Form **990**

Return of Organization Exempt From Income Tax

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

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

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

OMB No. 1545-0047

2024

Open to Public Inspection

Department of the Treasury Internal Revenue Service

<u>A</u>	roi uii	e 2024 calendar year, or tax year beginning and end	iiig		
В	Check if applicable	C Name of organization		D Employer identific	cation number
	Addre chang Name				
	chang	e Doing business as		26-222499	94
	Initial return		m/suite	E Telephone number	•
	Final return		W00	310-464-0	0570
	termir ated			G Gross receipts \$	1,051,194.
	Amen return	LOS ANGELES, CA 90064		H(a) Is this a group re	eturn
	Application	F Name and address of principal officer: MICHAL BENG		for subordinates	? Yes X No
	pendi	11845 W OLYMPIC BLVD 1100W, LOS ANGELES,	CA	H(b) Are all subordinates in	cluded? Yes No
1	Tax-ex	empt status: X 501(c)(3) 501(c) () (insert no.) 4947(a)(1) or	527	If "No," attach a	list. See instructions
J	Websi	te: WWW.SFK.ORG		H(c) Group exemption	n number
K	Form of	organization: X Corporation Trust Association Other	L Year	of formation: 2009 N	State of legal domicile: CA
P	art I	Summary			
	1	Briefly describe the organization's mission or most significant activities: EVERY (CHIL	D IN THE WOR	RLD SHOULD
JCe		HAVE ACCESS TO UNIVERSAL SPIRITUAL SOCIAL-E			
na	2	Check this box if the organization discontinued its operations or disposed of	of more	than 25% of its net ass	ets.
Ş.	3	Number of voting members of the governing body (Part VI, line 1a)			5
Ğ	4	Number of independent voting members of the governing body (Part VI, line 1b)		4	4
S S	5	Total number of individuals employed in calendar year 2024 (Part V, line 2a)			2
/itie	6	Total number of volunteers (estimate if necessary)			11
Activities & Governance	7 a	Total unrelated business revenue from Part VIII, column (C), line 12			0.
⋖	b	Net unrelated business taxable income from Form 990-T, Part I, line 11			0.
				Prior Year	Current Year
4	8	Contributions and grants (Part VIII, line 1h)		21,851.	39,891.
ž	9	Program service revenue (Part VIII, line 2g)		0.	0.
Revenue	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		134,373.	111,291.
ă	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		15,364.	6,236.
	1	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		171,588.	157,418.
		Grants and similar amounts paid (Part IX, column (A), lines 1-3)		0.	0.
	1	Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.
"	45	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		288,687.	294,422.
Se	16a	Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.
Expenses	ь	Total fundraising expenses (Part IX, column (D), line 25) 40,126			
й	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		162,019.	122,365.
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		450,706.	416,787.
	19	Revenue less expenses. Subtract line 18 from line 12		-279,118.	-259,369.
or	í í	•		ginning of Current Year	End of Year
Net Assets or	20	Total assets (Part X, line 16)		1,309,974.	1,059,524.
Ass	21	Total liabilities (Part X, line 26)		31,065.	34,347.
Net	22	Net assets or fund balances. Subtract line 21 from line 20		1,278,909.	1,025,177.
P	art II	Signature Block			
Und	ler pena	 alties of perjury, I declare that I have examined this return, including accompanying schedules and	stateme	ents, and to the best of my	knowledge and belief, it is
true	, correc	ct, and complete. Declaration of preparer (other than officer) is based on all information of which p	reparer	has any knowledge.	
Sig	n	Signature of officer		Date	
He		MICHAL BERG, PRESIDENT/CEO			
		Type or print name and title			
		Preparer's name Preparer's signature	[Date Check	PTIN
Pai	d	NAZ AFSHAR		04-29-2025 self-employe	P00441843
Pre	parer	Firm's name GURSEY SCHNEIDER LLP			5-3309779
	Only	Firm's address 2121 AVENUE OF THE STARS SUITE 1300			
	-	LOS ANGELES, CA 90067		Phone no. (3)	10) 552-0960
Ma	y the II	RS discuss this return with the preparer shown above? See instructions		· · · · · · · · · · · · · · · · · · ·	X Yes No

4d Other program services (Describe on Sched	(.O əlub
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) (Revenue \$ (Expenses \$ including grants of \$ 319,752.

