			27	'a U	0174	103710 9						
	" `99	n	Poturn of Organization Event From Incom	na T	.	OMB No. 1545-0047						
For	n JJ	U	Return of Organization Exempt From Incom	ne i	ax	2018						
			Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except p			<u> </u>						
Dep	artment of t	the Treasury	Do not enter social security numbers on this form as it may be ma	•	ic.	Open to Public						
_	nal Revenu		► Go to www.irs.gov/Form990 for instructions and the latest inform			Inspection						
_			andar year, or tax year beginning 01/01 , 2018, and ending	1	2/31 D Employe	, 20 18						
B. □	Address of	ipplicable.	C Name of organization COOL KIDS CAMPAIGN FOUNDATION INC Doing business as	D cuthose	42-1634330							
\equiv	Name cha		Number and street (or P O box if mail is not delivered to street address) Room/suite									
$\overline{}$	Initial retu	-	8422 BELLONA LANE SUITE 102	E Telephone number 410-560-1770								
=		 √terminated	City or town, state or province, country, and ZIP or foreign postal code		110-000-1770							
	Amended		TOWSON, MD, 21204	•								
	Applicatio	n pending	ubordinates? Ves Vo									
			· · · · · · · · · · · · · · · · · · ·			ıncluded? 🗌 Yes 🔲 No						
<u> </u>	Tax-exem	pt status	√ 501(c)(3)	"No," atta	ach a list. (se	e instructions)						
<u> </u>	Website:		<u></u>		exemption r							
_			Corporation	2004	M State o	of legal domicile MD						
	art I	Summa Briefly do	ary escribe the organization's mission or most significant activities: TO PROVID	T KIDO	MITH 0 0 0	ICCD AND THEIR						
ø	1		S WITH A HIGHER QUALITY OF LIFE WHILE FACING THE CHALLENGES OF CAR		WITH CAP	ICER AND THEIR						
anc	-		WITH A HORIER QUALITY OF CITE WHILE I AGING THE GRACELINGES OF GAI	ioeiv.								
Activities & Governance	2 (Check thi	is box ▶☐ if the organization discontinued its operations or disposed of mo	re than	25% of it	s net assets.						
Š	1		of voting members of the governing body (Part VI, line 1a)		3_	10						
න් ග	4 1	Number o	of independent voting members of the governing body (Part VI, line 1b) .		4	9						
ij	9		nber of individuals employed in calendar year 20 19 (Part V, line 2a)	· · ·	5	6						
Ę			nber of volunteers (estimate if necessary) RECEIVED	.	6	100						
₹			elated business revenue from Part VIII, column (C), line 12	ואָר :	7a	0						
	b 1	Net unrela	ated business taxable income from Form 990-T (2) 38		7b	Current Year						
	8 (Contribut	tions and grants (Part VIII, line 1h)	<u>।श्र</u>		532,118						
Revenue			service revenue (Part VIII, line 2g) OGDEN. UT	'Ö 	175,294	332,110						
eve	1	•	nt income (Part VIII, column (A), lines 3, 4, and 7d)		0	0						
Œ	ŀ		enue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		263,077	127,435						
	12 7	otal reve	enue-add lines 8 through 11 (must equal Part VIII, column (A), line 12)		575,121	659,553						
	1		nd similar amounts paid (Part IX, column (A), lines 1-3)		0	61,518						
	í -	-	paid to or for members (Part IX, column (A), line 4)		0	0						
363	l	•	other compensation, employee benefits (Part IX, column (A), lines 5–10)		323,574	256,465						
penses	ŀ		anal fundraising fees (Part IX, column (A), line 11e)		0	0						
ă	~,		draising expenses (Part IX, column (D), line 25) ► 166,012 penses (Part IX, column (A), lines 11a–11d, 11f–24e)		297,326	311,451						
20	M8 T		enses. Add lines 13–17 (must equal Part IX, column (A), line 25)		620,900	629,434						
೧	l	•	less expenses. Subtract line 18 from line 12		-45,779	30,119						
nd Balance				ing of Cu	rrent Year	End of Year						
SE SE	20 T	otal asse	ets (Part X, line 16)		447,032	381,228						
Ž	21 T	otal liabi	ılıtıes (Part X, line 26)		182,001	86,078						
₹.			s or fund balances. Subtract line 21 from line 20		265,031	295,150						
,	ırt II		ure Block			· 						
Und	der penalti	es of perjur and comple	ry, I declare that I have examined this return, including accompanying schedules and statements, etc. Declaration of preparer (other than officer) is based on all information of which preparer has a	and to t	he best of my edge	y knowledge and belief, it is						
	1		///		<u>タ・イ</u>	4 /]						
Sig			ature of officer	Da	te							
He	re	_	RISTOPHER P FEDERICO, PRESIDENT or print name and title									
		,	pe preparer's name Preparer's signature Date		T =	PTIN						
Pai		1	SCHOLTES CPA Chis Scholes 6/25	119	Check _ self-emple	1 11 1						
	eparer				ı's EIN ▶	03-0483170						

106 TUNBRIDGE ROAD, BALTIMORE, MD 21212

May the IRS discuss this return with the preparer shown above? (see instructions)

For Paperwork Reduction Act Notice, see the separate instructions.

631

Cat. No. 11282Y

410-323-0010

✓ Yes No Form **990** (2018)

Part		
		_
	Check if Schedule O contains a response or note to any line in this Part III	🛚
1	Briefly describe the organization's mission:	
	TO PROVIDE KIDS WITH CANCER AND THEIR FAMILIES WITH A HIGHER QUALITY OF LIFE WHILE FACING THE	
	CHALLENGES OF CANCER.	
	Did the organization undertake any significant program services during the year which were not listed on the	
	prior Form 990 or 990-EZ?	✓ No
	If "Yes," describe these new services on Schedule O.	
3	Did the organization cease conducting, or make significant changes in how it conducts, any program	
	services?	✓ No
	If "Yes," describe these changes on Schedule O.	
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured to the organization of the describe the organization of the organi	
	expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to	others,
	the total expenses, and revenue, if any, for each program service reported.	
	(O)	
4a	* *************************************	<u>!</u>)
	COOL KIDS CAMPAIGN - VARIOUS PROGRAMS PROVIDING ACTIVITIES AND NETWORKING TO CHILDREN WITH CANCER,	
	SUCH AS PROGRAMS LIKE "THE COOL KIDS CONNECTION" (A NEWSLETTER FOR CHILDREN THAT IS DISTRIBUTED TO ONCOLOGY HOSPITALS THROUGHOUT THE USA); "COOL KIDS CARE PACKAGES" (ITEMS SENT TO CHILDREN WITH	
	CANCED TO DISTOACT TUEM DUDING THEIR TREATMENTS! AND A WEEK OF CHANGE CAMP	
4b		
	,, , ,, ,, ,, ,, ,, ,, ,, ,,,,,,,,,	
	COOL KIDS LEARNING CENTER - VARIOUS PROGRAMS OFFERED AT A CENTER IN BALTIMORE DESIGNED TO ADDRESS	
	COOL KIDS LEARNING CENTER - VARIOUS PROGRAMS OFFERED AT A CENTER IN BALTIMORE DESIGNED TO ADDRESS THE ACADEMIC AND SOCIAL IMPLICATIONS OF CHILDHOOD CANCER, INCLUDING (1) EDUCATION, SUPPORT AND	
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orm 9	90 (2018)	Ų,	H	Page
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	1	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	1	
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		1
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? <i>If "Yes," complete Schedule C, Part II</i>	4		1
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		1
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		✓
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		1
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8_	ļ	1
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		✓
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		✓
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.			
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	✓	
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		1
¢	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		✓
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		1
6	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		✓
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	✓	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		✓
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		1
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		1
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		✓
þ	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		1
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		✓
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		1
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 (see instructions)	17		✓.
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II.	18	1	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		✓
20 a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		✓
b		20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	1	

Part -	Checklist of Required Schedules (continued)			, ——	
			Yes	No	
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		1	
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		✓	
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		1	
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b			
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c			
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? .	24d			
25a	Section 501(c)(3), 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		1	
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		1	
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," complete Schedule L, Part II				
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III				
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		✓	
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		1	
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		1	
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		✓	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified				
	conservation contributions? If "Yes," complete Schedule M	30	L	✓	
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31	L	✓	
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		✓	
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		1	
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		✓	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		✓	
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		1	
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		1	
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	1		
Part					
	Check if Schedule O contains a response or note to any line in this Part V				
			Yes	No	
1a b	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and				
	reportable gaming (gambling) winnings to prize winners?	1c			

Part -	Statements Regarding Other IRS Filings and Tax Compliance (continued)			,
	Fater the country of country as a second of Second No. 7		Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			i
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 6	2b	1	
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	20	-	┼
2-	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			7
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year? If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b	 	-
b 4a		35	 	\vdash
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		1
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 (FBAR).		 	
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		1
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		✓
C	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		}	
ь	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		1
-	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
	and services provided to the payor?	7a	✓	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	\	
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7c		✓
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		1
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		✓
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
_	sponsoring organization have excess business holdings at any time during the year?	8		ļ
9	Sponsoring organizations maintaining donor advised funds.			
a	Did the sponsoring organization make any taxable distributions under section 4966?	9a		<u> </u>
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter Initiation fees and capital contributions included on Part VIII, line 12			
a b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . 10b			1
11	Section 501(c)(12) organizations. Enter:			
``a	Gross income from members or shareholders	į		!
	Gross income from other sources (Do not net amounts due or paid to other sources]
	against amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	Í		
а	is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note. See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which	j		
	the organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		✓
	, and the second	14b		
	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			
	excess parachute payment(s) during the year?	15		✓
	If "Yes," see instructions and file Form 4720, Schedule N.		[نب
	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		✓
	If "Yes," complete Form 4720, Schedule O.	ľ	1	

- 011110	35 (21-5)			age C				
Part	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. S	See in	struct	tions.				
<u> </u>	Check if Schedule O contains a response or note to any line in this Part VI	<u> </u>	<u>-:</u>	. [₹]				
Secti	ion A. Governing Body and Management		Yes	No				
12	Enter the number of voting members of the governing body at the end of the tax year 1a 10	<u></u>	103	1				
14	If there are material differences in voting rights among members of the governing body, or	1						
	if the governing body delegated broad authority to an executive committee or similar							
	committee, explain in Schedule O.		ŀ					
ь	Enter the number of voting members included in line 1a, above, who are independent . 1b 9	1	ł					
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		1				
3	supervision of officers, directors, or trustees, or key employees to a management company or other person?							
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		✓				
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5	<u> </u>	/				
6	Did the organization have members or stockholders?	6	-	1				
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		1				
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		1				
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:							
а	The governing body?	8a	✓					
b	Each committee with authority to act on behalf of the governing body?	8b	1					
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		1				
Secti	on B. Policies (This Section B requests information about policies not required by the Internal Reven	ue C	ode.)					
			Yes	No				
10a	Did the organization have local chapters, branches, or affiliates?	10a		1				
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b						
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	✓	L.,				
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			لــــا				
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	√	<u> </u>				
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	✓					
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	√					
13	Did the organization have a written whistleblower policy?	13	7	 				
14	Did the organization have a written document retention and destruction policy?	14	√	 				
15	Did the process for determining compensation of the following persons include a review and approval by	<u> </u>		1				
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			<u> </u>				
а	The organization's CEO, Executive Director, or top management official	15a		7				
þ	Other officers or key employees of the organization	15b		1				
	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?	 16a		7				
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			1				
	organization's exempt status with respect to such arrangements?	16b						
Secti	on C. Disclosure							
17	List the states with which a copy of this Form 990 is required to be filed ► MD, NC, SC							
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable), 990, and 990-T (3)s only) available for public inspection. Indicate how you made these available. Check all that apply.	(Sec	tion 5	501(c)				
	☐ Own website ☐ Another's website ☑ Upon request ☐ Other (explain in Schedule O)							
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of inte- financial statements available to the public during the tax year.	erest (oolicy	, and				
20	State the name, address, and telephone number of the person who possesses the organization's books and rec	cords	•					
	CHRISTOPHER P FEDERICO. (410)560-1770							

Form	aan	(2018)	
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Part VII	Compensation of Officers,	Directors,	Trustees,	Key Employees,	Highest C	Compensated	Employees,	and
	Independent Contractors							

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.

Check this box if neither the organization no	r any relate	d org	anız	atic	on c	ompe	ensa	ated any currer	nt officer, directo	r, or trustee.
				(C)			_		
(A)	(B)	(40.00			ition			(D)	(E)	(F)
Name and Title	Average					e than e is both		Reportable	Reportable	Estimated
	hours per week (list any			dac		ector/trustee)		compensation from	compensation from related	amount of other
	hours for	유표	Ing	Officer	₹	eng H	Former	the	organizations	compensation
	related organizations	Individual trustee or director	Institutional trustee	<u></u> 6	Key employee	Jog st	₫	organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization
	below dotted	of E	l Sa	1	용	🖁		(44-271099-141130)	1	and related
	line)	l ste	Ę		ee	þe				organizations
		%	stee	1		Highest compensated employee				
	ļ. <u>-</u>	_	-			ă	-			
CHRISTOPHER P FEDERICO	40.00				ĺ					
PRESIDENT	0.00	✓		1				94,800	0	6,743
JAMES PRUSAK	1.00									
VICE PRESIDENT	0.00	✓		✓		<u> </u>		0	0	0
GREGG D GORMAN	1.00					<u> </u>				
TREASURER	0.00	✓		✓		<u> </u>	<u> </u>	0	0	0
JULIE COX	1.00					1				
DIRECTOR	0.00	/				<u> </u>	ļ	0	0	0
KEN SINGLETON	1.00			1	ļ	l	l		}	
DIRECTOR	0.00	✓			L_	ļ		0	0	0
DAN JANSEN	1.00									
DIRECTOR	0.00	✓	_	_	ļ	ļ <u>.</u>		0	0	0
DAMIAN MARK	1.00									
DIRECTOR	0.00	/			<u> </u>	ļ		0	0	0
JON PRICE	1.00									
DIRECTOR	0.00	✓	<u> </u>	<u> </u>	_	<u> </u>	_	0	0	0
HAROLD WOOD	1.00									
DIRECTOR	0.00	1		ļ		 	<u> </u>	0	0	0
BARBARA WEBBERT	1.00	,								
DIRECTOR	0.00	✓	_	_	L	<u> </u>	_	0	0	0
						-				
	ļ		L			<u> </u>				
								!		
	<u>L</u>									

Part	Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)													
•	(A) Name and title	(B) Average	box, unless person is both officer and a director/truste			(B) Position (do not check more than one box, unless person is both an officer and a director/trustee) Report of the composition of the compositio			(D) Reportable compensation	(E) Reportal compensatio	on from	Esti amo	(F) mated ount of	
		week (list any hours for related organizations below dotted line)		Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	related organizat (W-2/1099-	ions	comp fro orgai and	ther ensation m the nization related lizations	
-														
												······································		
								-						
							_	 						
				\dashv	_									
				_										
1b c	Sub-total	-						>	94,800		0			743
d	Total (add lines 1b and 1c)	not limited						e) w	94,800 ho received mo	ore than \$1	00,00	O of	6,	743
	reportable compensation from the organic	zation 🟲							0				Yes	No
3	Did the organization list any former of employee on line 1a? If "Yes," complete S										ensate	d 3		√
4	For any individual listed on line 1a, is the organization and related organizations	sum of rep greater tha	oortab an \$1	ole c 50,0	om 000	per ? <i>(1</i>	nsatio	n a	nd other comp complete Sch	ensation fi		h		
5	Individual	r accrue co	mper	nsat	ion	fror	n any	uni				4 5		<u>√</u> √
Section	on B. Independent Contractors		01111011											<u>-</u>
1	Complete this table for your five highest of compensation from the organization. Rep year.	•												(
	(A) Name and business addr	ess							(B) Description of se	ervices		(C) Compensa	ation	
None														
				-					-					
								_						
2	Total number of independent contractor received more than \$100,000 of compensations.							th	ose listed abo	ve) who				

Par	EVIII						_
		Check if Schedule O contains a res	ponse or note to	o any line in this (A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
nts nts	1a	Federated campaigns 1a	0				
ara our	b	Membership dues 1b	0				
S, G	C	Fundraising events 1c	146,186	ĺ		1	
를 를	d	Related organizations 1d	0				
ıs,	е	Government grants (contributions) 1e	0				
er S	f	All other contributions, gifts, grants,	ľ			ĺ	
혈통		and similar amounts not included above 1f	385,932				
Contributions, Gifts, Grants and Other Similar Amounts	g	Noncash contributions included in lines 1a–1f. \$	0				
	h	Total. Add lines 1a-1f		532,118			ļ
ž	2-		Business Code	····			
ě	2a b						
8	C						
eΖi	d		1				
E	e				 		<u> </u>
Program Service Revenue	f	All other program service revenue.	1				
<u></u>	g	Total. Add lines 2a-2f	▶	0			
	3	Investment income (including divid]
		and other similar amounts)	<u> </u>				
	4	Income from investment of tax-exempt be	•				
	5	Royalties	(ii) Personal			ļ	
	60		(ii) Personal				
	6a b	Gross rents Less rental expenses					
	C	Rental income or (loss) 0	0				1
	ď	Net rental income or (loss)					
	7a	Gross amount from sales of (i) Securities	(ii) Other				
		assets other than inventory					
	b	Less cost or other basis					
		and sales expenses .					
	С	Gain or (loss)0	0				
	d	Net gain or (loss)	<u> </u>				
venue	8a	Gross income from fundraising events (not including \$ 146,186		;			
Other Reve		of contributions reported on line 1c) See Part IV, line 18 a	206,343				
됐	b	Less: direct expenses b	81,454				
		Net income or (loss) from fundraising	events >	124,889		0	124,889
	9a	Gross income from gaming activities.]	ļ			ļ
		See Part IV, line 19 a	<u> </u>				
		Less direct expenses b					
		Net income or (loss) from gaming acti	ivities ▶				
	iua	Gross sales of inventory, less returns and allowances a		İ			
	. h	Less: cost of goods sold b				•	
		Net income or (loss) from sales of inve	<u> </u>			<u> </u>	
		Miscellaneous Revenue	Business Code	+			<u> </u>
	11a	OTHER INCOME	900099	2,546	2,546	0	0
i	b	OTTLER INCOME					
	c		 				
	d	All other revenue		0	0	0	0
	е	Total. Add lines 11a-11d	▶	2,546			
	12	Total revenue. See instructions	▶ [650 552	2 546	^	124 889

Part IX Statement of Functional Expenses
Section 501(c)(3) and 501(c)(4) organizations must con

Sccti	on 501(c)(3) and 501(c)(4) organizations must con	nplete all columns. A	II other organization	ns must complete col	umn (A)
	Check if Schedule O contains a respon	se or note to any lir	ne in this Part IX .	<u>.</u>	
	ot include amounts reported on lines 6b, 7b, b, 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	61,518	61,518		
2	Grants and other assistance to domestic individuals. See Part IV, line 22	0	0		
3	Grants and other assistance to foreign		· · · · · · · · · · · · · · · · · · ·		
	organizations, foreign governments, and foreign individuals See Part IV, lines 15 and 16	o	0		
4	Benefits paid to or for members	0	0		
5	Compensation of current officers, directors,				
	trustees, and key employees	90,300	68,628	9,933	11,739
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	0	0	o	0
7	Other salaries and wages	114,392	86,938	12,583	14,871
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)	4,500	3,420	495	585
9	Other employee benefits	31,245	23,745	3,438	4,062
10	Payroll taxes	16,028	10,258	1,763	4,007
11	Fees for services (non-employees):				
a	Management	0	0	0	. 0
b	Legal	0	0	0	0
C	Accounting	10,899	8,174	2,725	0
d	Lobbying	0	0		0
e f	Professional fundraising services. See Part IV, line 17 Investment management fees	0	0	0	0
g	Other (If line 11g amount exceeds 10% of line 25, column	<u></u>		-	
9	(A) amount, list line 11g expenses on Schedule O)	o	o	o	0
12	Advertising and promotion	3,016	0	0	3,016
13	Office expenses	19,135	13,970	4,171	994
14	Information technology	1,477	635	635	207
15	Royalties				
16	Occupancy	58,672	38,957	12,348	7,367
17	Travel	7,369	7,369	0	0
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0	0	o	0
19	Conferences, conventions, and meetings .	1,082	0	1,082	0
20	Interest	8,650	8,650	0	0
21	Payments to affiliates	0	0	0	0
22	Depreciation, depletion, and amortization .	21,627	14,490	7,137	0
23	Insurance	5,758	3,858	1,900	0
24	Other expenses. Itemize expenses not covered				
	above (List miscellaneous expenses in line 24e. If				
	line 24e amount exceeds 10% of line 25, column				i
	(A) amount, list line 24e expenses on Schedule O.)				<u> </u>
a	GOLF TOURNAMENT - INDIRECT EXPENSES	117,641	0	0	117,641
b	COOL KIDS CLUBHOUSE	24,330	24,330	0	0
ر د	CADE DACKAGES AND NEWSPAPER	15,015	15,015	0	0
đ e	CARE PACKAGES AND NEWSPAPER All other expenses	4,388 12,392	4,388 10,404	465	0 1,523
25	Total functional expenses. Add lines 1 through 24e	629,434	404,747	58,675	1,523
26	Joint costs. Complete this line only if the	029,434	404,747	30,073	100,012
20	organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here				
	following SOP 98-2 (ASC 958-720)				- 000

Part X Balance Sheet

1	
2 Savings and temporary cash investments	
3 Pledges and grants receivable, net 4 Accounts receivable, net 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 Loans and other receivables from other disqualified persons (as defined under section 4958(p(1)), persons described in section 4958(p(3)(8), and contributing employers and sponsoring organizations of section 501(p(p) voluntary employees beneficiary organizations (see instructions). Complete Part II of Schedule L 7 Notes and loans receivable, net 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment: cost or other basis. Complete Part IV of Schedule D 10a Lass; accumulated depreciation 11 Investments—publicly traded securities 12 Investments—other securities. See Part IV, line 11 12 Investments—other securities. See Part IV, line 11 13 Investments—other securities. See Part IV, line 11 14 Intangible assets 114 15 Other assets. See Part IV, line 11 16 Total assets. Add lines 1 through 15 (must equal line 34) 17 Accounts payable and accrued expenses 11,807 17 18 Grants payable 19 Deferred revenue 20 Tax-exempt bond liabilities 21 Escrow or custodial account liability. Complete Part IV of Schedule D 22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule D 21 Secured mortgages and notes payable to unrelated third parties 22 Unsecured notes and loans payable to unrelated third parties 23 Secured mortgages and notes payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 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 26 Total liabilities. Add lines 17 through 25 27 Endot Part V Loans Part	38,977
4 Accounts receivable, net 5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L 6 Loans and other receivables from other disqualified persons (as defined under section 4958()(1)), persons described in section 4958()(3)(8), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees beneficiary organizations (see instructions). Complete Part II of Schedule L 7 Notes and loans receivable, net 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment: cost or other basis. Complete Part IV of Schedule D 10a 435,122 b Less: accumulated depreciation 11 Investments—publicly traded securities 12 Investments—publicly traded securities 12 Investments—program-related. See Part IV, line 11 13 Investments—program-related. See Part IV, line 11 14 Intangible assets 15 Other assets. See Part IV, line 11 16 Total assets. Add lines 1 through 15 (must equal line 34) 17 Accounts payable and accrued expenses 10 Tax-exempt bond liabilities 10 Tax-exempt bond liabilities 20 Tax-exempt bond liabilities 21 Consider and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part IV of Schedule D 20 Tax-exempt bond liabilities not current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 22 Consequence of the relabilities of included on lines 17-24). Complete Part X of Schedule D 25 Corganizations that follow SFAS 117/ASC 958), check here \(\frac{ V }{ V } \) and	
5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L 6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(8), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees beneficiary organizations (see instructions). Complete Part II of Schedule L 7 Notes and loans receivable, net 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment: cost or other basis. Complete Part IV of Schedule D 11 Investments—publicly traded securities 12 Investments—other securities. See Part IV, line 11 13 Investments—other securities. See Part IV, line 11 14 Intangible assets 15 Other assets. See Part IV, line 11 16 Total assets. See Part IV, line 11 17 Accounts payable and accrued expenses 18 Orants payable and accrued expenses 19 Deferred revenue 20 Tax-exempt bond liabilities 21 Escrow or custodial account liability. Complete Part IV of Schedule D 22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 22 Companiations and loans payable to unrelated third parties 10 Other liabilities (including federal income tax, payables to related third parties, and other liabilities including federal income tax, payables to related third parties 10 Other liabilities. Add lines 17 through 25 11 Oranizations that follows \$FAS 117 (ASC 958), check here \$\binom{VZ}{\overline{A}} \text{ and } a	
trustees, key employees, and highest compensated employees. Complete Part II of Schedule L 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 instructions). Complete Part II of Schedule L 7 Notes and loans receivable, net 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D b Less: accumulated depreciation 11 Investments—publicly traded securities 11 Investments—program-related. See Part IV, line 11 12 Investments—program-related. See Part IV, line 11 13 Investments—program-related. See Part IV, line 11 14 Intangible assets 15 Other assets. Add lines 1 through 15 (must equal line 34) 16 Total assets. Add lines 1 through 15 (must equal line 34) 17 Accounts payable and accrued expenses 19 Deferred revenue 20 Tax-exempt bond liabilities 21 Escrow or custodial account liability. Complete Part IV of Schedule D 22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule D 21 Escrow or custodial account liability. Complete Part IV of Schedule D 22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 22 Secured mortgages and notes payable to unrelated third parties 23 Secured mortgages and notes payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 25 Other liabilities. Add lines 17 through 25 26 Total liabilities. Add lines 17 through 25 27 and	
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6 Loans and other receivables from other disqualified persons (as defined under section 458(R)(1)), persons described in section 4958(R)(3)(B), and contributing employers and sponsoning organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L	
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 instructions). Complete Part II of Schedule L 7 Notes and loans receivable, net 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D b Less: accumulated depreciation 11 Investments—publicly traded securities 12 Investments—publicly traded securities 13 Investments—program-related. See Part IV, line 11 14 Intangible assets 15 Other assets. See Part IV, line 11 16 Total assets. Add lines 1 through 15 (must equal line 34) 17 Accounts payable and accrued expenses 18 Grants payable 19 Deferred revenue 20 Tax-exempt bond liabilities 21 Escrow or custodial account liability. Complete Part IV of Schedule D 22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 22 Secured mortgages and notes payable to unrelated third parties 7,448 24 Unsecured notes and loans payable to unrelated third parties 7,448 25 Other liabilities. Add lines 17 through 25 182,001 26 Total liabilities. Add lines 17 through 25 182,001 27 and	
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organizations (see instructions). Complete Part II of Schedule L	
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9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D b Less: accumulated depreciation 11 Investments—publicly traded securities 12 Investments—other securities. See Part IV, line 11 13 Investments—program-related. See Part IV, line 11 14 Intangible assets 15 Other assets. See Part IV, line 11 16 Total assets. Add lines 1 through 15 (must equal line 34) 17 Accounts payable and accrued expenses 19 Deferred revenue 20 Tax-exempt bond liabilities 21 Escrow or custodial account liability. Complete Part IV of Schedule D 22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 23 Secured mortgages and notes payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 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 26 Total liabilities. Add lines 17 through 25 26 Total liabilities. Add lines 17 through 25 27 Organizations that follow SEAS 117 (ASC 958), check here 10a 435,122 10b 9 10a 435,122 10b 9 16a,532 9 16b,632 9 15c,632 9 15c,742 8 15c,742 8 15c,742 8 15c,743 9 16c,743 10c 11 11 11 11 11 11 11 11 12 12 13 11 14 Intangible assets 11 14 12 12 13 Investments—publicly including assets 12 2,910 15 14 Intangible assets 14 47,032 16 17 Accounts payable and accrued expenses 12,807 17 18 Grants payable 19 Deferred revenue 19 20 12 20	
9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D b Less: accumulated depreciation 11 Investments—publicly traded securities 12 Investments—other securities. See Part IV, line 11 13 Investments—program-related. See Part IV, line 11 14 Intangible assets 15 Other assets. See Part IV, line 11 16 Total assets. Add lines 1 through 15 (must equal line 34) 17 Accounts payable and accrued expenses 19 Deferred revenue 20 Tax-exempt bond liabilities 21 Escrow or custodial account liability. Complete Part IV of Schedule D 22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 23 Secured mortgages and notes payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 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 26 Total liabilities. Add lines 17 through 25 26 Total liabilities. Add lines 17 through 25 27 Organizations that follow SEAS 117 (ASC 958), check here 10a 435,122 10b 9 10a 435,122 10b 9 16a,532 9 16b,632 9 15c,632 9 15c,742 8 15c,742 8 15c,742 8 15c,743 9 16c,743 10c 11 11 11 11 11 11 11 11 12 12 13 11 14 Intangible assets 11 14 12 12 13 Investments—publicly including assets 12 2,910 15 14 Intangible assets 14 47,032 16 17 Accounts payable and accrued expenses 12,807 17 18 Grants payable 19 Deferred revenue 19 20 12 20	
tess: accumulated depreciation b Less: accumulated depreciation 10	500
tother basis. Complete Part VI of Schedule D b Less: accumulated depreciation 11 Investments—publicity traded securities 12 Investments—other securities. See Part IV, line 11 13 Investments—program-related. See Part IV, line 11 14 Intangible assets 15 Other assets. See Part IV, line 11 16 Total assets. Add lines 1 through 15 (must equal line 34) 17 Accounts payable and accrued expenses 18 Grants payable 19 Deferred revenue 20 Tax-exempt bond liabilities 21 Escrow or custodial account liability. Complete Part IV of Schedule D 22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 23 Secured mortgages and notes payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 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 25 Total liabilities. Add lines 17 through 25 26 Total liabilities. Nat follow SFAS 117 (ASC 958), check here 7 and	
b Less: accumulated depreciation . 10b 96,281 350,443 10c 11 Investments—publicly traded securities	ı
11 Investments – publicly traded securities 11 12 12 13 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 2,910 15 16 Total assets. Add lines 1 through 15 (must equal line 34) 447,032 16 17 Accounts payable and accrued expenses 12,807 17 18 Grants payable and accrued expenses 12,807 17 18 Grants payable 18 19 Deferred revenue 19 19 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. Complete Part II of Schedule L 22 22 23 24 Unsecured notes and loans payable to unrelated third parties 7,448 24 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 25 Total liabilities. Add lines 17 through 25 182,001 26 Organizations that follow SEAS 117 (ASC 958), check here 17 and	
12 Investments—other securities. See Part IV, line 11	338,841
13 Investments—program-related. See Part IV, line 11	
14 Intangible assets	
15 Other assets. See Part IV, line 11 16 Total assets. Add lines 1 through 15 (must equal line 34) 17 Accounts payable and accrued expenses 18 Grants payable 19 Deferred revenue 19 Tax-exempt bond liabilities 21 Escrow or custodial account liability. Complete Part IV of Schedule D 22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 23 Secured mortgages and notes payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 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 25 Total liabilities. Add lines 17 through 25 26 Total liabilities. Add lines 17 through 25 27 and	
16 Total assets. Add lines 1 through 15 (must equal line 34)	2.010
17 Accounts payable and accrued expenses	2,910 381,228
18 Grants payable	9,204
Tax-exempt bond liabilities	<u> </u>
20 Tax-exempt bond liabilities	1,529
Escrow or custodial account liability. Complete Part IV of Schedule D. Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L	.,,020
Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L	
Unsecured notes and loans payable to unrelated third parties	
Unsecured notes and loans payable to unrelated third parties	
Unsecured notes and loans payable to unrelated third parties	
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 25 26 Total liabilities. Add lines 17 through 25	
parties, and other liabilities not included on lines 17–24). Complete Part X of Schedule D 25 26 Total liabilities. Add lines 17 through 25	75,345
of Schedule D 25 26 Total liabilities. Add lines 17 through 25	
26 Total liabilities. Add lines 17 through 25	
Organizations that follow SEAS 117 (ASC 958), check here ▶ ☑ and	0
Organizations that follow SFAS 117 (ASC 958), check here and complete lines 27 through 29, and lines 33 and 34.	86,078
E 27 Unrestricted not assets	
a 27 Unrestricted net assets 180,031 27	188,757
28 Temporarily restricted net assets	106,393
29 Permanently restricted net assets	0
Organizations that do not follow SFAS 117 (ASC 958), check here ► □ and complete lines 30 through 34.	
30 Capital stock or trust principal, or current funds	
31 Paid-ın or capıtal surplus, or land, building, or equipment fund 31	
32 Retained earnings, endowment, accumulated income, or other funds . 32	
33 Total net assets or fund balances	295,150
34 Total liabilities and net assets/fund balances	381,228

Page	1	2

roins s	40 (2016)			F	age I∠
Par	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		6	9,553
2	Total expenses (must equal Part IX, column (A), line 25)	2		6	29,434
3	Revenue less expenses. Subtract line 2 from line 1	3	<u></u>		30,119
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		20	55,031
5	Net unrealized gains (losses) on investments	5	<u></u>		0
6	Donated services and use of facilities	6			0
7	Investment expenses	7			0
8	Prior period adjustments	8			0
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		29	5,150
Part	XII Financial Statements and Reporting				_
	Check if Schedule O contains a response or note to any line in this Part XII	<u> </u>	<u> </u>		<u>. </u>
				Yes	No
1	Accounting method used to prepare the Form 990: ☐ Cash ☑ Accrual ☐ Other		_		<u> </u>
	If the organization changed its method of accounting from a prior year or checked "Other," ex	plain	ın		
_	Schedule O.		-	- - - -	ļJ
2a	tree and a gammana, a management at the state of the stat		. 2a	√_	
	If "Yes," check a box below to indicate whether the financial statements for the year were com	piled o	or		
	reviewed on a separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis			_	
D	Were the organization's financial statements audited by an independent accountant?	. •	. 2b	-	✓,
	If "Yes," check a box below to indicate whether the financial statements for the year were audit	ed on	a		((
	separate 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 o of the audit, review, or compilation of its financial statements and selection of an independent accounts.				
	·			+	
	If the organization changed either its oversight process or selection process during the tax year, exchedule O.	фапп	"]		l l
За		forth i	"	-	
Ja	the Single Audit Act and OMB Circular A-133?		'' . 3a		/
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo	ran th		+	'
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such a		3b		
			Fc	rm 99 0	(2018)
					,,

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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.

► Attach to Form 990 or Form 990-EZ.

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

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

COOL WIDE CAMPAICN FOUNDATION INC

Employer identification number

42-1634330

<u> </u>	L KIDS CAMPAIGN FOUNDATION IN						34330	
Pai	Reason for Public Cha	rity Status (All	organizations mus	t comple	te this p	oart.) See instruction	ons.	
The	organization is not a private founda	ation because it	is: (For lines 1 through	12, che	ck only o	ne box.)	2	
1	A church, convention of churc	hes, or associati	on of churches descr	ibed in s	ection 17	70(b)(1)(A)(i).	Ł	
2	A school described in section	170(b)(1)(A)(ii).	(Attach Schedule E (F	orm 990	or 990-E	(Z).)	7	
3	☐ A hospital or a cooperative hos						•	
4	A medical research organization hospital's name, city, and state		onjunction with a hos	pital desc	ribed in s	section 170(b)(1)(A)	(iii). En	iter the
5	An organization operated for section 170(b)(1)(A)(iv). (Com		college or university	owned o	or operate	ed by a governmen	tal unit	described in
6	A federal, state, or local govern	nment or govern	mental unit described	ın secti	on 170(b))(1)(A)(v).		
7	An organization that normally			port fron	n a gover	nmental unit or fror	n the ç	jeneral public
	described in section 170(b)(1)							
8	☐ A community trust described in	n section 170(b)(1)(A)(vi). (Complete	Part II.)				
9	An agricultural research organi	zation described	d in section 170(b)(1)	(A)(ix) op	erated in	conjunction with a	land-gr	ant college
	or university or a non-land-gra university:							
10	An organization that normally receipts from activities related	receives: (1) mor	e than 331/3% of its s	upport fro	om contri	butions, membershi	p fees,	and gross
	support from gross investment	t income and un	related business taxa	ble incon	ne (less s	ection 511 tax) from	busine	esses
	acquired by the organization a				-			
11	An organization organized and	•	•	-				
12	An organization organized and							
	of one or more publicly suppo	•		-				
	Check the box in lines 12a thro	•	**		-	•		_
а	. ,,		•	-				
	the supported organization supporting organization	, ,	•			ine directors or trust	ees or	ine
		· ·					(-) 1	
b	Type II. A supporting organ control or management of the control or man							
	organization(s). You must	• • • •	_		Persons	that control of man	age the	sapported
С	The Trans 101 Constitution of the Constitution	=			onnectio	n with, and function	ally inte	egrated with
_	its supported organization(s) (see instruction	ons) You must comp	lete Part	IV, Secti	ions A, D, and E.		
d	Type III non-functionally i that is not functionally integ							
	requirement (see instruction						ia aira	tteritiveness
е							all Tv	oe III
C	functionally integrated, or 7						⊖ II, IY	pe III
f	Enter the number of supported of							
g								
	(i) Name of supported organization	(II) EIN	(III) Type of organization	(iv) Is the	rganization	(v) Amount of monetary	(vi)	Amount of
			(described on lines 1–10 above (see instructions))		ur governing ment?	support (see instructions)		support (see structions)
	,		above (see instructions))			instructions)	} ""	su detions)
				Yes	No			
(A)								
(B)								
							├──	
(C)								
(D)								
(E)								- ·
Total				 -				

Part	Support Schedule for Organiza (Complete only if you checked th Part III. If the organization fails to	e box on line	5, 7, or 8 of	Part I or if the	e organizatio	n failed to qua	
Socti	on A. Public Support	quality unde	the tests ha	ited below, p	ease comple	to rait iii.j	/
	dar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018/	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	(a) 2014	(0) 2013	(0) 2010	(0) 2017	(J, 2519)	(1) 10:01
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				<u>/</u>		
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	(a) 0014	(b) 2015	(=) 2016	(d) 2017	(e) 2018	(f) Total
	dar year (or fiscal year beginning in)	(a) 2014	(b) 20/15	(c) 2016	(a) 2017	(e) 2016	(i) Total
7							
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 VI.)						
11	Total support. Add lines 7 through 10						
12	Gross receipts from related activities, etc.	(see instruction	ons)			12	
13	First five years. If the Form 990 is for the						
	organization, check this box and stop her						· · • U
	on C. Computation of Public/Support			1 001		14	<u> </u>
14	Public support percentage for 2018 (line 6 Public support percentage from 2017 Sch			1, COlumn (i))		15	
15 16a	33 ¹ / ₃ % support test—2018. If the organization				nd line 14 is 33		
100	box and stop here. The organization qual						▶ 🗆
b	331/3% support test—2017. If the organize this box and stop here. The organization of	ation did not	check a box o	n line 13 or 16		is 33¹/3% or mo	ore, check
17a	10%-facts-and-circumstances test—20 10% or more, and if the organization me Part VI how the organization meets the "forganization	ets the "facts facts-and-circ	-and-circumstaumstaumstances" te	ances" test, chest The organi	neck this box a zation qualifies	and stop here. s as a publicly s	Explain in supported
b	10%-facts-and-circumstances test—20 15 is 10% or more, and if the organizate Explain in Part VI how the organization m supported organization	tion meets th neets the "fac	e "facts-and-c ts-and-circums	circumstances stances" test.	" test, check The organizati	this box and s on qualifies as	top here. a publicly ▶ □
18	Private foundation. If the organization did instructions		box on line 13		a, or 17b, chec	k this box and s	see ▶ □

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.)

Secti	ion A. Public Support						
Caler	ndar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1	Gifts, grants, contributions, and membership fees						
	received (Do not include any "unusual grants")	409,354	214,768	321,182	312,044	532,118	1,789,466
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	348,572	509,958	514,585	366,256	0	1,739,371
3	Gross receipts from activities that are not an unrelated trade or business under section 513	340,372	309,930	314,303	300,230	J	1,750,071
4	Tax revenues levied for the organization'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						
6	Total. Add lines 1 through 5	757,926	724,726	835,767	678,300	532,118	3,528,837
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons .	0	o	o	o	10,000	10,000
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
С	Add lines 7a and 7b	0	0	0	0	10,000	10,000
8	Public support. (Subtract line 7c from line 6.)						3,518,837
Secti	on B. Total Support	1					
Calen	dar year (or fiscal year beginning in) 🕨	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
9	Amounts from line 6	757,926	724,726	835,767	678,300	532,118	3,528,837
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						-
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
С	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.)					2,546	2,546
13	Total support. (Add lines 9, 10c, 11,			· 	···	2,0.10	2,010
	and 12.)	757,926	724,726	835,767	678,300	534,664	3,531,383
14	First five years. If the Form 990 is for the organization, check this box and stop her	-		d, third, fourth,	· ·		1 501(c)(3) ► □
Secti	on C. Computation of Public Suppor	t Percentage	•				
15	Public support percentage for 2018 (line 8	3, column (f), di	vided by line 1	3, column (f))		15	99.64 %
_16	Public support percentage from 2017 Sch			<u> </u>	<u> </u>	16	100 %
<u>Secti</u>	on D. Computation of Investment Inc				<u> </u>		
17	Investment income percentage for 2018 (I			•	nn (f))	17	0 %
18	Investment income percentage from 2017					18	0 %
19a	331/23% support tests—2018. If the organi 17 is not more than 331/23%, check this box						
b	331'25% support tests—2017. If the organiz line 18 is not more than 331'25%, check this b	ation did not ch	eck a box on l	ine 14 or line 1	9a, and line 16	is more than 33	31/3%, and
20	Private foundation If the organization de		=		-		

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.)

Sect	ion A. All Supporting Organizations		124	1
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by		Yes	No
	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			
0-	organization was described in section 509(a)(1) or (2).	2		ļ
За	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.		 	
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.			
С	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.	3b 3c		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.	4b		
С	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.			
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes,"	4c		
Ja	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; (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		
b	Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b		
С	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 (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity			
_	with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 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]
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	_	
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		
h	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.)

10b

Dooo	t
rage	

Part	IV Supporting Organizations (continued)		-	
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)	44.0		
	below, the governing body of a supported organization?	11a 11b		
	A family member of a person described in (a) above?	11b		
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	THE	L	<u> </u>
<u>Secti</u>	on B. Type I Supporting Organizations		Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to		163	140
•	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or			ł
	controlled the organization's activities. If the organization had more than one supported organization,	1		
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported			
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part			
	VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Secti	on C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1	L	
Secti	on D. All Type III Supporting Organizations		Vaa	NI
4	Did the every return avoide to each of its surrouted every returns by the last day of the fifth month of the		Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported	H		
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how		.	
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			!
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		
Secti	on E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see	nstru	ctions	s <i>)</i> .
а	☐ The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.	,		
C	The organization supported a governmental entity Describe in Part VI how you supported a government entity (Yes	
2	Activities Test. Answer (a) and (b) below.	-	res	NO
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more		$\neg \neg$	
~	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the		1	
	reasons for the organization's position that its supported organization(s) would have engaged in these]_		
	activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer (a) and (b) below.			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
	trustees of each of the supported organizations? Provide details in Part VI.	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each]	
	of its supported organizations? If "Ves." describe in Part VI the role played by the organization in this regard	3b	_ [

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organical Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organical Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organical Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organical Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organical Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organical Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organical Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organical Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organical Part V Type III Non-Functional Part V Type III Non-Function Part V Type III Non	gan	<u>izations</u>	
Check here if the organization satisfied the Integral Part Test as a qualifying instructions. All other Type III non-functionally integrated supporting organization.			
Section A—Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	1		
2 Recoveries of prior-year distributions	2		
3 Other gross income (see instructions)	3		
4 Add lines 1 through 3.	4		
5 Depreciation and depletion	5		
6 Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7 Other expenses (see instructions)	7		
8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		<u> </u>
Section B – Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):			
a Average monthly value of securities	1a		
b Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	1d		
e Discount claimed for blockage or other factors (explain in detail in Part VI):			
2 Acquisition indebtedness applicable to non-exempt-use assets	2		
3 Subtract line 2 from line 1d.	3		
4 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).	4		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6 Multiply line 5 by .035	6		
7 Recoveries of prior-year distributions	7		
8 Minimum Asset Amount (add line 7 to line 6)	8		
Section C—Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2 Enter 85% of line 1.	2		
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4 Enter greater of line 2 or line 3.	4		
5 Income tax imposed in prior year	5		
6 Distributable Amount. Subtract line 5 from line 4, unless subject to			
emergency temporary reduction (see instructions).	6		1
7 Check here if the current year is the organization's first as a non-functionall instructions).	y int	egrated Type III supporti	ng organization (see

Part	V Type III Non-Functionally Integrated 509(a)(3	3) Supporting Organi	izations (continued)	
Sect	ion D-Distributions	22.		Current Year
1	Amounts paid to supported organizations to accomplish	exempt purposes		
2	Amounts paid to perform activity that directly furthers exe organizations, in excess of income from activity	empt purposes of suppo	orted	
3	Administrative expenses paid to accomplish exempt purp	ooses of supported orga	inizations	
4	Amounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in Part VI). See instructions.			
7	Total-annual distributions. Add lines 1 through 6.			
8	Distributions to attentive supported organizations to whic (provide details in Part VI) See instructions.	h the organization is res	sponsive	
9	Distributable amount for 2018 from Section C, line 6			
10	Line 8 amount divided by line 9 amount			
Sect	ion E—Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2018	(iii) Distributable Amount for 2018
1	Distributable amount for 2018 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2018 (reasonable cause required—explain in Part VI) See instructions.			
3	Excess distributions carryover, if any, to 2018			
a	From 2013			
b	From 2014			
c	From 2015			
d	From 2016			
е	From 2017			
f	Total of lines 3a through e			
g	Applied to underdistributions of prior years			
h	Applied to 2018 distributable amount			
j	Carryover from 2013 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2018 from Section D, line 7:			
a	Applied to underdistributions of prior years			
	Applied to 2018 distributable amount			
С	Remainder. Subtract lines 4a and 4b from 4			
5	Remaining underdistributions for years prior to 2018, 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 2018. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.			
7	Excess distributions carryover to 2019. Add lines 3j and 4c.			
8	Breakdown of line 7:			
a	Excess from 2014			
b	Excess from 2015			
С	Excess from 2016			
<u>d</u>	Excess from 2017			
е	Excess from 2018			

Part VI	Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)
Schedule A	A, Part III, Line 12 - OTHER INCOME
	······································
	
	······································
····	
••••	

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

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

Employer identification number

COOL KIDS CAMPAIGN FOUNDATION INC Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts 1 Total number at end of year 2 Aggregate value of contributions to (during year) 3 Aggregate value of grants from (during year) . 4 Aggregate value at end of year 5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? ☐ Yes ☐ No Part II **Conservation Easements.** Complete if the organization answered "Yes" on Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply) 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 historic structure ☐ Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Tax Year 2a Number of conservation easements on a certified historic structure included in (a) Number of conservation easements included in (c) acquired after 7/25/06, and not on a 2d Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the 3 Number of states where property subject to conservation easement is located ▶ 5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of 6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? ☐ Yes ☐ No In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8. If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items. a Revenue included on Form 990, Part VIII, line 1 **b** Assets included in Form 990, Part X . .

Par	III Organizations Maintaining	Collections of	Art, His	torical 1	reasures	, or O	ther Similar	Assets (continued)
3	Using the organization's acquisition, collection items (check all that apply)	accession, and ot	ther reco	rds, chec	k any of th	ne follo	wing that are a	a significant use of its
а	☐ Public exhibition				or exchan	ge prog	ırams	
b	☐ Scholarly research		е	Othe	r			
С	☐ Preservation for future generation	s						
4	Provide a description of the organiza XIII.	ition's collections a	and expla	ain how t	hey further	the or	ganızatıon's ex	empt purpose in Par
5 	During the year, did the organization assets to be sold to raise funds rathe							nilar · Yes No
Par								
	Complete if the organization 990, Part X, line 21.							
1a	Is the organization an agent, trustee included on Form 990, Part X?							not .
b	If "Yes," explain the arrangement in P	art XIII and comple	ete the fo	llowing to	able:	г—		<u>,</u>
						<u> </u>		Amount
C	Beginning balance					10		
ď	5 ,					10		
e f	Distributions during the year . Ending balance			• •		11		
2a	Did the organization include an amou	nt on Form 990 Pr	 art Y line	 .21 for e		<u> </u>		ıtı/2 🗆 Ves 🗆 No.
	If "Yes," explain the arrangement in P							•
Par		art Am. Oncor non	C 11 (11C C)	piariatio	THUS DOCT	provid	ca on rackin	· · · · · · ·
	Complete if the organization	answered "Yes"	" on For	m 990, F	Part IV, lin	e 10.		
		(a) Current year	(b) Pro		(c) Two yea		(d) Three years b	ack (e) Four years back
1a	Beginning of year balance .							
b	Contributions							
С	Net investment earnings, gains, and losses							
d	Grants or scholarships							
е	Other expenditures for facilities and programs							
f	Administrative expenses							
g	End of year balance							
2	Provide the estimated percentage of t	•	d balanc	e (line 1g	, column (a	i)) held	as:	
а	Board designated or quasi-endowmer	nt >	%					
b	Permanent endowment >	%						
С	Temporarily restricted endowment ▶	%						
2-	The percentages on lines 2a, 2b, and			ration the	at are bold	and ad	munictored for	the
3a	Are there endowment funds not in th organization by:	e possession or th	ie organiz	zauon me	at are neio	and ad	ministered for	
								Yes No
	(i) unrelated organizations (ii) related organizations							. 3a(ii)
b	If "Yes" on line 3a(ii), are the related o				 hedule R2			. 3b
4	Describe in Part XIII the intended uses					•		. [55]
Part								
	Complete if the organization		on Form	n 990, F	art IV, line	e 11a.	See Form 99	0, Part X, line 10.
	Description of property	(a) Cost or oti (investme	her basis	(b) Cost o	r other basis ther)	(c)	Accumulated epreciation	(d) Book value
1a	Land		0		36,645	مزض		36,645
b	Buildings		0		293,156		31,476	261,680
С	Leasehold improvements		0		3,055		3,055	0
d	Equipment		0		14,484		13,677	807
е	Other	·	0		87,782		48,073	39,709
Total.	Add lines 1a through 1e. (Column (d) n	nust equal Form 99	90, Part X	, column	(B), line 10	C.) .		338,841

Part VII	Investments – Other Securities.			
	Complete if the organization answered "Yes" on Form 990, Part	IV, line 11b. See F	orm 990,	Part X, line 12.
	(a) Description of security or category (including name of security)	(b) Book value		ethod of valuation d-of-year market value
(1) Financial				
	neld equity interests			
(3) Other				
(^)				
(B)				
(C)			ļ	
(D)				
(E)				
(F) (G)				
(H)				
	Nament and Form 000 Part V and (D) Inc. 121		 	
Part VIII	b) must equal Form 990, Part X, col (B) line 12.) ► Investments—Program Related.		l. <u>.</u>	
r art viii	Complete if the organization answered "Yes" on Form 990, Part	V line 11c See F	orm 990	Part X line 13
	(a) Description of investment	(b) Book value		ethod of valuation
	(a) Description of investment	(b) Book Value		d-of-year market value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
_(7)				
(8)	<u></u>			
(9)				
	o) must equal Form 990, Part X, col. (B) line 13.) ▶		l	
Part IX	Other Assets.	V ! 114 O E	000	Doub V. June 45
<u> </u>	Complete if the organization answered "Yes" on Form 990, Part I	v, line 11a. See F	orm 990,	(b) Book value
<u></u>	(a) Description			(b) Book value
(1)			\longrightarrow	
(2)				
(3)				
<u>(4)</u> <u>(5)</u>				
(6)				
(7)				
(8)				
(9)				
	mn (b) must equal Form 990, Part X, col. (B) line 15.)		•	
Part X	Other Liabilities.			
	Complete if the organization answered "Yes" on Form 990, Part I line 25.	V, line 11e or 11f.	See Forn	n 990, Part X,
1.	(a) Description of liability	· ··· 		(b) Book value
(1) Federal in				0
(2)				
(3)		-		
(4)				
(5)				
(6)				
(7)				
(8)				· <u>-</u>
(9)			-	
	n) must equal Form 990, Part X, col. (B) line 25) ▶			0
	uncertain tax positions. In Part XIII, provide the text of the footnote to the organ	ization's financial stat	ements tha	
	s liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the te			

Page	4

Part	XI Reconciliation of Revenue per Audited Financial Statem	ents With Revenue pe	er Return.
	Complete if the organization answered "Yes" on Form 990,	Part IV, line 12a.	
1	Total revenue, gains, and other support per audited financial statements		. 1
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12.		
а	Net unrealized gains (losses) on investments	2a	
b	Donated services and use of facilities	2b	
С	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII.)	2d	
е	Add lines 2a through 2d		2e
3	Subtract line 2e from line 1		3
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	
	Add lines 4a and 4b		4c
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line		
Part			per Return.
	Complete if the organization answered "Yes" on Form 990,		
1	Total expenses and losses per audited financial statements		1
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	1-1	
а	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
C	Other losses		_
d	Other (Describe in Part XIII)		
e	Add lines 2a through 2d		2e
3	Subtract line 2e from line 1	· · · · · · · ·	3
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	40	
a	Investment expenses not included on Form 990, Part VIII, line 7b Other (Decembers Part VIII.)		
b	Other (Describe in Part XIII.)		4c
5	Add lines 4a and 4b		
	XIII Supplemental Information.		
	e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a an	d 4: Part IV. lines 1b and	2b: Part V. line 4: Part X. line
	XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part		
	ule D, Part X, Line 2 - THE FOUNDATION IS EXEMPT FROM INCOME TAX UND		
	NUE CODE (THE CODE) AND COMPARABLE STATE LAW, AND CONTRIBUTION		
	TIONS PRESCRIBED BY THE CODE. THE ACCOUNTING STANDARD ON ACC		
	ADDRESSES THE DETERMINATION OF WHETHER TAX BENEFITS CLAIMED		
	RN SHOULD BE RECORDED IN THE FINANCIAL STATEMENTS. UNDER THAT		
	GNIZE THE TAX BENEFIT FROM AN UNCERTAIN TAX POSITION ONLY IF IT IS		
	ION WILL BE SUSTAINED ON EXAMINATION BY TAXING AUTHORITIES BASI		
	IONS. THERE WERE NO UNRECOGNIZED TAX BENEFITS IDENTIFIED OR RE		
	DECEMBER 31, 2018 AND 2017. THE FOUNDATION FILES FEDERAL AND S		
		·	

SCHEDULE G (Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" on Form 990, Part IV, line 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

OMB No 1545-0047

2018

	tment of the Treasury	_		tach to Form				Open to Public
	of the organization		Go to www.i/s.gov/	Form990 for I	nstructions a	ind the latest informa	Employer identif	Inspection cation number
coo	L KIDS CAMPAIG	N FOUNDATION IN	NC				42	-1634330
Pai						vered "Yes" on	Form 990, Part IV,	line 17.
		0-EZ filers are r						
1			on raised funds t				Check all that apply.	
a						ion of non-govern	-	
b	=	d email solicitatio	ons	f L	_	ion of governmen	_	
c d	=			g L	_ Special i	fundraising event	S	
2a	•		tton or oral agrae	omont with	any individ	tual (including off	icers, directors, trus	toos
20							fundraising services	
b	If "Yes," list th		individuals or e	ntities (fund			-	ne fundraiser is to be
	(i) Name and address or entity (fun		(II) Activity	custody o	draiser have r control of outlons?	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col (i)	(vi) Amount paid to (or retained by) organization
	· · · · · · · · · · · · · · · · · · ·			Yes	No			
1								
2					,		·	
3								
4				 				
- <u> </u>		· · · · · · · · · · · · · · · · · · ·						
- 								
7								
8								
9								
10								
			<u>L.,</u>	L	<u> </u>			
Total		<u> </u>	<u> </u>	<u> </u>	<u> ▶</u>			<u> </u>
3	List all states i registration or l		nization is regis	tered or lic	ensed to s	olicit contribution	is or has been notifi	ed it is exempt from
				•••••				
				· · · · · · · · · · · · · · · · · · ·			•••••	
							· -	
				••••				
				- 				

Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

		9,000,000,000	40,000.		<u> </u>	
			(a) Event #1	(b) Event #2	(c) Other events	(d) Total events
			GOLF TOURNAMENT	MARATHON	0	(add col (a) through col (c))
			(event type)	(event type)	(total number)	COI (C))
Revenue	1	Gross receipts	345,122	5,134		350,256
α;	2	Less. Contributions Gross income (line 1 minus	141,802	4,384		146,186
	Ŭ	line 2)	203,320	750		204,070
	4	Cash prizes	0	0		0
	5	Noncash prizes	0	0		0
enses	6	Rent/facility costs	79,808	0		79,808
Direct Expenses	7	Food and beverages	1,646	0		1,646
Direc	8	Entertainment	0	0		0
	9	Other direct expenses .	0	0		0
	10	Direct expense summary. Ac	ld lines 4 through 9 in c	olumn (d)		81,454
	11	Net income summary. Subtra				122,616
Pa	rt III		e organization answe		990, Part IV, line 19,	or reported more than
_		\$10,000 On 1 Om 000 E		(b) Pull tabs/instant		(d) Total coming (add
Revenue			(a) Bingo	bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))
eve						
ď	1	Gross revenue				
es	2	Cash prizes				
Direct Expenses	3	Noncash prizes				
rect E	4	Rent/facility costs				
٥	5	Other direct expenses .				
	6	Volunteer labor	☐ Yes % ☐ No	☐ Yes % ☐ No	☐ Yes% ☐ No	
	7	Direct expense summary. Ad	ld lines 2 through 5 in c	olumn (d)		
	8	Net gaming income summary	y. Subtract line 7 from li	ne 1, column (d)		
			-			
	a Is	nter the state(s) in which the or s the organization licensed to co "No," explain:	onduct gaming activities	s in each of these states	3?	🗌 Yes 🗌 No
10			amıng licenses revoked	l, suspended, or termina	ated during the tax year	? .

Schedu	ale G (Form 990 or 990-EZ) 2018		Page 3
11	Does the organization conduct gaming activities with nonmembers?	☐ Yes	☐ No
12	Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed to administer charitable gaming?	☐ Yes	□ No
13	Indicate the percentage of gaming activity conducted in:		
а	The organization's facility		<u>%</u>
b	An outside facility		%
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records:		
	Name ▶	·	
	Address ▶		
15a	revenue?	☐ Yes	□ No
b	If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ and the		,
	amount of gaming revenue retained by the third party ▶ \$		
С	If "Yes," enter name and address of the third party:		
	Name ▶		
	Address ▶		
16	Gaming manager information.		
	Name ▶		
	Gaming manager compensation ▶ \$		
	Description of services provided ▶		·
	□ Director/officer □ Employee □ Independent contractor		
17	Mandatory distributions:		
	Is the organization required under state law to make charitable distributions from the gaming proceeds to		
•	retain the state gaming license?	☐ Yes	☐ No
b	Enter the amount of distributions required under state law to be distributed to other exempt organizations or		
	spent in the organization's own exempt activities during the tax year ▶ \$		
Part	Supplemental Information. Provide the explanations required by Part I, line 2b, columns (Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any addition See instructions.	iii) and (nal Inforr	v); and nation.
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- -			
-			••••
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SCHEDULE 1 (Form 990)

Department of the Treasury Internal Revenue Service

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

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

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

OMB No 1545-0047

Open to Public Inspection 2018

Schedule I (Form 990) (2018) Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, °N □ (h) Purpose of grant or assistance **Employer identification number** ✓ Yes 42-1634330 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and . (g) Description of noncash assistance Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed (f) Method of valuation (book, FMV, appraisal, other) Cat No 50055P Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. (e) Amount of noncash assistance Enter total number of section 501(c)(3) and government organizations listed in the line 1 table (d) Amount of cash grant Enter total number of other organizations listed in the line 1 table (c) IRC section (if applicable) the selection criteria used to award the grants or assistance? For Paperwork Reduction Act Notice, see the Instructions for Form 990. General Information on Grants and Assistance (b) EIN COOL KIDS CAMPAIGN FOUNDATION INC (1) Sch I, Stmt 1 1 (a) Name and address of organization or government Name of the organization Part I Part II 8 ଅ <u>2</u> 5 ල € 3 9 <u>®</u> 6 Ξ

Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed. Schedule I (Form 990) (2018)

Part III Grants an

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
1					
2					
3					
4					
5					
9					
2					
Part IV Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information schedule I, Part I, Line 2 - MISSION RELATED CHARITIES.	the information iss.	required in Part I, lin	ie 2; Part III, columr	(b); and any other additi	ional information.
					Schedule I (Form 990) (2018)

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.

OMB No 1545-0047

Open to Public Inspection

Employer identification number

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

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

COOL KIDS CAMPAIGN FOUNDATION INC 42-1634330 Form 990, Part VI, Section B, Line 11b - THE GOVERNING BODY REVIEWS FORM 990 PRIOR TO FILING. Form 990, Part VI, Section B, Line 12c - THE GOVERNING BODY REVIEWS ALL TRANSACTIONS TO ENSURE COMPLIANCE. Form 990, Part VI, Section C, Line 19 - THE FOUNDATION MAKES ITS GOVERNING DOCUMENTS TO THE PUBLIC UPON REQUEST.