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Short Form Return of Organization Exempt From Income Tax

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

OMB No. 1545-1150

Open to Public Inspection

Department of the Treasury Internal Revenue Service

▶ Do not enter Social Security numbers on this form as it may be made public.

▶ Information about Form 990-EZ and its instructions is at www.irs.gov/form990.

A F	or the	2013 calenda	ar year, or tax year beginning	January 1	, 2013, and end	ling C	ecembe	r 31 , 20 13		
B Ch	heck if ap	oplicable	C Name of organization			DE	nployer id	lentification number		
] 🛚	ddress c	change Kids Interested in Technology, Engineering, and Science (KITES), Inc.						35-2408447		
] N:	iame cha	inge						Telephone number		
₹ .	nitial retu		1710 Tyler Green Trail				(6	78) 571-9352		
╡	erminate mended		City or town, state or province, country,	and ZIP or foreign postal code		F G	roup Exe			
=		n pending	Smyrna GA 30080				umber			
		ing Method:	✓ Cash ☐ Accrual Other (s	pecify) ▶		H Chec	k > [7]	if the organization is no		
		•				'		tach Schedule B		
I Website			eck only one) — 🗸 501(c)(3) 🔲 501	(c) () ◀ (insert no) ☐ 4	4947(a)(1) or □52	· I `		0-EZ, or 990-PF).		
			Corporation Trust		Other	7 (0	. 000, 00	<u> </u>		
			7b, to line 9 to determine gross rece			of total asse	ets			
			v) are \$500,000 or more, file Form 99				▶ ₫	2		
	rt I		e, Expenses, and Changes			the inet	uction	s for Part II		
ı c			the organization used Schedul		•			•		
Т	4				•					
	1		ons, gifts, grants, and similar amo					1 <u>573.7</u>		
	2		ervice revenue including governr				2			
	3		ip dues and assessments				3			
	4	Investment					4			
	5a		ount from sale of assets other that	•	<u> </u>		0	•		
	b		or other basis and sales expense				0			
	C		ss) from sale of assets other than	n inventory (Subtract line	5b from line 5a)		5c			
	6	_	d fundraising events							
e	а		ome from gaming (attach Scl		nan . 6a		ا			
Revenue	b	Gross inco	me from fundraising events (not	includina \$	o of contrib	outions	Ť			
<u>≨</u>	-		aising events reported on line 1				l			
-			h gross income and contribution				0			
	С		t expenses from gaming and fun	•		·	 			
ł	d		e or (loss) from gaming and fur			d subtrac	.			
	_	line 6c)	· · · · · · · · · · · · · · · ·				6d			
- 1	7a	•	s of inventory, less returns and a	llowancee	. 7a		1			
	b			· · · · · · · ·			0			
	-		it or (loss) from sales of inventory				<u> </u>			
	C			·	•		7c			
- 1	8						8	6.5		
\dashv	9		nue. Add lines 1, 2, 3, 4, 5c, 6d,				9	1580.2		
	10		I similar amounts paid (list in Sch	· · · · · · · · · · · · · · · · · · ·	DECENTE	ח	10			
	11	•			. NEGETAE		11			
	12		ther compensation, and employe				12			
- I	13		al fees and other payments to inc	וחו	- MAY: 0.7 20	14 · SO-SN	13			
ğΪ	14		,, rent, utilities, and maintenance	1 1		· · · \	14			
ш	15		ublications, postage, and shippin			· · · —	15	18.0		
	16		nses (describe in Schedule O)				16	1505.6		
	17	Total expe	nses. Add lines 10 through 16	· · · · · · · ·			17	1523.6		
y l	18		deficit) for the year (Subtract line				18	56.5		
Assets	19		or fund balances at beginning		olumn (A)) (must	agree with				
As		end-of-yea	r figure reported on prior year's i	return)			19	2227.0		
-	20	Other chan	ges in net assets or fund balanc	es (explain in Schedule (Ο)		20			
<u> </u>	20				~,					
ラ l	21		or fund balances at end of year.		•	>	21	2283.6		

Pa		ance Sheets (see the instructions f			_					
	Che	eck if the organization used Schedule	O to respond to a	ny question in this			<u> </u>			
				·	(A) Beginning of year	<u></u>	(B) End of year			
22		vings, and investments			2227.07		2283.61			
23		buildings				23	(
24		sets (describe in Schedule O)				24				
25	Total ass				2227.07		2283.61			
26		pilities (describe in Schedule O)				26				
27		ts or fund balances (line 27 of column			2227.07	27	2283.61			
Par		tement of Program Service Accom	•		•		Expenses			
Mha		eck if the organization used Schedule nization's primary exempt purpose?					quired for section			
	-	• • • •	Provide STEM educa				(c)(3) and 501(c)(4) anizations and section			
		ganization's program service accomplis				494	7(a)(1) trusts, optional			
		vexpenses. In a clear and concise maded, and other relevant information for ea		e services provide	a, the number of	for	others.)			
28						├─				
20		nual KITES Engineering Festival - 336 stu								
	THIT DAY OF TO	ands on fun science and engineering acti	viues							
	(Grants \$) If this amount	includes foreign gra	ints, check here .	▶ □	288	828.40			
29	<u> </u>	he Fulton County STEM fair - 200 student				 	020.10			
	EXMINITION	ne_runou_county_s reactau_=_zuo_sudent	S_DathChateu							
	(Grants \$) If this amount	includes foreign gra	ints, check here .	▶ 🗆	298	199.03			
30	Conducted	a STEM Workshop for Atlanta Public Scho	pol science teachers	- 15 elementary sch	ool teachers					
		Conducted a STEM Workshop for Atlanta Public School science teachers - 15 elementary school teachers participated								
						}				
	(Grants \$	30a	181.61							
31	Other progr									
	(Grants \$		includes foreign gra			318	11.75			
		ram service expenses (add lines 28a t				32	1220:70			
Par		of Officers, Directors, Trustees, and Key				nstru	ctions for Part IV)			
	Che	ck if the organization used Schedule	O to respond to ar				<u> L</u>			
		(a) Alama and Adla	(b) Average	(c) Reportable compensation	(d) Health benefits, contributions to employ	ee (e)	Estimated amount of			
		(a) Name and title	hours per week devoted to position	(Forms W-2/1099-MIS)			other compensation			
		·		(ii not paid, enter -o-	delerred compensatio	"-				
			Director, 4 hrs per							
		oss Road. Carmel. IN 46033	week		٠	4	0			
			Director, Secretary		_		•			
	Justice Mill !		4 hrs per week		0	٠,				
	k Malcolm		Director, 4 hrs per		_		0			
		way. Marietta. GA 30062	week		0	4	<u>_</u>			
	l Mitchell Virginia Aven	ue. Suite #301. Indianapolis. IN 46203	Director, Vice Pres 4 hrs per wk		0	٥	0			
	ne A. A. Rev				<u> </u>	_				
		Trail, Smyrna, GA 30080	Director, President 5 hrs per week		0	٥	0			
		ITAIL SITIVITIA. GA 30000		'		-	·			
		Wesley, Atlanta, GA 30327	Director, Treasurer 4 hrs per week		o	۸	0			
_/	Outilion on 3	COUNTY AND INC. OF SOUR	THE DUTHER							
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					<u> </u>	\perp				
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			I	I	1	- 1				

Pärt	· · · · · · · · · · · · · · · · · · ·			_
,	instructions for Part V) Check if the organization used Schedule O to respond to any question in this	Part		
33	Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a detailed description of each activity in Schedule O	33	Yes	No 🗸
34	Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the			
35a	change on Schedule O (see instructions)	34		√
	activities (such as those reported on lines 2, 6a, and 7a, among others)?	35a		√
	If "Yes," to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule O Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III	35b 35c		√
36	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N	36		1
	Enter amount of political expenditures, direct or indirect, as described in the instructions Did the organization file Form 1120-POL for this year?	37b		√
39	any such loans made in a prior year and still outstanding at the end of the tax year covered by this return? If "Yes," complete Schedule L, Part II and enter the total amount involved Section 501(c)(7) organizations. Enter:	38a		✓
40a	Initiation fees and capital contributions included on line 9			
	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	40b		√
С	Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958			
d	Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organization			
	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T	40e		√
	List the states with which a copy of this return is filed ▶ Georgia			
		104) 3	5-662	3
	Located at ► 2790 Carmon on Wesley, Atlanta GA ZIP + 4 ►	303		
	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)?	42b	Yes	No
	If "Yes," enter the name of the foreign country: ► See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			
	At any time during the calendar year, did the organization maintain an office outside the U.S.? If "Yes," enter the name of the foreign country: ▶	42c		√
	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041—Check here		. Þ	► □
	Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ	44a	Yes	No ✓
	Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ	44b	-	√
d	Did the organization receive any payments for indoor tanning services during the year?	44c - 44d		√
45b	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	45a		✓
	Form 990-EZ (see instructions)	45b	-	1

Form 99	90-EZ (2013)							Page 4
46 Part	to c	the organization engage, directly or in andidates for public office? If "Yes," of Section 501(c)(3) organizations All section 501(c)(3) organization 50 and 51. Check if the organization used Sc	complete Schedule C s only s must answer que	estions 47–49b a	nd 52, and co		46	Yes or line	Ī
47		the organization engage in lobbying ? If "Yes," complete Schedule C, Par		section 501(h) ele		-	tax 47	Yes	No
48 49a b 50	Did f If "Y Com	e organization a school as described in the organization make any transfers to es," was the related organization a se aplete this table for the organization's aloyees) who each received more than	o an exempt non-cha ection 527 organization five highest compen	aritable related orgon?	anızation? (other than office	 cers, directo	d 49b ors, truste		
	(а) Name and title of each employee	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MI	(d) Health contributions benefit plans, comper	to employee and deferred	(e) Estimate other con		
f 51	Com	I number of other employees paid over the organization' 0,000 of compensation from the organization in the organization in the organization from the organ	s five highest compo	ensated independ		who each	received	more	than
	(a) Name and business address of each independ	lent contractor	(b) Type of	service	(c)	Compensati	on	
								•	
									
d 52	Did 1	I number of other independent contra the organization complete Schedule A	A? Note . All section 5	i01(c)(3) organizatı	. ▶ ons and 4947(a	<u> </u>			
	enaltie	exempt charitable trusts must attach a s of perjury, I declare that I have examined this r nd complete Declaration of preparer (other than	eturn, including accompan	ying schedules and sta			➤ ✓ Yes owledge and		No It Is
Sign Here		Signature of officer			Date	5/2/14			
Paid		Denise Wilkins Treasurer Type or print name and title Print/Type preparer's name	Preparer's signature		Date	Check	ıf PTIN		

Preparer Use Only

Firm's name

Firm's address ►

May the IRS discuss this return with the preparer shown above? See instructions

► ☐ Yes ☐ No

Firm's EIN ▶

Phone no.

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

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

OMB No 1545-0047 2013

Department of the Treasury Internal Revenue Service

► Attach to Form 990 or Form 990-EZ.
► Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Open to Public

Name	of the organization							Employer id	dentificatio	n number	
			ng , and Science (KITE:					35-2408447			
_			rity Status (All orga						nstruction	ons.	
1 2	☐ A church, con☐ A school desc	nvention of churc cribed in section	ation because it is: (Fo thes, or association of 170(b)(1)(A)(ii). (Attac	churches ch Sched	s describ ule E.)	ed in sec	tion 170	(b)(1)(A)(i).		
3 4	A medical res		spital service organiza on operated in conjun e:						D(b)(1)(A)	(iii). Enter the	
5	An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.)										
6 7	☐ A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). ☐ 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 9	An organization receipts from support from	on that normally activities related gross investme	n section 170(b)(1)(A receives: (1) more that d to its exempt funct ent income and unre lifter June 30, 1975. So	an 33¹/₃% ions—sul lated bus	6 of its so bject to 6 siness ta	upport fre certain e xable inc	xceptions come (les	s, and (2) ss section	no more	e than 331/3% of its	
10 11	An organization	on organized ar	d operated exclusively nd operated exclusive plicly supported organ describes the type of	ely for th	ne benefi describe	t of, to d in sect	perform ti ion 509(a	the funct a)(1) or se	ions of, ection 50	9(a)(2). See section	
e	other than for or section 509 If the organiz organization,	undation manage (a)(2). cation received a check this box	that the organization ers and other than one a written determination	is not cone or more	ntrolled of publicly the IRS	lirectly or support that it is	r indirectly ed organi a Type	y by one izations o	or more lescribed I, or Typ	in section 509(a)(1)	
g	following pers	sons?	he organization accep	-	_			•			
			ndirectly controls, eithody of the supported of							nd Yes No	
h	(iii) A 35% co	ntrolled entity of	on described in (i) abo a person described in on about the supporte	(i) or (ii) a	above? .					11g(ii) 11g(ii)	
	Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	(iv) Is the o	organization sted in your document?	(v) Did y the organ col (i)	rou notify nization in of your port?	(vi) la organizati (i) organiz U.S	on in col zed in the	(vii) Amount of monetary support	
				Yes	No	Yes	No	Yes	No		
A)											
B)											
C)											
D)							_				
E)											

Part	(Complete only if you checked the Part III. If the organization fails to	e box on lin	e 5, 7, or 8 of	Part I or if th	e organizatio	n failed to qu	
Sect	ion A. Public Support	quality unu	er trie tests in	sted below, p	nease comple	ele Fait III.)	 -
	ndar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	(a) 2003	(b) 2010	(6) 2011	(d) 2012	(e) 2013	(I) TOTAL
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6	Public support. Subtract line 5 from line 4.						
	on B. Total Support				1		T
	idar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
7	Amounts from line 4	····				 	ļ-
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		l				
12	Gross receipts from related activities, etc.	•	•			12	504()(0)
13	First five years. If the Form 990 is for the organization, check this box and stop here	-			•		1 7 7
Sacti	on C. Computation of Public Support			• • • • •			▶ 🗆
14	Public support percentage for 2013 (line 6)			1 column (fl)	·	14	%
15	Public support percentage from 2012 Scho					15	
16a	331/3% support test—2013. If the organization qualiform and stop here. The organization qualiform	ation did not	check the box	on line 13, and			
b	331/3% support test—2012. If the organic check this box and stop here. The organiz					15 is 33 ¹ / ₃ %	or more, ▶ □
17a	10%-facts-and-circumstances test—20: 10% or more, and if the organization meet Part IV how the organization meets the "facorganization	ts the "facts-	and-circumsta	nces" test, che	eck this box ar	d stop here. I	Explain in
b	10%-facts-and-circumstances test—20 15 is 10% or more, and if the organization Explain in Part IV how the organization me supported organization	on meets the eets the "fact	e "facts-and-ci s-and-circums	rcumstances" tances" test. T	test, check th	is box and st	top here.
40	Private foundation If the organization did					thic box and	

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.)

Coat	ion A. Public Support	under the te	SIS IISIEU DEI	ow, please co	mpiete Part i	i.)	
		(=) 0000	(h) 0010	T 4-3-0044	(-B-0040	4 2 0040	(O T
	dar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")						
2	Gross receipts from admissions, merchandise			2424.56	4660.15	1580.23	8664.94
-	sold or services performed, or facilities			1			
	furnished in any activity that is related to the			i i			
_	organization's tax-exempt purpose		ļ	0.00	0.00	0.00	0.00
3	Gross receipts from activities that are not an unrelated trade or business under section 513	1					
_		·		0.00	0.00	0.00	0.00
4	Tax revenues levied for the	ļ				1	
	organization's benefit and either paid			l i		i	
	to or expended on its behalf			0.00	0.00	0.00	0.00
5	The value of services or facilities				ĺ		
	furnished by a governmental unit to the					İ	
_	organization without charge			0.00	0.00	0.00	0.00
6	Total. Add lines 1 through 5			2424.56	4660.15	1580.23	8664.94
7a	Amounts included on lines 1, 2, and 3		i	ĺ			
	received from disqualified persons .			0.00	0.00	0.00	0.00
b	Amounts included on lines 2 and 3		1		ŀ		
	received from other than disqualified						
	persons that exceed the greater of \$5,000			ŀ		į	
	or 1% of the amount on line 13 for the year			0.00	0.00	0.00	0.00
_	Add lines 7a and 7b			0.00	0.00	0.00	0.00
8	Public support (Subtract line 7c from					1	
Conti	line 6.)						
	on B. Total Support	(=) 0000	(h) 0010	(-) 0044	(-D-0040	(-) 0040	10 T.L.I
Calen 9	dar year (or fiscal year beginning in) Amounts from line 6	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
э 10а				2424.56	4660.15	1580.23	8664.94
IVa	Gross income from interest, dividends, payments received on securities loans, rents,	•					
	royalties and income from similar sources .						
b	Unrelated business taxable income (less			0.00	0.00	0.00	0.00
D	section 511 taxes) from businesses						
	acquired after June 30, 1975	1		0.00	0.00	0.00	0.00
С	Add lines 10a and 10b			0.00	0.00	0.00	0.00
11	Net income from unrelated business						.
••	activities not included in line 10b, whether						
	or not the business is regularly carried on			0.00	0.00	0.00	0.00
12	Other income. Do not include gain or			0.00	0.00	0.00	0.00
-	loss from the sale of capital assets						
	(Explain in Part IV.)			1100.20	0.00	0.00	1100.20
13	Total support. (Add lines 9, 10c, 11,			, 100.20	0.00	0.00	1100.20
-	and 12.)			3524.76	4660.15	1580.23	9765.14
14	First five years. If the Form 990 is for the	ne organization	n's first, secon				
	organization, check this box and stop he	=			-		
Secti	on C. Computation of Public Suppor	t Percentag	е	-			_
15	Public support percentage for 2013 (line	B, column (f) di	vided by line 1	3, column (f))		15	%
16	Public support percentage from 2012 Scl	nedule A, Part	III, line 15 .			16	%
Secti	on D. Computation of Investment In	come Perce	ntage				
17	Investment income percentage for 2013 (y line 13, colum	n (f))	17	%
18	Investment income percentage from 2012					18	%
19a	331/3% support tests-2013. If the organ						
	17 is not more than 331/3%, check this box	and stop here.	The organization	on qualifies as a	publicly suppor	rted organizatio	n . ▶ 🗆
b	331/3% support tests—2012. If the organiz						
	line 18 is not more than 331/3%, check this	box and stop h	ere. The organi	zation qualifies a	as a publicly su	pported organiz	ation 🕨 🗌
20	Private foundation. If the organization di	d not check a	box on line 14.	19a, or 19b, ch	neck this box a	ind see instruct	tions ▶ □

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

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

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization ► Attach to Form 990 or 990-EZ.

Open to Public Inspection

Employer identification number

Kids Interested in Technology, Science, & Engineering (KITES) Inc. 35-2408447 Part I Line 16 - Other Expenses: Advertisting \$94.45, Bank Charge \$6.50; Credit Card Fees 214.40; Catering \$ 302.61; Subscription Fees \$82; Program Educational Supplies \$784.75; Postage 20.96