Department of the Treasury Internal Revenue Service

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

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

Open to Public Inspection

	A F	or the	e 2017 calendar year, or tax year beginning and endi	ng		
Ī	B C	heck if	C Name of organization		D Employer identifi	cation number
	X	Addre:	StandUp for Kids			
		Name change			33-0	414855
		Initial return	At a transfer of the second se	n/suite	E Telephone numbe	r
		Final return/	200 Nelson Ferry Road B		404-	954-6614
		termin ated			G Gross receipts \$	1,490,551.
		Ameno	Decatur, GA 30030		H(a) Is this a group re	
		Applic	F Name and address of principal officer Justine Palmore		for subordinates	o? ☐Yes X No
		pendir	same as C above	M/	H(b) Are all subordinates in	ncluded? Yes No
			empt status X 501(c)(3)	527	If "No," attach a	list (see instructions)
			te: www.standupforkids.org		H(c) Group exemptio	
				L Year o	of formation: 1990 N	M State of legal domicile. CA
l	Ра		Summary	+ h -	1f	
	ဗွ		Briefly describe the organization's mission or most significant activities To end	tne	cycle of y	outh
	na l		homelessness. Check this box if the organization discontinued its operations or disposed of	of more	than 25% of its not as	
	Ver	_	Number of voting members of the governing body (Part VI, line 1a)	JI IIIUI C	3	10
	ၓ		Number of independent voting members of the governing body (Part VI, line 1b)		4	10
ලෙ	ଷ		Total number of individuals employed in calendar year 2017 (Part V, line 2a)		5	9
2018	Activities & Governance		Total number of volunteers (estimate if necessary)		6	550
ر ج			Total unrelated business revenue from Part VIII, column (C): line 12		, 7a	0.
6 3	^		Net unrelated business taxable income from Form 990-T, line B4 CFIVED]	7b	0.
			N 0		Prior Year	Current Year
AUG	ا ب	8	Contributions and grants (Part VIII, line 1h) Program service revenue (Part VIII, line 2g) Investment income (Part VIII, column (A), lines 3, 4 and 7d)		1,300,088.	1,480,801.
	eu	9	Program service revenue (Part VIII, line 2g)	<u> </u>	4,529.	9,750.
Щ	Revenue				0.	0.
SCANNED			Other revenue (Part VIII, column (A), lines 5, 6d, 8d, 9c, 10c and 10c		0.	0.
₹.			Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	-	1,304,617.	1,490,551.
8			Grants and similar amounts paid (Part IX, column (A), lines 1-3)	-	453,683.	488,490.
00			Benefits paid to or for members (Part IX, column (A), line 4)		<u>0.</u> 343,897.	357,912.
	Expenses		Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	-	<u> </u>	357,912.
)en		Professional fundraising fees (Part IX, column (A), line 11e) Total fundraising expenses (Part IX, column (D), line 25) 80,700		<u> </u>	0.
	EX		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	<u>-</u>	315,838.	373,826.
			Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)		1,113,418.	1,220,228.
			Revenue less expenses Subtract line 18 from line 12		191,199.	
•	oz Sez			Be	ginning of Current Year	End of Year
	Net Assets or Fund Balances	20	Total assets (Part X, line 16)		1,194,955.	1,499,247.
	d Be	21	Total liabilities (Part X, line 26)		1,011.	34,980.
	Fig	22	Net assets or fund balances Subtract line 21 from line 20		1,193,944.	1,464,267.
		<u>irt II</u>	120-1			
			alties of perjury, I declare the Thave examined this return, including accompanying schedules and			ly knowledge and belief, it is
	true,	correc	ct, and complete. Declaration of peparer (other than officer) is based on all information of which p	reparer	has any knowledge.	1.0
	_		Sugnature of Officer		Date 19	L/8
	Sıgr				Date 7	
	Her	е	Justine Palmore, Treasurer Type or print name and title			
		-		C	Date Check	PTIN
	Paid		Print/Type preparer's name Ann M. Thompson Preparer's signature M. Thompson	ر اد	6/05/2018 self-employ	red P00719770
		arer	Firm's name Jones and Kolb		Firm's EIN	58-1763570
		Only	Firm's address 3475 Piedmont Road, Suite 1500			
			Atlanta		Phone no. (4	04)262-7920
	Мау	the I	RS discuss this return with the preparer shown above? (see instructions)			X Yes No
			AND AN AND AND AND AND AND AND AND AND A			Form 990 (2017)

See Schedule O for Organization Mission Statement Continuation

Form 990 (2017) StandUp for Kids
Part IV Checklist of Required Schedules

	·		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	<u>X</u>	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		Х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or	-		
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		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		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X			
	as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	X	
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			l I
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
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
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			v
40-	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	100	х	
h	Was the organization included in consolidated, independent audited financial statements for the tax year?	12a	^	
IJ	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		Х
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		X
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,	110		
-	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		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines		l	
	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	<u>1</u> 9		<u> </u>
		Form	990 (2017)

Form 990 (2017) StandUp for Kids Part IV Checklist of Required Schedules (continued)

	•		Yes	NO.
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Х
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X_
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals 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		X
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 25a	24a		X_
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		
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit		-	
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		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		X _
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or			
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes,"			ļ
	complete Schedule L, Part II	26		\mathbf{x}_{-}
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			į
	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		Х
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		Х
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	Х	
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		Х
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		<u>X</u> _
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		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	X	
		Form	990 ((2017)

	Check if Schedule O contains a response or note to any line in this Part V				
				Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable	15	$\neg \uparrow$		
b	Enter the number of Forms W-2G included in line 1a. Enter -0 if not applicable 1b	0		i	
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable ga	aming			
	(gambling) winnings to prize winners?	- I	1c	X	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,				
	filed for the calendar year ending with or within the year covered by this return	9		}	
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?		2b	x	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)				
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?		3a	Į	X
b	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O	:	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over	er, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4	4a		X
b	If "Yes," enter the name of the foreign country				
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FB	BAR)			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	1	5a	Ì	Х
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	[[5b		Х
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	_ :	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization	ion solicit			
	any contributions that were not tax deductible as charitable contributions?	L	6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts		}	\	
	were not tax deductible?		6ь 📗		
7	Organizations that may receive deductible contributions under section 170(c).		Ì	}	
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provide	d to the payor?	7a		_X_
b	,	ئے	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required		1	}	
	to file Form 8282?	تــا	7c		_X_
d	If "Yes," indicate the number of Forms 8282 filed during the year		- 1	Ì	
е	, , , , , , , , , , , , , , , , , , , ,	<u></u>	7e		<u> X</u>
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	<u>-</u> -	7f		<u>X</u>
g		· -	7g		
		orm 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the		ĺ	}	
_	sponsoring organization have excess business holdings at any time during the year?	ļ	8		
9	Sponsoring organizations maintaining donor advised funds.		_		
a			9a		
10		-3	9b		
10	Section 501(c)(7) organizations. Enter Initiation fees and capital contributions included on Part VIII, line 12		1		
a					
11	Section 501(c)(12) organizations. Enter.			1	
' ' a			- [ļ	
b			l		
	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		
		 		7	
13	Section 501(c)(29) qualified nonprofit health insurance issuers.				
	Is the organization licensed to issue qualified health plans in more than one state?	1	13a		
-	Note. See the instructions for additional information the organization must report on Schedule O	<u> </u>		\neg	
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			- 1	
С			_	_	_
14a	Did the organization receive any payments for indoor tanning services during the tax year?	1	14a		X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	_	14b		
			Form (990 (2017

StandUp for Kids 33-0414855 Form 990 (2017) Part VI | Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI Section 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 10 1a 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. 10 b Enter the number of voting members included in line 1a, above, who are independent Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other X officer, director, trustee, or key employee? 2 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? X 3 X Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 X Did the organization become aware during the year of a significant diversion of the organization's assets? 5 5 X Did the organization have members or stockholders? 6 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or X more members of the governing body? b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? 7b Х Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following. X The governing body? 8a X b Each committee with authority to act on behalf of the governing body? 8b 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 Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code) Yes No 10a Did the organization have local chapters, branches, or affiliates? Х 10a b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, 10b and branches to ensure their operations are consistent with the organization's exempt purposes? X 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? X 11a b Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 X 12a Х b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe X in Schedule O how this was done 12c Did the organization have a written whistleblower policy? X 13 13 Х Did the organization have a written document retention and destruction policy? 14 14 Did the process for determining compensation of the following persons include a review and approval by independent 15 persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official X 15a X Other officers or key employees of the organization 15b If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? X 16a b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed >CA, GA 17 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available 18 for public inspection. Indicate how you made these available. Check all that apply X Own website ___ Another's website Upon request Other (explain in Schedule O) Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year State the name, address, and telephone number of the person who possesses the organization's books and records Juanita Mitchell - 404-954-6614 200 Nelson Ferry Road, Suite B, Decatur, 30030

732006 11-28-17

Form 990 (2017)

Form 990 (2017) StandUp for Kids 33-0. Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated

Employees, and Independent Contractors

Check if Schedule O contains a response or note to any line in this Part VI	Check if Schedule	O contains a res	ponse or note t	to any line in	this Part VII
---	-------------------	------------------	-----------------	----------------	---------------

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

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

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

(1) Eddy Ameen Chairman (2) Justine Palmore Treasurer/Program ED (3) Susan Dudas Board Member (4) Ain Grooms Board Member (5) Charles Brown	week (list any hours for related organizations below line) 4.00	X Individual frustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee		from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization
Chairman (2) Justine Palmore Treasurer/Program ED (3) Susan Dudas Board Member (4) Ain Grooms Board Member	40.00				l	로등	Former			and related organizations
(2) Justine Palmore Treasurer/Program ED (3) Susan Dudas Board Member (4) Ain Grooms Board Member										
Treasurer/Program ED (3) Susan Dudas Board Member (4) Ain Grooms Board Member		x	1	X	L.			0.	0.	0
(3) Susan Dudas <u>Board Member</u> (4) Ain Grooms Board Member	1.00	IX.	l	_					_	_
Board Member (4) Ain Grooms Board Member	1.00	+==		X				15,100.	0.	0
(4) Ain Grooms Board Member			1	i						
Board Member	4 00	X	ļ					0.	0.	0
	1.00									_
(5) Charles Brown	-	X	<u> </u>					0.	0.	0.
	1.00									_
Board Member	1 00	X						0.	0.	0.
(6) Elizabeth Franklin	1.00	7,			!					
Board Member	1.00	X						0.	0.	0 .
(7) Jim Dooley	1.00	x			1			0.	0.	0
Board Member	1.00	Δ.	-	-		\vdash		<u> </u>	<u>U•</u>	0 .
(8) Nikki Waters	1.00	X					.	0.	0.	0
Board Member (9) Robert Peters	1.00	Δ						<u>U•</u>		0 .
Board Member	1.00	x						0.	0.	0
(10) Tony Bailey	1.00									
Board Member		X						0.	0.	0 .
(11) Juanita Mitchell	40.00						_	<u>~</u> _		<u>~</u>
Senior Director of Finance				X			j	64,950.	0.	0.
			i							
										
				\dashv		\vdash				

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ▶ 0

Form 990 (2017)

	•	Check if Schedule O con	tains a response	or note to any li	ne in this Part VIII			
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
इ इ	1 a	Federated campaigns	1a		†			1 312 311
ran	b		1b		1			
G E	c	F	10		1			
ar fts	ď		1d					
S,E	e	0			1	1		1
e S	f	All other contributions, gifts, gran			1			
E E	·	similar amounts not included abo		480,801.		<u> </u>		
Öğ	g			237,969.	1			1
Contributions, Gifts, Grants and Other Similar Amounts	_	Total. Add lines 1a-1f		•	1,480,801.	ĺ		
				Business Code				
မွ	2 a	Training & Misc	Prog	900099	9,750.	9,750.		
اه ق	b							
SE	С							
Program Service Revenue	d							
	е							
4	f	All other program service reve	enue					
	g	Total. Add lines 2a-2f			9,750.			
	3	Investment income (including	dividends, inter	est, and				
		other similar amounts)		>				
	4	Income from investment of ta	x-exempt bond p	oroceeds >				
	5	Royalties						
			(ı) Real	(II) Personal	<u> </u>			Ţ
	6 a	Gross rents						
	b	Less rental expenses						}
	С	Rental income or (loss)						1
	d	Net rental income or (loss)						<u></u>
-	7 a	Gross amount from sales of	(i) Securities	(II) Other	ļ	į		
İ		assets other than inventory						
	b	Less cost or other basis		}				
l		and sales expenses						
1	С	Gain or (loss)	L	<u></u>	j			
- {	d	Net gain or (loss)						
e l	8 a	Gross income from fundraisin	g events (not	l I				
i i		including \$	of					
ě		contributions reported on line	1c) See	1	į į			
ا <u>د</u>		Part IV, line 18	а					
Other Reven		Less direct expenses	þ	L				
		Net income or (loss) from fund	-					
Ì	9 a	Gross income from gaming ac	ctivities See	Ì				
		Part IV, line 19	а					
		Less, direct expenses	b	L				
1	С	Net income or (loss) from garr	ning activities					
Į	10 a	Gross sales of inventory, less	returns					
ĺ		and allowances	а					
}		Less cost of goods sold	b	L	1			
	<u> </u>	Net income or (loss) from sale						ļ
}		Miscellaneous Revenu		Business Code		}		
ļ	11 a							
- 1	b			ļ				
}	C	All all and a second		<u> </u>				
- [d	All other revenue		<u></u>				
		Total, Add lines 11a-11d			1 400 551			
	12	Total revenue See instructions.	· · · · · · · · · · · · · · · · · · ·	<u>P</u> _	1,490,551.	9,750.	0	0.

Form 990 (2017) StandUp for Kids Part IX Statement of Functional Expenses

Sect	on 501(c)(3) and 501(c)(4) organizations must com	plete all columns All oth	er organizations must co	mplete column (A)	
	Check if Schedule O contains a respon				
Do 1 7b,	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				· · · · · · · · · · · · · · · · · · ·
	individuals See Part IV, line 22	488,490.	488,490.		
3	Grants and other assistance to foreign				
_	organizations, foreign governments, and foreign				
	individuals See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
Ū	trustees, and key employees	80,050.	60,792.	14,500.	4,758
6	Compensation not included above, to disqualified				-/
Ū	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	257,928.	201,386.	35,708.	20,834.
7	Other salaries and wages	231,3201	202/3000	- 5577551	20,001
8	Pension plan accruals and contributions (include				
8	section 401(k) and 403(b) employer contributions)				
^	Other employee benefits				
9	· ·	19,934.	14,950.	3,987.	997.
10	Payroll taxes	19,934.	14,930.	3,301.	231
11	Fees for services (non-employees)				
	Management	10,186.	9,167.	1,019.	
b	Legal		9,10/.	8,500.	
С	j i	8,500.		0,300.	
d	, 0				
е	_ · .				
f	Investment management fees				
g	, ,	7 010	2 (02	4 21 5	
	column (A) amount, list line 11g expenses on Sch 0)	7,818.	3,603.	4,215.	256
12	Advertising and promotion	1,778.	1,334.	88.	356.
13	Office expenses	15,847.	11,273.	3,933.	641.
14	Information technology				
15	Royalties	160 015	140 610		
16	Occupancy	163,317.	148,612.	7,636.	7,069.
17	Travel	20,586.	18,715.	1,310.	561.
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				1 222
19	Conferences, conventions, and meetings	21,983.	19,785.	1,099.	1,099
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	1,171.	1,112.		59.
23	Insurance	18,467.	14,766.	2,830.	871
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) amount, list line 24e expenses on Schedule 0.)				_
а	The state of the s	39,587.			39,587
b	201 77	18,860.	12,856.	5,309.	695
С	0 -1	16,805.	14,312.	1,678.	815
	Dues and Subscriptions	14,366.	10,774.	1,437.	2,155.
	All other expenses	14,555.	12,363.	1,989.	203
25	Total functional expenses. Add lines 1 through 24e	1,220,228.	1,044,290.	95,238.	80,700
26	Joint costs. Complete this line only if the organization	<u> </u>		•	<u> </u>
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)				
73201	0 11-28-17			· · · · · · · · · · · · · · · · · · ·	Form 990 (2017

Part X Balance Sheet

Part X	Balance Sheet			
•	Check if Schedule O contains a response or note to any line in this Part X			
		(A) Beginning of year		(B) End of year
1	Cash · non-interest-bearing	981,605.	1	1,295,117
2	Savings and temporary cash investments		2	
3	Pledges and grants receivable, net	168,950.	3	156,293
4	Accounts receivable, net		4	
5	Loans and other receivables from current and former officers, directors,			
	trustees, key employees, and highest compensated employees. Complete			
	Part II of Schedule L		5	
6	Loans and other receivables from other disqualified persons (as defined under			
	section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing			
	employers and sponsoring organizations of section 501(c)(9) voluntary			
,	employees' beneficiary organizations (see instr) Complete Part II of Sch L		6	
7	Notes and loans receivable, net		7	
8	Inventories for sale or use		8	
9	Prepaid expenses and deferred charges	13,203.	9	18,55
10a	Land, buildings, and equipment cost or other	13,203.	-	
'0"	basis. Complete Part VI of Schedule D 10a 63, 283			
Ь	62 601		10c	59:
11	Investments - publicly traded securities	1,702.	11	
12	Investments - other securities See Part IV, line 11		12	
13	Investments - program-related See Part IV, line 11		13	
14	Intangible assets		14	
15	Other assets See Part IV, line 11	29,435.	15	28,69
16	Total assets. Add lines 1 through 15 (must equal line 34)	1,194,955.	16	1,499,24
17	Accounts payable and accrued expenses	1,011.	17	34,84
18	Grants payable	1,011.	18	<u> </u>
19	Deferred revenue			13
1			19	1.3.
20	Tax-exempt bond liabilities		20	
21	Escrow or custodial account liability Complete Part IV of Schedule D		21	
22	Loans and other payables to current and former officers, directors, trustees,			
	key employees, highest compensated employees, and disqualified persons			
22	Complete Part II of Schedule L		22	
23	Secured mortgages and notes payable to unrelated third parties		23	
24	Unsecured notes and loans payable to unrelated third parties		24	
25	Other liabilities (including federal income tax, payables to related third			
	parties, and other liabilities not included on lines 17-24) Complete Part X of			
	Schedule D	1 011	25	34 00
26	Total liabilities. Add lines 17 through 25	1,011.	26	34,980
_	Organizations that follow SFAS 117 (ASC 958), check here ► X and			
27 28 29 30 31 32	complete lines 27 through 29, and lines 33 and 34.	1 000 055		1 202 001
27	Unrestricted net assets	1,082,955.	27	1,323,98
28	Temporarily restricted net assets	110,989.	28	140,282
29	Permanently restricted net assets		29	
	Organizations that do not follow SFAS 117 (ASC 958), check here			
j	and complete lines 30 through 34.		_	
30	Capital stock or trust principal, or current funds		30	
31	Paid-in or capital surplus, or land, building, or equipment fund		31	·····
32	Retained earnings, endowment, accumulated income, or other funds	1 102 044	32	1 464 66
33	Total net assets or fund balances	1,193,944.	33	1,464,26
34	Total liabilities and net assets/fund balances	1,194,955.	34	1,499,247

	990 (2017) StandUp for Kids	33-04	14855	Pa	ge 12
Pa	rt XI Reconciliation of Net Assets				
	' Check if Schedule O contains a response or note to any line in this Part XI	, , , , , , , , , , , , , , , , , , , 			
1	Total revenue (must equal Part VIII, column (A), line 12)	1	1,490),5	<u>51.</u>
2	Total expenses (must equal Part IX, column (A), line 25)	2	1,220),2	<u> 28.</u>
3	Revenue less expenses Subtract line 2 from line 1	3			23.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	1,193	3,9	44.
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	1,464	1,2	<u>67.</u>
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990 L 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	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separa	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	X	
	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?		3a		_X_
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the req	uired audit			
	or guidite, explain why in Schoolule O and describe any stone taken to undergo such audite		اما		

Form **990** (2017)

SCHEDULE A

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

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

► Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

Inspection

Name of the organization Employer identification number 33-0414855 StandUp for Kids Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is (For lines 1 through 12, check only one box) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ)) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state 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)(ıv). (Complete Part II) 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) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university 10 X An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III) An organization organized and operated exclusively to test for public safety See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization You must complete Part IV. Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s) You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions) You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions) You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type III, Type III functionally integrated, or Type III non-functionally integrated supporting organization f Enter the number of supported organizations Provide the following information about the supported organization(s) (iv) is the organization listed (I) Name of supported (III) Type of organization (v) Amount of monetary (vi) Amount of other in your governing document? (described on lines 1-10 organization support (see instructions) support (see instructions) Yes above (see instructions))

Sche	dule A (Form 990 or 990-EZ) 2017 S	tandUp fo	r Kids			33-041	L 48 55 Page 2
Pai		Organizations	Described in	n Sections 170	0(b)(1)(A)(iv) an		
	· (Complete only if you checke						
	fails to qualify under the test:	s listed below, plea	ase complete Parl	t III)			
Sec	tion A. Public Support	· 					
	dar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
	Gifts, grants, contributions, and	(B) 2010	(6) 2014	(6) 2013	(u) 2010	(e) 2017	/(I) Total
	membership fees received (Do not			}			
	include any "unusual grants ")		}	}			1
	•			 		 /-	
	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf				 	- /	
-	The value of services or facilities		{	1			
	furnished by a governmental unit to	}		1		1	
	the organization without charge			-		 	<u> </u>
	Total. Add lines 1 through 3			 	//_	<u> </u>	
	The portion of total contributions			1			
	by each person (other than a			Ì			
	governmental unit or publicly		}				
	supported organization) included		1	1			
	on line 1 that exceeds 2% of the		ļ	/			
	amount shown on line 11,						
	column (f)	<u> </u>			ļ	<u> </u>	ļ
	Public support. Subtract line 5 from line 4	L	<u> </u>		 _	<u> </u>	
Sec	tion B. Total Support						
	dar year (or fiscal year beginning in) 🕨	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(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	! 		<u> </u>			
9	Net income from unrelated business			ĺ		(
	activities, whether or not the	:					
1	ousiness is regularly carried on		/				
10	Other income Do not include gain	/			}		
1	or loss from the sale of capital			}	}	<u> </u>	
	assets (Explain in Part VI)				<u> </u>		
11	Total support. Add lines 7 through 10				<u> </u>		
12	Gross receipts from related activities,	etc (see instruction	ons)			12	
13	F irst five years. If the Form 990 is foi	the organization's	s first, second, thi	rd, fourth, or fifth t	tax year as a sectio	n 501(c)(3)	
	organization, check this box and stor						▶□
	tion C. Computation of Publ	'					
14	Public support percentage for 2017/(I	ine 6, column (f) d	ivided by line 11,	column (f))		14	%
15	Public support percentage from 2016	Schedule A, Part	II, line 14			15	%
16a 🤄	33 1/3% support test - 2017./if the c	organization did no	ot check the box o	on line 13, and line	14 is 33 1/3% or r	nore, check this b	ox and
;	stop here. The organization qualifies	as a publicly supp	orted organization	n			ightharpoons
b a	33 1/3% support test - 2016. If the c	organization did no	it check a box on	line 13 or 16a, and	d line 15 is 33 1/3%	6 or more, check t	his box
;	and <mark>stop here.</mark> The organization qual	ifies as a publicly s	supported organiz	zation			ightharpoons
17a	10% -facts-and-circumstances tes	t - 2017. If the org	anization did not	check a box on lin	e 13, 16a, or 16b,	and line 14 is 10%	or more,
	and if the organization meets the "fac	ts-and-circumstan	ces" test, check t	this box and stop I	<mark>here.</mark> Explain in Pa	rt VI how the orga	nization
1	meets the "facts-and-circumstances"	test The organiza	tion qualifies as a	publicly supporte	d organization		
b	10% -facts-and-circumstances tes	t - 2016. If the org	anization did not	check a box on lin	e 13, 16a, 16b, or	17a, and line 15 is	10% or
1	more, and if the organization meets th	ne "facts-and-circu	mstances" test, c	heck this box and	stop here. Explair	n in Part VI how th	е
	organization meets the "facts-and-circ	cumstances" test	The organization	qualifies as a publ	licly supported orga	anızatıon	▶□
18	Private foundation. If the organization	n did not check a	box on line 13, 16	Sa, 16b, 17a, or 17	b, check this box a	and see instruction	ns 🕨 🗀
					Sche	edule A (Form 990	0 or 990-EZ) 2017
	/						

Schedule A (Form 990 or 990-EZ) 2017 StandUp for Kids | Part III | Support Schedule for Organizations Described in Section 509(a)(2)

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

Se	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
	Gifts, grants, contributions, and						
	membership fees received (Do not						
	ınclude any "unusual grants ")	1006818.	1174063.	1357354.	1300388.	1480801.	6319424.
2	Gross receipts from admissions, merchandise sold or services per- formed, or facilities furnished in any activity that is related to the						
	organization's tax-exempt purpose	22,463.	7,043.	7,727.	4,529.	9,750.	51,512.
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organ- ization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
_		1029281.	1181106.	1365081.	1304917.	1490551.	6370036
	Total. Add lines 1 through 5	1023201.	1101100.	T20200T.	130431/•	1430331.	6370936.
7 8	Amounts included on lines 1, 2, and 3 received from disqualified persons						0.
t) 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.
ď	Add lines 7a and 7b						0.
8	Public support. (Subtract line 7c from line 6)						6370936.
Se	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
9	Amounts from line 6	1029281.	1181106.	1365081.	1304917.	1490551.	6370936.
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
Ł	Unrelated business taxable income				-		
	(less section 511 taxes) from businesses acquired after June 30, 1975						
(: Add lines 10a and 10b						
11	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 VI)						
13	Total support (Add lines 9, 10c, 11, and 12)	1029281.	1181106.	1365081.	1304917.	1490551.	6370936.
	First five years. If the Form 990 is for	the organization's	first, second, thir	d, fourth, or fifth ta			
	check this box and stop here						>
Se	ction C. Computation of Publ	ic Support Per	rcentage				
15	Public support percentage for 2017 (I	ine 8, column (f) di	ivided by line 13, c	olumn (f))		15	100.00 %
16	Public support percentage from 2016	Schedule A, Part	III, line 15			16	100.00 %
Se	ction D. Computation of Inves						-
17	Investment income percentage for 20	117 (line 10c, colun	nn (f) divided by lir	e 13, column (f))		17	.00 %
18	Investment income percentage from	2016 Schedule A, I	Part III, line 17			18	%
198	33 1/3% support tests - 2017. If the	organization did n	ot check the box	on line 14, and line	15 is more than 3	3 1/3%, and line 1	7 is not
	more than 33 1/3%, check this box a	nd stop here. The	organization qual	fies as a publicly s	supported organiza	ation	$\triangleright [X]$
t	33 1/3% support tests - 2016. If the line 18 is not more than 33 1/3%, che						and
20	Private foundation. If the organization		•	•		-	

Part IV Supporting Organizations

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

Sec	etion A. All Supporting Organizations			
	Mon A. All Supporting Organizations	· · · ·	Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing		1.00	
·	documents? If "No," describe in Part VI how the supported organizations are designated. If designated by			
	class or purpose, describe the designation. If historic and continuing relationship, explain	1		
2	Did the organization have any supported organization that does not have an IRS determination of status			
_	under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported			
	organization was described in section 509(a)(1) or (2)	2		
За	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer			
- Cu	(b) and (c) below	За		:
h	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and			1
	satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the			
	organization made the determination.	3b		
c	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B)	1		
·	purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use	3c		
42	Was any supported organization not organized in the United States ("foreign supported organization")? If	- 55		
Tu	"Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below	4a		
h	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign	74	 	
J	supported organization? If "Yes," describe in Part VI how the organization had such control and discretion			
	despite being controlled or supervised by or in connection with its supported organizations	4b		
_	Did the organization support any foreign supported organization that does not have an IRS determination	40		
·	under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used			
	to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B)			
	purposes	4c		
52	Did the organization add substitute or remove any supported organizations during the tax year? If "Yes."	10		
vu	answer (b) and (c) below (if applicable) Also, provide detail in Part VI, including (i) the names and EIN			
	numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action,		1	
	(iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action			
	was accomplished (such as by amendment to the organizing document)	5a	1	İ
h	Type I or Type II only. Was any added or substituted supported organization part of a class already	- 54		
	designated in the organization's organizing document?	5b		
c	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to			
	anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class			
	benefited by one or more of its supported organizations, or (iii) other supporting organizations that also			
	support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in			
	Part VI.	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor			
•	(defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with			
	regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7?			
•	If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)	8		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more			
	disqualified persons as defined in section 4946 (other than foundation managers and organizations described			
	in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.	9a		1
b	Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which			
-	the supporting organization had an interest? If "Yes," provide detail in Part VI.	9b	<u> </u>	
С	Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit			
_	from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.	9c		
10a	Was the organization subject to the excess business holdings rules of section 4943 because of section			
	4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated			
	supporting organizations)? If "Yes," answer 10b below	10a		
b	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to			

determine whether the organization had excess business holdings)

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of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard

Distributable Amount. Subtract line 5 from line 4, unless subject to
emergency temporary reduction (see instructions)

Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions)

Schedule A (Form 990 or 990-EZ) 2017

1

2

3

4

5

Current Year

Section C - Distributable Amount

Enter greater of line 2 or line 3

Income tax imposed in prior year

Enter 85% of line 1

3

5

Adjusted net income for prior year (from Section A, line 8, Column A)

Minimum asset amount for prior year (from Section B, line 8, Column A)

Pai	Non-Functionally Integrated 509	(a)(3) Supporting Org	anizations (continued)	
<u>Sect</u>	ion D - Distributions			Current Year
1_	Amounts paid to supported organizations to accomplish exe	empt purposes		
2	Amounts paid to perform activity that directly furthers exempt			
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purpos	ns		
4	Amounts paid to acquire exempt-use assets			
<u>_5</u> _	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in Part VI). See instructions			
	Total annual distributions. Add lines 1 through 6			
8	Distributions to attentive supported organizations to which to	he organization is responsiv	e	
	(provide details in Part VI) See instructions	····		
9_	Distributable amount for 2017 from Section C, line 6			
10_	Line 8 amount divided by line 9 amount	· · · · · · · · · · · · · · · · · · ·		
Sect	on E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2017	(iii) Distributable Amount for 2017
1	Distributable amount for 2017 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2017 (reason-			
_	able cause required- explain in Part VI) See instructions			
3	Excess distributions carryover, if any, to 2017			
a				
ь	From 2013			
c	From 2014			
d	From 2015			
е_	From 2016			
f_	Total of lines 3a through e			
g	Applied to underdistributions of prior years			
<u>h</u>	Applied to 2017 distributable amount			
	Carryover from 2012 not applied (see instructions)			
	Remainder Subtract lines 3g, 3h, and 3i from 3f			
4	Distributions for 2017 from Section D,	_		
	line 7 \$			
a_	Applied to underdistributions of prior years			
b	Applied to 2017 distributable amount			
с	Remainder Subtract lines 4a and 4b from 4			
5	Remaining underdistributions for years prior to 2017, if			
	any Subtract lines 3g and 4a from line 2 For result greater			
	than zero, explain in Part VI. See instructions			
6	Remaining underdistributions for 2017 Subtract lines 3h			
	and 4b from line 1 For result greater than zero, explain in			
	Part VI. See instructions			
7	Excess distributions carryover to 2018. Add lines 3j			
	and 4c			
8_	Breakdown of line 7			
a_	Excess from 2013			
b	Excess from 2014			
С	Excess from 2015			
d	Excess from 2016			
е	Excess from 2017			

Schedule A (Form 990 or 990-EZ) 2017

SCHEDULE D

Department of the Treasury Internal Revenue Service

(Form 990)

Supplemental Financial Statements

► Complete if the organization answered "Yes" on Form 990,
Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

► Attach to Form 990.

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

OMB No 1545-0047 Open to Public Inspection

Name of the organization

Employer identification number

Da	StandUp for Kids	0.1.	33-0414855			
Pa		ids or Other Similar Funds or a	Accounts. Complete if the			
	organization answered "Yes" on Form 990, Part IV, line 6		~ <u>-</u>			
		(a) Donor advised funds	(b) Funds and other accounts			
1	Total number at end of year					
2	Aggregate value of contributions to (during year)					
3	Aggregate value of grants from (during year)					
4	Aggregate value at end of year					
5	Did the organization inform all donors and donor advisors in writing	that the assets held in donor advised fu	nds			
	are the organization's property, subject to the organization's exclusi	ve legal control?	Yes No			
6	Did the organization inform all grantees, donors, and donor advisors	in writing that grant funds can be used	only			
	for charitable purposes and not for the benefit of the donor or donor	advisor, or for any other purpose confe	erring			
	impermissible private benefit?		Yes No			
Pa	t II Conservation Easements. Complete if the organization	on answered "Yes" on Form 990, Part I				
1	Purpose(s) of conservation easements held by the organization (che					
	Preservation of land for public use (e.g., recreation or education) Preservation of a historically important land area					
	Protection of natural habitat	Preservation of a certified I				
	Preservation of open space					
2	Complete lines 2a through 2d if the organization held a qualified con	servation contribution in the form of a c	conservation easement on the last			
	day of the tax year		Held at the End of the Tax Year			
а	Total number of conservation easements	2a				
b	Total acreage restricted by conservation easements	2b				
	c Number of conservation easements on a certified historic structure included in (a) 2c					
d	Number of conservation easements included in (c) acquired after 7/2	• •	20			
u	listed in the National Register	20/00, and not on a mistoric structure	2d			
3	Number of conservation easements modified, transferred, released,	extinguished or terminated by the orga	<u> </u>			
3	year	oximguished, or terminated by the orga	anzation during 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 m					
Ů	violations, and enforcement of the conservation easements it holds?	• • •	Yes No			
6	Staff and volunteer hours devoted to monitoring, inspecting, handlin		 			
•	>	g or moralione, and ormeroming compensation	nor casemorne doming the year			
7	Amount of expenses incurred in monitoring, inspecting, handling of	violations, and enforcing conservation e	easements during the year			
•	▶ \$	relations, and other only	assiments daming the year			
8	Does each conservation easement reported on line 2(d) above satisf	v the requirements of section 170(h)(4)((B)(i)			
•	and section 170(h)(4)(B)(ii)?	, we require the country of 100	Yes No			
9	In Part XIII, describe how the organization reports conservation ease	ments in its revenue and expense state				
J	include, if applicable, the text of the footnote to the organization's fir					
	conservation easements	anotal diatomond that describes the si	garnzation 3 accounting for			
Pai	t III Organizations Maintaining Collections of Art,	Historical Treasures, or Other	Similar Assets.			
L	Complete if the organization answered "Yes" on Form 990, P.	-				
	If the organization elected, as permitted under SFAS 116 (ASC 958),		and balance sheet works of art			
	historical treasures, or other similar assets held for public exhibition,	•				
	the text of the footnote to its financial statements that describes the		· paolio del tico, pietico, il il alt illi,			
h	If the organization elected, as permitted under SFAS 116 (ASC 958),		halance sheet works of art, historical			
b	treasures, or other similar assets held for public exhibition, education					
		, or research in furtherance of public se	ervice, provide the following amounts			
	relating to these items (i) Payanua included on Form 990, Part VIII, line 1		▶ ¢			
	(i) Revenue included on Form 990, Part VIII, line 1		► \$ ► \$			
	(ii) Assets included in Form 990, Part X	or other similar apacts for financial				
2	If the organization received or held works of art, historical treasures, the following amounts required to be reported under SFAS 116 (ASC	*	, provide			
~	Revenue included on Form 990, Part VIII, line 1	2007 relating to triese items	▶ ¢			
	Assets included in Form 990, Part X		► \$			
	7.000to included in Form 500, rait A		- Ψ			

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

Schedule D (Form 990) 2017

Sche	dule D (Form 990) 2017 StandUp	for Kids						33-04	1485	5 P	age 2
Pai	t III Organizations Maintaining C	ollections of A	rt, His	torical Tr	easures, c	or Other	Simila	ar Asse	ts(contir	iued)	
3	Using the organization's acquisition, accessi	on, and other record	ds, chec	k any of the	following tha	t are a sıgı	nificanti	use of its	collection	n item	S
	(check all that apply).										
а	Public exhibition	c			hange progra	ams					
b	Scholarly research	6	, [_]	Other							
c	Preservation for future generations										
4	Provide a description of the organization's co	ollections and explai	in how th	ney further t	he organization	on's exem	ot purpo	ose in Par	t XIII		
5	During the year, did the organization solicit of	r receive donations	of art, h	istorical trea	isures, or othe	er sımılar a	ssets		_		_
	to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No Part IV Francisco Arrangements Consider the control of the organization's collection?										
Par	Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21										
1a	Is the organization an agent, trustee, custod	an or other intermed	diary for	contribution	ns or other as	sets not in	cluded	_	_		_
	on Form 990, Part X?					J No					
b	b If "Yes," explain the arrangement in Part XIII and complete the following table										
									Amount	<u>:</u>	
С	Beginning balance						1c				
d	Additions during the year						1d				
е	Distributions during the year						1e				
f	Ending balance						1f				
	Did the organization include an amount on F					•	17	Ĺ	_ Yes	<u>_</u>	_ No
	b If "Yes," explain the arrangement in Part XIII Check here if the explanation has been provided on Part XIII Part V Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10										
Par	t v Endowment Funds. Complete								T- :-		
	_	(a) Current year	(b) P	rior year	(c) Two year	s back (d) Three y	ears back	(e) Four	years	back
1a	Beginning of year balance		<u> </u>								
b	Contributions								 -		
С	Net investment earnings, gains, and losses								}		
d	Grants or scholarships		 -		ļ		···		 		
е	Other expenditures for facilities				i				ł		
	and programs				ļ				 		
f	Administrative expenses				 				 		
g	End of year balance		L		<u> </u>				L		
2	Provide the estimated percentage of the curi	rent year end baland		g, column (a	a)) heid as						
а	Board designated or quasi-endowment		_%								
р	Permanent endowment >	%									
С	Temporarily restricted endowment	%									
	The percentages on lines 2a, 2b, and 2c sho										
3a	Are there endowment funds not in the posse	ssion of the organiz	ation tha	at are held a	ind administe	red for the	organiz	:ation	ſ		
	by									Yes	No
	(i) unrelated organizations								3a(ı)		
	(ii) related organizations								3a(ii)		
	If "Yes" on line 3a(ii), are the related organiza	·							3b]		
Par	Describe in Part XIII the intended uses of the tVI Land, Buildings, and Equipm		wment	runas							
T ai	Complete if the organization answere) Dart I	/ line 11 n S	Can Form 000	Dod V lie	. 10				
									(-1) D = -1		
	Description of property	(a) Cost or o		, , ,	or other (other)	٠,,	umulate eciation	ia	(d) Bool	valu	9
	Lond	Dadio (III Vesti		Dasis	(otrier)	uepit	- CIACION				
	Land	ļ									
a	Buildings			2	0,768.		20,7	68			
C	Leasehold improvements				2,515.		$\frac{10,7}{11,9}$				<u>0.</u> 92.
ď	Equipment Other				2,010.		<u>г</u>	٠,٠			14.
	Add lines 1s through 1s (Column (d) must o	aual Form 000 Part	V colur	nn (D) (no 1	1001						92

StandUp for Kids

Schedule D (Form 990) 2017

Schedule D (Form 990) 2017

33-0414855 Page 3

SCHEDULE 1 (Form 990)

(0

Department of the Treasury Internal Revenue Service

Governments, and Individuals in the United States

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

Inspection

► Attach to Form 990.
 Go to www.irs.gov/Form990 for the latest information.

Schedule I (Form 990) (2017) **2** Employer identification number 33-0414855 (h) Purpose of grant or assistance X Yes Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection (g) Description of noncash assistance (f) Method of valuation (book, FMV, appraisal, other) (e) Amount of assistance non-cash Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States recipient that received more than \$5,000. Part II can be duplicated if additional space is needed (d) Amount of cash grant Enter total number of section 501(c)(3) and government organizations listed in the line 1 table (c) IRC section (if applicable) LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. Enter total number of other organizations listed in the line 1 table General Information on Grants and Assistance StandUp for Kids (p) EIN criteria used to award the grants or assistance? 1 (a) Name and address of organization or government Name of the organization Part II Part

Schedule I (Form 990) (2017) 38

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(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
Assistance to individuals consists of clothing, food, sleeping bags, etc. provided to homeless and street kids.	25000	144,721.	Assist from g valuec 343,769,value.	ance is primarily fifts-in-kind and at thrift shop	Clothing, food, sleeping bags, etc.
Part IV Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information	quired in Part I, lin	e 2, Part III, column	(b), and any other a	dditional information	
Part I, Line 2: The Organization has established criteri	riteria	for the re	a for the recipients of	f assistance,	
consisting of clothing, food, sleeping bags, etc.	eping bag]]	he selecti		
for assistance is based on the determination by Organization staff	erminati	on by Orga	nization s	taff or	
volunteers that a youth is homeless or	- 1	ing withou	living without parental	supervision	
or guidance.					
					3

Page 2

33-0414855

Schedule I (Form 990) (2017) StandUp for Kids

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22
Part III Grants and Other Assistance to Boundaries is needed

SCHEDULE M (Form 990)

Noncash Contributions

OMB No 1545-0047

2017

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

Open To Public

Department of the Treasury Internal Revenue Service

Name of the organization

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

Inspection
Employer identification number

	StandUp for	Kids			3	<u>3-0414</u>	<u>855</u>	
Pai	rt I Types of Property							
		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	Method noncash co	(d) of determin ntribution ai	-	:s
1	Art - Works of art							
2	Art - Historical treasures							
3	Art - Fractional interests		L					
4	Books and publications		<u> </u>					
5	Clothing and household goods	X		236,092.	Thrift sl	hop va	<u>lue</u>	s
6	Cars and other vehicles		L					
7	Boats and planes	ļ						
8	Intellectual property							
9	Securities - Publicly traded					·		
10	Securities · Closely held stock	ļ	}					
11	Securities - Partnership, LLC, or		}					
	trust interests							
12	Securities - Miscellaneous							
13	Qualified conservation contribution -				(
	Historic structures							
14	Qualified conservation contribution - Other							
15	Real estate - Residential							
16	Real estate - Commercial	} 						
17	Real estate - Other							
18	Collectibles							
19	Food inventory							
20	Drugs and medical supplies							
21	Taxidermy	 						
22	Historical artifacts	 						
23	Scientific specimens	 						
24	Archeological artifacts	<u></u>						
25	Other ()	 						
26	Other • ()							
27	Other ()							
28	Other ()	<u></u>		<u> </u>				
29	Number of Forms 8283 received by the organi	zation durin	g the tax year for c	contributions				
	for which the organization completed Form 82	83, Part IV, I	Donee Acknowled	gement 29				
						لـــــ	Yes	No
30a	During the year, did the organization receive b	y contribution	on any property rep	ported in Part I, lines 1 throu	gh 28, that it			
	must hold for at least three years from the date	e of the initia	al contribution, and	d which isn't required to be u	sed for			ĺ
	exempt purposes for the entire holding period	7				30a		<u>X</u>
b	If "Yes," describe the arrangement in Part II							
31	Does the organization have a gift acceptance	policy that re	equires the review	of any nonstandard contribu	ıtıons?	_31	<u> </u>	<u>X</u>
32a	Does the organization hire or use third parties	or related or	rganizations to soli	cit, process, or sell noncash				
	contributions?					32a		X
p	If "Yes," describe in Part II							
33	If the organization didn't report an amount in o	olumn (c) fo	r a type of propert	y for which column (a) is che	cked,			1
	describe in Part II				 		LJ	L
LHA	For Paperwork Reduction Act Notice, see	the Instruc	tions for Form 99	0.	Sched	lule M (Forn	n 990)	2017

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SCHEDULE O

Internal Revenue Service

(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.

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

OMB No 1545-0047 2017

Open to Public Inspection

Name of the organization

StandUp for Kids

Employer identification number 33-0414855

Form 990, Part I, Line 1, Description of Organization Mission:
We do this, every day, in cities across America. We carry out our
mission through our volunteers who go to the streets in order to find,
stabilize and otherwise help homeless and street kids improve their
lives by providing and connecting them with life-saving services.
Form 990, Part III, Line 1, Description of Organization Mission:
improve their lives by providing and connecting them with life-saving
services.
Form 990, Part III, Line 4a, Program Service Accomplishments:
and protective environment for kids to relax and escape the dangers of
the streets. Through December 2017, StandUp For Kids assisted over
25,000 homeless and at-risk youth.
Form 990, Part VI, Section B, line 11b:
The Organization's Treasurer reviews the Form 990 in detail. Upon her
approval, the Form 990 is sent to all other members of the Board of
Directors prior to its filing.
Form 990, Part VI, Section B, Line 12c:
Any member of the Board of Directors, principal Officer or member of a
committee with governing Board delegated powers, who has a direct or
indirect financial interest, as defined in the conflict of interest policy,
is an interested person. Also, there is an annual review of the policy and

disclosure of any potential conflicts of interest.

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

732211 09-07-17

Schedule O (Form 990 or 990-EZ) (2017)

Name of the organization StandUp for Kids	Employer identification number 33-0414855
Form 990, Part VI, Section B, Line 15:	
The Board of Directors determines, votes upon and approv	ves the compensation
of the CEO and other key employees.	
Form 990, Part VI, Section C, Line 19:	
The Organization's Form 990, audited financial statement	s and annual report
are available for public inspection on the Organization'	s website.
	-