Total program service expenses

Page 3

Form 990 (2024) SPIRITUALITY FOR KIDS INTERNATIONAL, INC 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	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi-endowments? f "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X,			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	Х	
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total			l
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
С	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			l
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	X	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			,,
	Schedule D, Parts XI and XII	12a		X
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			٦,
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			_v
45	or more? If "Yes," complete Schedule F, Parts I and IV	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			_v
40	foreign organization? If "Yes," complete Schedule F, Parts II and IV Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to	15		X
16		4.		x
47	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	4-7		X
10	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	40		y
40	1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	4.		v
20-	complete Schedule G, Part III	19		X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		├^
b 21	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		\vdash
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			v
	domestic government on Part IX, column (A), line 1? If "Yes." complete Schedule I, Parts I and II	21	I	X

SPIRITUALITY FOR KIDS INTERNATIONAL, INC 26-2224994 Page 4 Part IV Checklist of Required Schedules (continued) Yes No 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 Х 22 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 X 23 Schedule J 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 Х Schedule K. If "No," go to line 25a 24a b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 24b 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 Х b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Х 25b 26 Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II Х 26 Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III Х 27 28 Was the organization a party to a business transaction with one of the following parties? (See the Schedule L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions): A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV 28a **b** A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV 28b c A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If 28c "Yes," complete Schedule L, Part IV Did the organization receive more than \$25,000 in noncash contributions? If "Yes," complete Schedule M 29 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 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I Х 31 31 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes." complete 32 Х Schedule N, Part II Did the organization own 100% of an entity disregarded as separate from the organization under Regulations X sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I 33 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Х 34 X 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 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? Х If "Yes," complete Schedule R, Part V, line 2 36 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 Х 37 Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? Х Note: All Form 990 filers are required to complete Schedule O 38 Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V

			_		162	140	
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable	1a	3				
b	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable	1b	0				
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming						
	(gambling) winnings to prize winners?			1c	Х	1	

SPIRITUALITY FOR KIDS INTERNATIONAL, INC Statements Regarding Other IRS Filings and Tax Compliance (continued) Page **5** Part V

			Yes	No							
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,										
	filed for the calendar year ending with or within the year covered by this return 2a2		7.7								
	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	77							
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X							
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b									
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a										
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X							
D	If "Yes," enter the name of the foreign country Cas in the attentions for file and a single part of Farm 114. Beauty of Farm										
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).	r-		х							
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	_5a_ 5b		X							
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5c									
	c If "Yes" to line 5a or 5b, did the organization file Form 8886-T?										
Va	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		х							
h	any contributions that were not tax deductible as charitable contributions? If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts	Ua									
b		6b									
7	were not tax deductible? Organizations that may receive deductible contributions under section 170(c).	OD									
	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		Х							
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b									
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required	75									
·	to file Form 8282?	7с		Х							
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d	70									
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		Х							
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		х							
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g									
_	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									
9	Sponsoring organizations maintaining donor advised funds.										
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		Х							
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		X							
10	Section 501(c)(7) organizations. Enter:										
а	Initiation fees and capital contributions included on Part VIII, line 12										
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities										
11	Section 501(c)(12) organizations. Enter:										
а	Gross income from members or shareholders										
b	Gross income from other sources. (Do not net amounts due or paid to other sources against										
	amounts due or received from them.)										
	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										
13	Section 501(c)(29) qualified nonprofit health insurance issuers.										
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.										
D	Enter the amount of reserves the organization is required to maintain by the states in which the										
_	organization is licensed to issue qualified health plans The the amount of receives an head										
	Enter the amount of reserves on hand Did the experience during the tox year?	14a		Х							
	Did the organization receive any payments for indoor tanning services during the tax year?										
15	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or	14b									
.5	excess parachute payment(s) during the year?	15		х							
	If "Yes," see the instructions and file Form 4720, Schedule N.	13									
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		Х							
.5	If "Yes," complete Form 4720, Schedule O.	.5									
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities										
	that would result in the imposition of an excise tax under section 4951, 4952 or 4953?	17									
	If "Yes," complete Form 6069.										

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

	Check if Schedule O contains a response or note to any line in this Part VI						X		
Sec	tion A. Governing Body and Management								
				_	Υ	es	No		
1a	Enter the number of voting members of the governing body at the end of the tax year	1a		5					
	If there are material differences in voting rights among members of the governing body, or if the governing								
	body delegated broad authority to an executive committee or similar committee, explain on Schedule O.								
b	Enter the number of voting members included on line 1a, above, who are independent	1b		4					
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship	with	any other						
	officer, director, trustee, or key employee?			2			X		
3	Did the organization delegate control over management duties customarily performed by or under the	direc	t supervision						
	of officers, directors, trustees, or key employees to a management company or other person?			. 3			X		
4	Did the organization make any significant changes to its governing documents since the prior Form 99	90 wa	s filed?	. 4			X		
5	Did the organization become aware during the year of a significant diversion of the organization's asset	ets?		. 5			X		
6	Did the organization have members or stockholders?			6			X		
7a	Did the organization have members, stockholders, or other persons who had the power to elect or ap	point	one or						
	more members of the governing body?			7a	ı		X		
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, ste	ockho	lders, or						
	persons other than the governing body?			7b	_		X		
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year	r by th	e following:						
а	The governing body?			8a	2	X			
b	Each committee with authority to act on behalf of the governing body?			8b			Х		
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reach	hed a	t the						
	organization's mailing address? If "Yes." provide the names and addresses on Schedule O			. 9			Х		
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Rev	/enue	Code.)						
					Υ	es	No		
10a	Did the organization have local chapters, branches, or affiliates?			10	а		X		
b	If "Yes," did the organization have written policies and procedures governing the activities of such characteristics.	apters	, affiliates,						
	and branches to ensure their operations are consistent with the organization's exempt purposes?			10	o		X		
11a									
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990.								
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13			12	a 2	X			
b	$Were \ officers, directors, or \ trustees, and \ key \ employees \ required \ to \ disclose \ annually \ interests \ that \ could \ give \ rise$	to con	flicts?	. 12	5 2	X			
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Y	es," a	escribe						
	on Schedule O how this was done			12	-	X			
13	Did the organization have a written whistleblower policy?			13	-	X			
14	Did the organization have a written document retention and destruction policy?			14	. 2	X			
15	Did the process for determining compensation of the following persons include a review and approval	by in	dependent						
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?								
	The organization's CEO, Executive Director, or top management official			15	а	_	<u> </u>		
b	Other officers or key employees of the organization			15	5	_	<u> </u>		
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.								
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement	nent w	ith a						
	taxable entity during the year?			16	а		<u> </u>		
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate	e its p	articipation						
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organi								
_	exempt status with respect to such arrangements?			16)				
Sec	tion C. Disclosure								
17	List the states with which a copy of this Form 990 is required to be filed CA								
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and	d 990	-T (section 501(c)(3)s only	/) ava	ailab	le		
	for public inspection. Indicate how you made these available. Check all that apply.								
	X Own website Another's website Upon request Other (explain								
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, con	oflict o	of interest policy, a	nd fina	ncia	l			
	statements available to the public during the tax year.								
20	State the name, address, and telephone number of the person who possesses the organization's boo	ks an	d records						
	NORIE G. LACHICA - 310-464-0570 11845 W OLYMPIC BLVD 1100W LOS ANGELES CA 90064								
	TIGAS W CHAMPIC BLVD LIDOW LOS ANCELES CA 90064								

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Check if Schedule O contains a response or note to any line in this Part VII

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See the 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, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

- 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. See the instructions for the order in which to list the persons above.

(A)	(B)	orga	(C)			ipei	isaic	(D)	(E)	(F)
Name and title	Average hours per week	box	not c , unle:	Pos heck i ss per	ition more rson i	than of s both or/trus	n an	Reportable compensation from	Reportable compensation from related	Estimated amount of other
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC/ 1099-NEC)	organizations (W-2/1099-MISC/ 1099-NEC)	compensation from the organization and related organizations
(1) MICHAL BERG	35.00	ļ						100 055		
BOARD MEMBER/PRESIDENT/CEO	2 00	Х		Х				108,375.	0.	0.
(2) HEATH GRANT BOARD MEMBER/SECRETARY/TRE	2.00	Х						0.	0.	0.
(3) CRISTINA MALLEOS	1.00	Λ							0.	0.
BOARD MEMBER/TREASURER	1.00	Х						0.	0.	0.
(4) JACOBY PHILLIPS	2.00								0.1	
BOARD MEMBER		Х						0.	0.	0.
(5) ALAN COHEN	1.00									
BOARD MEMBER		Х						0.	0.	0.
		-								
		1								
		-								
		1								
		1								
		4								
		-	_			_	_			
		}								
		<u> </u>				<u> </u>				000

432007 12-10-24 Form **990** (2024)

ı aı	t VII Section A. Officers, Directors, Trus		oloy	ees,			ghes	t C	ompensated Employee	s (continued)				
	(A)	(B)		(C)					(D)	(E)			(F)	
	Name and title	Average	(do		Pos) than d	one	Reportable	Reportable			timate	
		hours per week					s both or/trus		compensation	compensation			othor	of
		(list any	tor						from the	from related organizations			other oensa	tion
		hours for	direc.			pe			organization	(W-2/1099-MISC	:/		om th	
		related	tee or	ustee			ensati		(W-2/1099-MISC/	1099-NEC)		orga	anizat	ion
		organizations below	al trus	onal tr		loyee	comp		1099-NEC)				relat	
		line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	ormer				orga	nizati	ons
		,	드	드	0	3	工高	Œ			+			
											-+			
											+			
			-											
											\dashv			
1b	Subtotal								108,375.).			0.
	Total from continuation sheets to Part VI								0.).			0.
<u>d</u>	Total (add lines 1b and 1c)								108,375.).			0.
2	Total number of individuals (including but n	ot limited to th	ose	liste	d ab	ove) wh	o re	eceived more than \$100,	000 of reportable				4
	compensation from the organization											I	V	1
•	Diddle and a second and the second as the se	.P t t t						1-1-1	h t t l				Yes	No
3	Did the organization list any former officer,	•	-	•	•	•		_		•		3		Х
4	line 1a? If "Yes," complete Schedule J for so For any individual listed on line 1a, is the su										.	3		71
7	and related organizations greater than \$150											4		Х
5	Did any person listed on line 1a receive or a													
	rendered to the organization? If "Yes." com	•				•			•		[5		Х
Sec	tion B. Independent Contractors	•												
1	Complete this table for your five highest co	mpensated ind	lepe	nder	nt co	ontra	acto	rs th	nat received more than \$	100,000 of compe	nsatio	on fro	m	
	the organization. Report compensation for	the calendar ye	ear e	ndir	ng w	ith c	or wi	thin	the organization's tax ye	ear.				
	(A)	(B)								00	(C		_	
	Name and business address NONE Description of services											mper	nsatio	n
								\dashv						
2	Total number of independent contractors (in \$100,000 of compensation from the organic		ot lin	nited	d to	thos ۲	_	ted	above) who received mo	ore than				

			2024) SPIRITUALITY	FOR KIDS	INTERNATIO	ONAL, INC	26-2224	994 Page 9
Pa	rt V	Ш	Statement of Revenue					
			Check if Schedule O contains a response	or note to any lin				
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
<u>υ</u> υ	1	<u></u>	Federated campaigns 1a					
Contributions, Gifts, Grants and Other Similar Amounts			Membership dues 1b					
<u>2</u> ,5			Fundraising events 1c					
ifts ar A			Related organizations 1d					
S,G			Government grants (contributions) 1e					
ë		f	All other contributions, gifts, grants, and					
ib di			similar amounts not included above 1f	39,891.				
d tr		g	Noncash contributions included in lines 1a-1f 1g \$					
<u>ठ</u> ह		h	Total. Add lines 1a-1f		39,891.			
				Business Code				
<u>ic</u>	2							
er v		b						
m S		C						
gra Re		d						
Program Service Revenue		e f	All other program service revenue					
			Total. Add lines 2a-2f					
	3	J	Investment income (including dividends, inter-					
			other similar amounts)		32,819.			32,819.
	4		Income from investment of tax-exempt bond p	proceeds				
	5		Royalties					
			(i) Real	(ii) Personal				
	6	а	Gross rents 6a		_			
			Less: rental expenses 6b					
		c Rental income or (loss) d Net rental income or (loss) 7 a Gross amount from sales of (i) Securities						
				(ii) Other				
	7	а	0.70 0.40		-			
		h	assets other than inventory Less: cost or other basis	,	-			
Ð		D	and sales expenses 76 893,776.					
enue		С	Gain or (loss) 76 78,472.		-			
			Net gain or (loss)	•	78,472.			78,472.
Other R			Gross income from fundraising events (not		,			,
₽			including \$ of					
			contributions reported on line 1c). See					
			Part IV, line 18					
			Less: direct expenses 8t	<u>)</u>				
			Net income or (loss) from fundraising events					
	9		Gross income from gaming activities. See					
			Part IV, line 19 Less: direct expenses 9a 9b		-			
			Less: direct expenses	<u>, 1</u>				
			Gross sales of inventory, less returns	<u> </u>				
		u	and allowances 10	a				
		b	Less: cost of goods sold 10					
			Net income or (loss) from sales of inventory	•				
10				Business Code				
Miscellaneous Revenue	11	а	OTHER REVENUE	900099	6,236.	6,236.		
ane		b						
Seve		С						
ĭ Bis			All other revenue		6 226			
			Total. Add lines 11a-11d		6,236.	6,236.	0	111,291.
			TOTAL TEVERINE DEE OISTOCHOUS					

Part IX | Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

0001	on 501(c)(3) and 501(c)(4) organizations must compli- Check if Schedule O contains a respons				
Do	not include amounts reported on lines 6b,	(A) Total expenses	(B)	(C)	(D) Fundraising
	8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to domestic organizations			ŭ i	•
	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees				
6	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	047 707	100 165	04 771	04 771
7	Other salaries and wages	247,707.	198,165.	24,771.	24,771.
8	Pension plan accruals and contributions (include				
_	section 401(k) and 403(b) employer contributions)	46,715.	37,372.	4,672.	4,671.
9	Other employee benefits	40,/13.	31,314.	4,0/4.	4,0/1.
10	Payroll taxes				
11	` ' ' '				
a b	Management	2,001.		2,001.	
	Legal	12,925.		12,925.	
	Lobbying	22,7230		22/3231	
	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g					
Ū	column (A), amount, list line 11g expenses on Sch 0.)	25,478.	19,400.		6,078.
12	Advertising and promotion	25,478. 13,310.	12,000.		6,078. 1,310.
13	Office expenses	1,707.		1,707.	
14	Information technology	6,925.	5,355.	1,256.	314.
15	Royalties				
16	Occupancy	1,140.	912.	114.	114.
17	Travel				
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates	45,830.	45,830.		
22	Depreciation, depletion, and amortization	7,754.	40,000.	7,754.	
23 24	Other expenses. Itemize expenses not covered	1,15=•		1,134	
4 4	above. (List miscellaneous expenses on line 24e. If				
	line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule 0.)				
а	BANK FEES	2,867.		856.	2,011.
b	PERMITS	857.			857.
c	OTHER EXPENSES	853.		853.	
d	DUES & SUBSCRIPTIONS	718.	718.		
е	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	416,787.	319,752.	56,909.	40,126.
26	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)				5 000 (222.4)

Form 990 (2024) Part X Balance Sheet

Га	IL A	Balance Sheet					
		Check if Schedule O contains a response or n	ote to an	y line in this Part X			
					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing			392.	1	2,154.
	2	Savings and temporary cash investments			130,383.	2	26,158.
	3	Pledges and grants receivable, net				3	
	4	Accounts receivable, net			35.	4	375.
	5	Loans and other receivables from any current					
		trustee, key employee, creator or founder, sub	stantial o	ontributor, or 35%			
		controlled entity or family member of any of th	ese pers	ons		5	
	6	Loans and other receivables from other disqua	sons (as defined				
		under section 4958(f)(1)), and persons describ		6			
Ś	7	Notes and loans receivable, net			7		
Assets	8	Inventories for sale or use				8	
¥	9	Prepaid expenses and deferred charges			7,451.	9	8,810.
	10a	Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D	. 10a	6,145.			
	b	Less: accumulated depreciation		6,145.	0.	10c	0.
	11	Investments - publicly traded securities			1,089,068.	11	973,137.
	12	Investments - other securities. See Part IV, line	11			12	
	13	Investments - program-related. See Part IV, line	e 11			13	
	14	Intangible assets		82,645.	14	48,890.	
	15	Other assets. See Part IV, line 11		15			
	16	Total assets. Add lines 1 through 15 (must ed			1,309,974.	16	1,059,524.
	17	Accounts payable and accrued expenses		31,065.	17	34,347.	
	18	Grants payable		18			
	19	Deferred revenue				19	
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Complete	e Part IV	of Schedule D		21	
S	22	Loans and other payables to any current or for	rmer offic	er, director,			
Liabilities		trustee, key employee, creator or founder, sub	stantial o	ontributor, or 35%			
iabi		controlled entity or family member of any of th	ese pers	ons		22	
_	23	Secured mortgages and notes payable to unre	elated thi	d parties		23	
	24	Unsecured notes and loans payable to unrelat	ed third	parties		24	
	25	Other liabilities (including federal income tax, p	oayables	to related third			
		parties, and other liabilities not included on lin	es 17-24)	. Complete Part X			
		of Schedule D				25	21.21-
	26	Total liabilities. Add lines 17 through 25			31,065.	26	34,347.
"		Organizations that follow FASB ASC 958, cl	neck her	e X			
ĕ		and complete lines 27, 28, 32, and 33.			4 000 000		1 005 155
<u>la</u>	27	Net assets without donor restrictions			1,273,909.	27	1,025,177.
B	28	Net assets with donor restrictions			5,000.	28	0.
S I		Organizations that do not follow FASB ASC					
Ē		and complete lines 29 through 33.					
Net Assets or Fund Balances	29	Capital stock or trust principal, or current fund				29	
Se	30	Paid-in or capital surplus, or land, building, or				30	
ţ Ā	31	Retained earnings, endowment, accumulated			1 000 000	31	1 005 455
Se	32	Total net assets or fund balances			1,278,909.	32	1,025,177.
	33	Total liabilities and net assets/fund balances			1,309,974.	33	1,059,524.

Form **990** (2024)

Uniform Guidance, 2 C.F.R. Part 200, Subpart F?

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit

or audits, explain why on Schedule O and describe any steps taken to undergo such audits

Form **990** (2024)

За

Х

SCHEDULE A

(Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

Public Charity Status and Public Support

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

Attach to Form 990 or Form 990-EZ.

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2024

Open to Public Inspection

Employer identification number

				OR KIDS INTER				16-2224994						
Pa	ırt I	Reason for Public (Charity Status.	(All organizations must c	omplete th	nis part.) S	ee instructions.							
Γhe	organ	ization is not a private found	ation because it is: (I	For lines 1 through 12, cl	neck only	one box.)								
1		A church, convention of ch	urches, or associatio	n of churches described	in sectio	n 170(b)(1	I)(A)(i).							
2		A school described in sect	ion 170(b)(1)(A)(ii). (Attach Schedule E (Form	n 990).)									
3		A hospital or a cooperative				(b)(1)(A)(ii	i).							
4		A medical research organiz	ation operated in cor	njunction with a hospital	described	in sectio	n 170(b)(1)(A)(iii). Enter	the hospital's name,						
		city, and state:	•											
5		An organization operated for	or the benefit of a col	lege or university owned	or operate	ed by a go	vernmental unit describ	ed in						
		section 170(b)(1)(A)(iv). (Complete Part II.)												
6		A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).												
	X													
		section 170(b)(1)(A)(vi). (C		man pant of no capport in	o a go		arms or morn are gerrora.	pasiis assonissa iii						
8		A community trust describe		1)(A)(vi). (Complete Part	· II)									
9	Ħ	An agricultural research org				ed in coniu	ınction with a land-grant	college						
Ū		or university or a non-land-g				-		-						
		university:	rant conege or agno	andre (oce mendenome).	Littor tilo i	idino, oity	, and state of the coneg	3 01						
10		An organization that norma	Ilv receives (1) more	than 33 1/3% of its sunn	ort from c	ontribution	ns memhershin fees an	d aross receints from						
10	ш	activities related to its exen												
		income and unrelated busin		·				-						
		See section 509(a)(2). (Coi		(less section 511 tax) no	iii busiiles	sses acquii	red by the organization a	arter durie 30, 1973.						
11		An organization organized a	•	vely to test for public saf	aty See	section 50)0(a)(A)							
12	H	An organization organized a	-	•	•			nurnosos of one or						
12		more publicly supported or	· ·	•	-		· · · · · · · · · · · · · · · · · · ·							
		lines 12a through 12d that	•					SHECK THE DOX OH						
_		¬ ~ ~					, ,	aivina						
а			· · · · · · · · · · · · · · · · · · ·	•		-								
		the supported organization		• • • •	пајопцу о	i the direc	tors or trustees or the si	аррогинд						
		organization. You must o			:									
b	· L	☐ Type II. A supporting org	•					-						
		control or management o			ime perso	ns that coi	ntroi or manage the sup	portea						
_		organization(s). You mus				.:		ماند. الم						
С	· L	☐ Type III functionally inte	=					ea witn,						
	. —	its supported organization		·										
d		☐ Type III non-functionally					• • • • •	* *						
		that is not functionally int	-	* .	•		•	veness						
		requirement (see instructi	•	-										
е		Check this box if the orga					Type I, Type II, Type III							
	F4-	functionally integrated, or												
7		er the number of supported on the following information	•	d organization(s)										
<u>9</u>		i) Name of supported	(ii) EIN	(iii) Type of organization	(iv) Is the orga	ınization listed	(v) Amount of monetary	(vi) Amount of other						
	•	organization	, ,	(described on lines 1-10	in your governi Yes	ng document?	support (see instructions)	support (see instructions)						
				above (see instructions))	162	NO								

432021 01-14-25

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

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

Sec	tion A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	158,960.	72,078.	73,730.	21,851.	39,891.	366,510.
2	Tax revenues levied for the organ-						
	ization'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	158,960.	72,078.	73,730.	21,851.	39,891.	366,510.
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)						132,230.
	Public support. Subtract line 5 from line 4.						234,280.
	ction B. Total Support			1			
	ndar year (or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(f) Total
	Amounts from line 4	158,960.	72,078.	73,730.	21,851.	39,891.	366,510.
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,	42 277	41 641	20 101	40 004	20 010	205 052
	and income from similar sources	43,377.	41,641.	38,191.	49,924.	32,819.	205,952.
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	42,948.	47,992.	17,506.	12,264.	6 226	126,946.
	assets (Explain in Part VI.)	42,940.	41,332.	17,300.	12,204.	0,230.	699,408.
	Total support. Add lines 7 through 10	-1- /				40	6,236.
	Gross receipts from related activities,	`	,		•	12	0,230.
13	First 5 years. If the Form 990 is for the	-		· · · · · · · · · · · · · · · · · · ·			
Sec	organization, check this box and stop ction C. Computation of Publi						
	Public support percentage for 2024 (I			olumn (f))		14	33.50 %
	Public support percentage from 2023					15	36.24 %
	33 1/3% support test - 2024. If the o						
104	stop here. The organization qualifies				4 13 00 17070 OF TIM		77
h	33 1/3% support test - 2023. If the o		•				
	and stop here. The organization qual						
17a	10% -facts-and-circumstances test						
., a	and if the organization meets the fact:	-					
	meets the facts-and-circumstances te			-		viriow the organiz	
h	10% -facts-and-circumstances test	_	•	• • •	-		
	more, and if the organization meets the	_					. 5 / 0 01
	organization meets the facts-and-circu		Ť		•		
18	Private foundation. If the organization		•				

Schedule A (Form 990) 2024 SPIRITUALITY FOR KIDS INTERNATION 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.)

Section A. Public Support						
Calendar year (or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(f) Total
1 Gifts, grants, contributions, and						
membership fees received. (Do not						
include any "unusual grants.")						
2 Gross receipts from admissions,						
merchandise sold or services per-						
formed, or facilities furnished in any activity that is related to the						
organization's tax-exempt purpose						
3 Gross receipts from activities that						
are not an unrelated trade or bus-						
iness under section 513						
4 Tax revenues levied for the organ-						
ization's benefit and either paid to						
or expended on its behalf						
5 The value of services or facilities						
furnished by a governmental unit to						
the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and						
3 received from disqualified persons				1	ļ	<u> </u>
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						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						
Section B. Total Support	T	Γ	Γ	T	ı	
Calendar year (or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(f) Total
9 Amounts from line 6						
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						<u> </u>
c Add lines 10a and 10b						
activities not included on line 10b,						
whether or not the business is						
regularly carried on						_
or loss from the sale of capital						
assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)	L organizationis fi	rot occord thind	fourth or fifth to	l	(01(0)(2) 0****:	<u> </u>
14 First 5 years. If the Form 990 is for the	· ·				. , . ,	
check this box and stop here Section C. Computation of Publi	ic Support Per	centage		• • • • • • • • • • • • • • • • • • • •		
15 Public support percentage for 2024 (I			column (f))		15	%
16 Public support percentage from 2023					16	/ 0 %
Section D. Computation of Inves					1.0	70
17 Investment income percentage for 20			ne 13. column (f))		17	%
18 Investment income percentage from					18	<u> </u>
19a 33 1/3% support tests - 2024. If the						
more than 33 1/3%, check this box as						
b 33 1/3% support tests - 2023. If the						
line 18 is not more than 33 1/3%, che						
20 Private foundation. If the organization						

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

- 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 class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- **3a** Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and 3c 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.
- c 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.
- **4a** Was any supported organization not organized in the United States ("foreign supported organization")? *If* "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.
- **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.
- c 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," answer lines 5b and 5c 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).
- **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?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 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.
- 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).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? If "Yes," complete Part I of Schedule L (Form 990).
- **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.**
- **b** Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes." provide detail in **Part VI.**
- c Did a disqualified person (as defined on 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.
- 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 line 10b below.
 - **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

		Vez	NI =
		Yes	No
	1		
	2		
	3a		
	3b		
	3с		
	40		
	4a		
	4b		
	4c		
	5a		
	_		
	5b 5c		
	30		
	6		
	7		
	c		
	8		
	9a		
	9b		
	00		
	9c		
	10a		
	,,,,,		
	10b		
مادد	A (Forn	2001	2024

Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in **Part VI** the role played by the organization in this regard.

	dule A (Form 990) 2024 SPIRITUALITY FOR KIDS II			26-2224994 Page 6
Pa	rt V Type III Non-Functionally Integrated 509(a)(3) Supporti	ng Organ	izations	
1	Check here if the organization satisfied the Integral Part Test as a qualifyi	ng trust on	Nov. 20, 1970 (explain	in Part VI). See instructions.
	All other Type III non-functionally integrated supporting organizations must	st complete	Sections A through E.	
Sect	ion 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		
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	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		
с	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	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 0.015 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 0.035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 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		

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

Schedule A (Form 990) 2024

instructions).

Pa	Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)								
Sect	ion D - Distributions			Current Year					
1	Amounts paid to supported organizations to accomplish exe	mpt purposes	1						
2	Amounts paid to perform activity that directly furthers exemp	ot purposes of supported							
	organizations, in excess of income from activity		2						
3	Administrative expenses paid to accomplish exempt purpose	es of supported organizations	3						
4	Amounts paid to acquire exempt-use assets		4						
5	Qualified set-aside amounts (prior IRS approval required - pr	ovide details in Part VI)	5						
6	Other distributions (describe in Part VI). See instructions.		6						
7	Total annual distributions. Add lines 1 through 6.		7						
8	Distributions to attentive supported organizations to which the	he organization is responsive							
	(provide details in Part VI). See instructions.		8						
9	Distributable amount for 2024 from Section C, line 6		9						
10	Line 8 amount divided by line 9 amount		10						
Sect	ion E - Distribution Allocations (see instructions)	(ii) Underdistributions	(iii) Distributable						

Section E - Distribution Allocations (see instructions	s) (i) Excess Distributions	(ii) Underdistributions Pre-2024	(iii) Distributable Amount for 2024
1 Distributable amount for 2024 from Section C, lin	ne 6		
2 Underdistributions, if any, for years prior to 2024	4 (reason-		
able cause required - explain in Part VI). See ins	structions.		
3 Excess distributions carryover, if any, to 2024			
a From 2019			
b From 2020			
c From 2021			
d From 2022			
e From 2023			
f Total of lines 3a through 3e			
g Applied to under distributions of prior years			
h Applied to 2024 distributable amount			
i Carryover from 2019 not applied (see instruction	ns)		
j Remainder. Subtract lines 3g, 3h, and 3i from lin	ne 3f.		
4 Distributions for 2024 from Section D,			
line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2024 distributable amount			
c Remainder. Subtract lines 4a and 4b from line 4			
5 Remaining underdistributions for years prior to 2	2024, if		
any. Subtract lines 3g and 4a from line 2. For re-	sult greater		
than zero, explain in Part VI. See instructions.			
6 Remaining underdistributions for 2024. Subtract			
and 4b from line 1. For result greater than zero,	explain in		
Part VI. See instructions.			
7 Excess distributions carryover to 2025. Add li	ines 3j		
and 4c.			
8 Breakdown of line 7:			
a Excess from 2020			
b Excess from 2021			
c Excess from 2022			
d Excess from 2023			
e Excess from 2024			

Schedule A (Form 990) 2024

432028 01-14-25 Schedule A (Form 990) 2024

SCHEDULE D (Form 990)

(Rev. December 2024) Department of the Treasury Internal Revenue Service 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

Name of the organization

SPIRITUALITY FOR KIDS INTERNATIONAL, INC

Inspection **Employer identification number** 26-2224994

Pai	t I Organizations Maintaining Donor Advised organization answered "Yes" on Form 990, Part IV, lin.		nilar Funds or A	Accounts. Complete if the
	organization answered Tee Sitt offit 600, Fart IV, IIII	(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 v		in donor advised fur	nds
	are the organization's property, subject to the organization's	-		
6	Did the organization inform all grantees, donors, and donor a			
	for charitable purposes and not for the benefit of the donor or			
	impermissible private benefit?			Yes No
Pai	T II Conservation Easements. Complete if the org	ganization answered "Yes"	on Form 990, Part I	V, line 7.
1	Purpose(s) of conservation easements held by the organization	on (check all that apply).		
	Preservation of land for public use (for example, recreated	tion or education)	Preservation of a his	torically important land area
	Protection of natural habitat		Preservation of a cer	rtified historic structure
	Preservation of open space			
2	Complete lines 2a through 2d if the organization held a qualif	ied conservation contribut	ion in the form of a c	conservation easement on the last
	day of the tax year.			Held at the End of the Tax Year
а	Total number of conservation easements			2a
b				2b
С	Number of conservation easements on a certified historic stru	ucture included on line 2a		2c
d	Number of conservation easements included on line 2c acqui	ired after July 25, 2006, an	d not	
	on a historic structure listed in the National Register			2d
3	Number of conservation easements modified, transferred, rele	eased, extinguished, or ter	minated by the orga	nization during the tax
	year			
4	Number of states where property subject to conservation eas	sement is located		
5	Does the organization have a written policy regarding the per	iodic monitoring, inspectio	n, handling of	
	violations, and enforcement of the conservation easements it	holds?		Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting,	handling of violations, and	enforcing conservat	ion easements during the year
7	Amount of expenses incurred in monitoring, inspecting, hand	lling of violations, and enfo	rcing conservation e	asements during the year
8	Does each conservation easement reported on line 2d above			
	and section 170(h)(4)(B)(ii)?			
9	In Part XIII, describe how the organization reports conservation			
	balance sheet, and include, if applicable, the text of the footn	ote to the organization's fi	nancial statements t	hat describes the
Dai	organization's accounting for conservation easements. † III Organizations Maintaining Collections of	Art Historical Trea	sures or Other	Similar Assets
ı aı	Complete if the organization answered "Yes" on Form	•	sures, or other	Olimai Assets.
12	If the organization elected, as permitted under FASB ASC 95		ue statement and ha	plance sheet works
ıa	of art, historical treasures, or other similar assets held for pub	•		
	service, provide in Part XIII the text of the footnote to its finan	•		ance of public
h	If the organization elected, as permitted under FASB ASC 95			so shoot works of
b	art, historical treasures, or other similar assets held for public	· ·		
		exhibition, education, or r	esearch in luitherand	ce of public service,
	provide the following amounts relating to these items.			¢
	(i) Revenue included on Form 990, Part VIII, line 1			
2	(ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treat	acures or other similar ass		
~	the following amounts required to be reported under FASB A			, provide
а	Revenue included on Form 990, