Assets.
	Complete if the organization answered "Yes" to Form 990, Part IV, line 8		
1a	If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in it	s revenue statement a	nd balance sheet works of art,
	historical treasures, or other similar assets held for public exhibition, education, or resi	earch in furtherance of	public service, provide, in Part XIII,
	the text of the footnote to its financial statements that describes these items.		
b	If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its re-	venue statement and t	palance sheet works of art, historical
	treasures, or other similar assets held for public exhibition, education, or research in fi	urtherance of public se	rvice, provide the following amounts
	relating to these items.	•	
	(i) Revenues included in 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 as	ssets for financial gain.	
	the following amounts required to be reported under SFAS 116 (ASC 958) relating to the		•
а	De la constant de la Face COO De AVIII à cont		> \$
b	Assets included in Form 990, Part X	•	. ▶ \$
	•		• • • • • • • • • • • • • • • • • • • •

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. 232051 12-10-12

Schedule D (Form 990) 2012

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets@continued (check all that apply):			<u>DS CHILD I</u>)83132	
Check all that apply):	Par	t III Organizations Maintaining C	ollections of A	rt, His	torical Tr	easures, c	r Other	Simila	<u>ar Asse</u>	ts(continu	ed)
a Public exhibition d Loan or exchange programs b Scholarly research c Other c Preservation for future generations d Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII. During the year, did the organization's collections of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization as collection? Yes No Part IV Excrow and Custodial Arrangements. Complete if the organization an asswered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X. line 21 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X. line 21 2b Beginning balance Amount c Beginning balance Amount d Additions during the year d Ending balance D of the organization include an amount on Form 990, Part X, line 21? 2b If "Yes," explain the arrangement in Part XIII Check heer if the explanation has been provided in Part XIII Part V Endowment Funds. Complete the organization has been provided in Part XIII B Beginning of year balance D Contributions A Contributions D Contributions	3	Using the organization's acquisition, accession	on, and other recor	ds, checl	k any of the	following that	t are a sig	nıfıcant ı	use of its	collection i	tems
b Scholarly research c Preservation for future generations d Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII. 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to make funds rether than to be manifered so and for the organization collection?											
b Scholarly research Common	а	Public exhibition	(d \square	Loan or exc	hange progra	ıms				
c	b	Scholarly research				3. 1. 3.					
4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII. 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to rase funds rather than to be maintained as part of the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21 1a Is the organization an agent, it tustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X. line 21 1b If "Yes," explain the arrangement in Part XIII and complete the following table: 1 C Beginning balance 2 Did the organization include an amount on Form 990, Part X, line 21? 2 Did the organization include an amount on Form 990, Part X, line 21? 2 Did the organization include an amount on Form 990, Part X, line 21? 3 Did the organization include an amount on Form 990, Part X, line 21? 4 Endorment Funds. Complete if the organization answered "Yes" to Form 990, Part X, line 10. 1 Beginning of year balance 4 Contributions 1 Beginning of year balance 5 Contributions 6 Contributions 7 Other expenditures for facilities and programs 9 Other expenditures for facilities and programs 1 Administrative expenses 9 End of year balance 9 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: 1 Beginning of year balance 9 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: 1 Board designated or quasisendowment 1 \$\infty (g) Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: 1 Board designated or ganizations 1 Administrative expenses 9 End of year balance 1 Tyes" to Sa(h), are the related organizations listed as required on Schedule R? 2 Provide the estimated percentage of the organizations is lead as required on Schedule R? 3 Are there endowment funds not in the possession of the organi											
5 During the year, did the organization solicit or receive donations of art, instoncial treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Part IV Ecrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21 Is the organization an angent, it ustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? If "Yes," explain the arrangement in Part XIII and complete the following table:	-		llections and expla	un how th	ev further t	he organizati	nn's avam	nt nurne	see in Pai	rt YIII	
to be sold for rase funds rather than to be maintained as part of the organization's collection? Part IV Excorow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? b If "Yes," explain the arrangement in Part XIII and complete the following table: C Beginning balance 1 1d 1d 1d 1d 1d 1d 1d	-								JSE III FAI	A AIII.	
Eart IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21 1a is the organization an agent, frustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No If "Yes," explain the arrangement in Part XIII and complete the following table: C Beginning balance	5						er Similar a	assets	_	٦٧.	□. .
reported an amount on Form 990, Part X, line 21 1a is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? b if "Yes," explain the arrangement in Part XIII and complete the following table: C Beginning balance d Additions during the year 1 te	Dar						N/ II 4 - C		D + 0/		<u> </u>
Tall Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Ves	1 CI			iete ii the	organizatio	n answered	Yes" to F	orm 990	, Part IV,	line 9, or	
on Form 990, Part X? b If "Yes," explain the arrangement in Part XIII and complete the following table: Amount Amount Id Additions during the year Ending balance Distributions during the year Ending balance and Additions during the year Ending balance business are possible to a surround on Form 990, Part X, line 217 Brity and the arrangement in Part XIII Check here if the explanation has been provided in Part XIII Part V Endowment Funds. Complete if the organization has been provided in Part XIII Beginning of year balance Contributions Reginning of year balance Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: Board designated or quasi-endowment >		· · · · · · · · · · · · · · · · · ·									
b If "Yes," explain the arrangement in Part XIII and complete the following table: Amount	1a	-	an or other interme	diary for	contribution	ns or other as	sets not ir	ncluded		¬	
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c Beginning balance d Additions during the year e Distributions during the year f Ending balance 2a Did the organization include an amount on Form 990, Part X, line 21? Fart V Endowment Funds. Complete if the explanation has been provided in Part XIII	b	If "Yes," explain the arrangement in Part XIII	and complete the f	ollowing 1	table:						
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e Distributions during the year f Ending balance 2 Did the organization include an amount on Form 990, Part X, line 217 2 Did the organization include an amount on Form 990, Part X, line 217 2 Did the organization include an amount on Form 990, Part X, line 217 2 Did the organization include an amount on Form 990, Part X, line 217 2 Describe in Part XIII Check here if the explanation has been provided in Part XIII Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10. 1a Beginning of year balance b Contributions c Net investment earnings, gains, and losses d Grants or scholarships e Other expenditures for facilities and programs d Administrative expenses g End of year balance 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment	С	Beginning balance						1c			
f Ending balance 2a Dut the organization include an amount on Form 990, Part X, line 21? Part V Endowment Funds. Complete if the explanation has been provided in Part XIII Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10. A Beginning of year balance (a) Current year (b) Pnor year (c) Two years back (d) Three years back (e) Four years back (d) Three years back (e) Four years back (d) Three years back (e) Four years back (d) Three years back (e) Four years back	d	Additions during the year						1d			
Did the organization include an amount on Form 990, Part X, line 21? Part V Endowment Funds. Complete if the explanation has been provided in Part XIII Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10. A Courrent year (b) Prior year (c) Two years back (d) Three years back (e) Four	е	Distributions during the year						1e			
B If Yes,* explain the arrangement in Part XIII Check here if the explanation has been provided in Part XIII	f	Ending balance						1f			
B If Yes,* explain the arrangement in Part XIII Check here if the explanation has been provided in Part XIII	2a	Did the organization include an amount on Fo	orm 990, Part X, line	e 21?						Yes	☐ No
Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10. A Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years back (d) Three years back (e) Four years back (d) Three years back (e) Four y					n has been	provided in F	Part XIII				
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b Contributions c Net investment earnings, gains, and losses d Grants or scholarships e Other expenditures for facilities and programs f Administrative expenses g End of year balance 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment \(\) % b Permanent endowment \(\) % The percentages in lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by (i) unrelated organizations (ii) related organizations (iii) related organizations (iii) related organizations b if "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? 4 Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (other) (b) Cost or other basis (other) (c) Accumulated depreciation 1a Land b Buildings c Leasehold improvements d Equipment e Other 3,847. 3,847. 0.	1a	Beginning of year balance			-				,		
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e Other expenditures for facilities and programs f Administrative expenses g End of year balance 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment	q		**							 	
and programs f Administrative expenses g End of year balance 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment ▶		· .									
f Administrative expenses g End of year balance 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment ▶	C										
g End of year balance 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment ▶				-						+	
Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment ▶	Ţ	· ·		-						 	
a Board designated or quasi-endowment ▶		•		.l		<u> </u>	1.				
b Permanent endowment	2	· -	•	•	g, column (a	a)) held as [.]					
Temporarily restricted endowment ▶	а	·	•	_%							
The percentages in lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by (i) unrelated organizations (ii) related organizations b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? 4 Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (other) (b) Cost or other depreciation 1a Land b Buildings c Leasehold improvements d Equipment e Other 3,847. 3,847. 0.			 '								
Are there endowment funds not in the possession of the organization that are held and administered for the organization by (i) unrelated organizations (ii) related organizations b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? 4 Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (other) (b) Cost or other basis (other) (c) Accumulated depreciation (d) Book value b Buildings c Leasehold improvements d Equipment e Other Other 3,847. 3,847. 0.	С										
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(ii) unrelated organizations (iii) related organizations b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? 4 Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (investment) b Buildings c Leasehold improvements d Equipment e Other (i) unrelated organizations (3a(ii) 3a(ii) 3b (b) Cost or other basis (other) (c) Accumulated depreciation (d) Book value (d) Book value (d) Book value (d) Book value	За	Are there endowment funds not in the posse	ssion of the organia	zation tha	at are held a	ınd admınıste	red for the	e organiz	ation		
(ii) related organizations b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? 4 Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (other) 1a Land b Buildings c Leasehold improvements d Equipment e Other 3,847. 3a(ii) 3b (b) Cost or other basis (other) (c) Accumulated depreciation (d) Book value 3,847. 0.		by								Y	es No
b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? 4 Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (other) (b) Cost or other basis (other) (c) Accumulated depreciation (d) Book value basis (other) 1a Land b Buildings c Leasehold improvements d Equipment e Other 3,847. 3b 3d Octobr/> 3d 3d 3d 3d 3d 3d 3d 3d 3d 3		(i) unrelated organizations								3a(i)	
b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? 4 Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (other) 1a Land b Buildings c Leasehold improvements d Equipment e Other 3b (c) Accumulated depreciation (d) Book value 3 , 847. 30.		(ii) related organizations									
Part VI Land, Buildings, and Equipment. 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 1a Land b Buildings c Leasehold improvements d Equipment description (c) Accumulated depreciation (d) Book value (d) Book valu	b	If "Yes" to 3a(II), are the related organizations	s listed as required	on Sched	dule R?	,				1 1	
Part VI Land, Buildings, and Equipment. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (investment) 1a Land b Buildings c Leasehold improvements d Equipment e Other Description of property (a) Cost or other basis (other) (b) Cost or other basis (other) (c) Accumulated depreciation (d) Book value 3, 847. 3, 847.	4	_								<u> </u>	
Description of property (a) Cost or other basis (investment) 1a Land b Buildings c Leasehold improvements d Equipment e Other (b) Cost or other basis (other) (c) Accumulated depreciation (d) Book value 3,847. 3,847. 0.	Pai							* -			
basis (investment) basis (other) depreciation 1a Land b Buildings c Leasehold improvements d Equipment e Other basis (investment) basis (other) depreciation 3,847. 3,847.		Description of property	(a) Cost or	other	(b) Cost	t or other	(c) Acc	cumulate	ed	(d) Book	value
1a Land b Buildings c Leasehold improvements d Equipment e Other 3,847. 3,847. 0.			1 ' '				• • •			(-/ = 35.1 ·	
b Buildings c Leasehold improvements d Equipment e Other 3,847. 3,847. 0.	1a	Land	·				•		-		
c Leasehold improvements d Equipment e Other 3,847. 3,847. 0.								 -	_		
d Equipment e Other 3,847. 3,847. 0.		<u>-</u>									
e Other 3,847. 3,847. 0.		•	-						-+		
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Schedule D (Form 990) 2012

Form 990, Part X, III	ne 12	,	OUUSISZ Fag
(b) Book value		aluation. Cost or end	l-of-year market value
			-
<u> </u>			
			. <u></u>
			
			·· ····
	line 13		
(b) Book value	(c) Method of va	aluation Cost or end	l-of-year market value
			
			
Description			(b) Book value
	 		-
			
ine 25.	#ND 1	-	·
	(b) Book value		
	4,895.		
	<u> </u>		
	4,895.		
	e Form 990, Part X, In (b) Book value ee Form 990, Part X, (b) Book value 15 Description	te Form 990, Part X, line 12 (b) Book value (c) Method of value te Form 990, Part X, line 13 (b) Book value (c) Method of value 15 Description 15 Description (b) Book value (c) Method of value (d) Method of value (e) Method of value (f) Method of value	e Form 990, Part X, line 12 (c) Method of valuation. Cost or end (d) Method of valuation. Cost or end (e) Method of valuation. Cost or end (f) Book value. (g) Method of valuation. Cost or end (g) Method of valuation. Cost or end (h) Book value. (g) Method of valuation. Cost or end (h) Book value. (h) Book value.

232053 12-10-12

	edule D (Form 990) 2012 JUST KIDS CHILD DEVELOPMENT At XI Reconciliation of Revenue per Audited Financial Statemen	CENTER, INC nts With Revenue per	30- Retur	0083132 n	Page 4
1	Total revenue, gains, and other support per audited financial statements		1		
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
а	Net unrealized gains on investments	2a			
b	Donated services and use of facilities	2b			
c	Recoveries of prior year grants	2c	7		
d	Other (Describe in Part XIII)	2d	7		
e	Add lines 2a through 2d				
3	Subtract line 2e from line 1		3		_
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1.				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)	4b	\dashv		
c	Add lines 4a and 4b	401	4c		
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		5		
_	rt XII Reconciliation of Expenses per Audited Financial Stateme	ents With Expenses pe		urn	
1	Total expenses and losses per audited financial statements		1		
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
а	Donated services and use of facilities	2a			
b	Prior year adjustments	2b			
c	Other losses	2c			
d	C1	2d			
e			7 20		
3	Subtract line 2e from line 1		2e 3		
-	Amounts included on Form 990, Part IX, line 25, but not on line 1.		3		
4		اما			
a	•	4a			
b	,	4b			
_C			4c		
Pa	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18) rt XIII Supplemental Information		5	l	
	iplete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to part XI, lines 2d and 4b. Also complete this part to part XII, lines 2d and 4b. Also complete this part to part XII, lines 2d and 4b. Also complete this part to part XII, lines 2d and 4b. Also complete this part to part XIII, lines 2d and 4b. Also complete this part to part XIII, lines 2d and 4b. Also complete this part to part XIII, lines 2d and 4b. Also complete this part to part XIII, lines 2d and 4b. Also complete this part to part XIII, lines 2d and 4b. Also complete this part to part XIII, lines 2d and 4b. Also complete this part to part XIII, lines 2d and 4b. Also complete this part to part XIII, lines 2d and 4b. Also complete this part to part XIII, lines 2d and 4b. Also complete this part to part XIII, lines 2d and 4b. Also complete this part to part XIII, lines 2d and 4b. Also complete this part to part XIII, lines 2d and 4b. Also complete this part to part XIII, lines 2d and 4b. Also complete this part to part XIII, lines 2d and 4b. Also complete this part to part XIII, lines 2d and 4b. Also complete this part to part XIII, lines 2d and 4b. Also complete this part to part				
			Sche	edule D (Form 9	90) 2012

SCHEDULE L

(Form 990 or 990-EZ)

Transactions With Interested Persons

► Complete if the organization answered
"Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c,
or Form 990-F7, Part V, line 38a or 40b

2012

Open To Public Inspection

Department of the Treasury Internal Revenue Service or Form 990-EZ, Part V, line 38a or 40b.

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

Name of the organization Employer identification number JUST KIDS CHILD DEVELOPMENT CENTER, 30-0083132 Excess Benefit Transactions (section 501(c)(3) and section 501(c)(4) organizations only) Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b (b) Relationship between disqualified (d) Corrected? (a) Name of disqualified person (c) Description of transaction person and organization Yes No 2 Enter the amount of tax incurred by the organization managers or disqualified persons during the year under section 4958 3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization Part II Loans to and/or From Interested Persons. Complete if the organization answered "Yes" on Form 990-EZ, Part V, line 38a or Form 990, Part IV, line 26, or if the organization reported an amount on Form 990, Part X, line 5, 6, or 22 (b) Relationship (c) Purpose (d) Loan to or (h) Approved (i) Written (a) Name of (e) Original (f) Balance due (g) In

interested person	organization	`of loan	from organiz	-	principal amount	(,, = a	defa	ult?	comm	uttee?	agreei	ment?
			То	From			Yes	No	Yes	No	Yes	No
KATHY ATKINS	OFFICER/	CASH FLC	X		3,358.	3,358.		X	X			X
KATHY ATKINS	OFFICER/	CASH FLC	X		8,300.	8,300.		X	X			X
KATHY ATKINS	OFFICER/	CASH FLC	X		13,525.	13,525.		X	Х			X
KATHY ATKINS	OFFICER/	PAID INS	X		572.	572.		Х	Х			X
KATHY ATKINS	OFFICER/	CASH FLC	X		5,903.	5,903.		X	Х			X
KATHY ATKINS	OFFICER/	PAID INS	X		4,479.	4,479.		X	Х			X
	+											
Total	•	•			▶ \$	36,137.		•				

Part III | Grants or Assistance Benefiting Interested Persons.

Complete if the organization	answered "Yes" on Form 990, Pa	ırt IV, line 27.		
(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of assistance	(d) Type of assistance	(e) Purpose of assistance
			·····	

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

Schedule L (Form 990 or 990-EZ) 2012

SEE PART V FOR CONTINUATIONS

Schedule L (Form 990 or 990-EZ) 2012 JUST KIDS CHILD DEVELOPMENT CENTER, INC 30-0083132 Page 2 Part IV Business Transactions Involving Interested Persons.

KATHY C. ATKINS, PRES/TREALESSOR 0.JOINT OWNER 2. RHONDA ATKINS WORRELL, V.PADKINS DAUGHTER 0.NONE 2.	Complete if the organization answered	"Yes" on Form 990, Part IV, line 28a, 28	3b, or 28c	•		
KATHY C. ATKINS, PRES/TREALESSOR G. JOINT OWNER RICHARL W. WORRELL, V. PADKINS DAUGHTER O. NONE MICHARL W. WORRELL, SEC. ADKINS SON-IN-LAW O. NONE MICHARL W. WORRELL, SEC. ADKINS SON-IN-LAW O. NONE Part V. Supplemental Information Complete this part to provide additional information for responses to questions on Schedule L (see instructions). SCHEDULE L, PART II, LOANS TO AND FROM INTERESTED PERSONS: (A) NAME OF PERSON: KATHY ATKINS (B) RELATIONSHIP WITH ORGANIZATION: OFFICER/ DIRECTOR (C) PURPOSE OF LOAN: CASH FLOW DEMANDS (A) NAME OF PERSON: KATHY ATKINS (B) RELATIONSHIP WITH ORGANIZATION: OFFICER/ DIRECTOR (C) PURPOSE OF LOAN: CASH FLOW DEMANDS (A) NAME OF PERSON: KATHY ATKINS (B) RELATIONSHIP WITH ORGANIZATION: OFFICER/ DIRECTOR (C) PURPOSE OF LOAN: CASH FLOW DEMANDS (A) NAME OF PERSON: KATHY ATKINS (B) RELATIONSHIP WITH ORGANIZATION: OFFICER/ DIRECTOR (C) PURPOSE OF LOAN: CASH FLOW DEMANDS (A) NAME OF PERSON: KATHY ATKINS (B) RELATIONSHIP WITH ORGANIZATION: OFFICER/ DIRECTOR (C) PURPOSE OF LOAN: PAID INSURANCE EXPENSE PERSONALLY (A) NAME OF PERSON: KATHY ATKINS (B) RELATIONSHIP WITH ORGANIZATION: OFFICER/ DIRECTOR (C) PURPOSE OF LOAN: PAID INSURANCE EXPENSE PERSONALLY	(a) Name of interested person	1 ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '	,	, , ,	òrganız rever	ation's lues?
RHONDA ATKINS WORRELL, V.PADKINS DAUGHTER O.NONE MICHAEL W. WORRELL, SEC. ADKINS SON-IN-LAW O.NONE O	VAMIN C AMVING DDEC/MDEA	TEGGOR		TOTAM OFBIED		No
MICHAEL W. WORRELL, SEC. ADKINS SON-IN-LAW 0.NONE Part V Supplemental information Complete the part to provide additional information for responses to questions on Schedule L (see instructions). SCHEDULE L, PART II, LOANS TO AND FROM INTERESTED PERSONS: (A) NAME OF PERSON: KATHY ATKINS (B) RELATIONSHIP WITH ORGANIZATION: OFFICER/ DIRECTOR (C) PURPOSE OF LOAN: CASH FLOW DEMANDS (A) NAME OF PERSON: KATHY ATKINS (B) RELATIONSHIP WITH ORGANIZATION: OFFICER/ DIRECTOR (C) PURPOSE OF LOAN: CASH FLOW DEMANDS (A) NAME OF PERSON: KATHY ATKINS (B) RELATIONSHIP WITH ORGANIZATION: OFFICER/ DIRECTOR (C) PURPOSE OF LOAN: CASH FLOW DEMANDS (A) NAME OF PERSON: KATHY ATKINS (B) RELATIONSHIP WITH ORGANIZATION: OFFICER/ DIRECTOR (C) PURPOSE OF LOAN: PAID INSURANCE EXPENSE PERSONALLY (A) NAME OF PERSON: KATHY ATKINS (B) RELATIONSHIP WITH ORGANIZATION: OFFICER/ DIRECTOR (C) PURPOSE OF LOAN: PAID INSURANCE EXPENSE PERSONALLY		·		 		X
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Part V Supplemental Information Complete this part to provide additional information for responses to questions on Schedule L (see instructions).
(A) NAME OF PERSON: KATHY ATKINS
(B) RELATIONSHIP WITH ORGANIZATION: OFFICER/ DIRECTOR
(C) PURPOSE OF LOAN: PAID INSURANCE EXPENSE PERSONALLY
SCH L, PART IV, BUSINESS TRANSACTIONS INVOLVING INTERESTED PERSONS:
(A) NAME OF PERSON: KATHY C. ATKINS, PRES/TREAS.
(B) RELATIONSHIP BETWEEN INTERESTED PERSON AND ORGANIZATION:
LESSOR
(C) AMOUNT OF TRANSACTION \$ (D) DESCRIPTION O
(D) DESCRIPTION OF TRANSACTION: JOINT OWNER OF LLC THAT OWNES THE
BUILDING AND LAND LEASED TO THE ORGANIZATION
(E) SHARING OF ORGANIZATION REVENUES? = NO
(A) NAME OF PERSON: RHONDA ATKINS WORRELL, V.P.

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury

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.

2012
Open to Public Inspection

Name of the organization

THEM WING CUILD DEVELOPMENT CENTED INC

Employer identification number

JUST KIDS CHILD DEVELOPMENT CENTER, INC 30-0083132	
FORM 990, PART VI, SECTION A, LINE 2: VICE PRESIDENT RHONDA A. WORRELL	1
AND SECRETARY MICHAEL W. WORRELL ARE MARRIED.	
FORM 990, PART VI, SECTION B, LINE 11: THE PRESIDENT REVIEWS AND APPRO	VE
THE FORM 990 BEFORE SUBMITTING.	
FORM 990, PART VI, SECTION C, LINE 19: THE PRESIDENT HAS POSSESSION OF	THE
DOCUMENTS AND WILL PROVIDE COPIES OF THE DOCUMENTS IF REQUESTS ARE MAD	E.
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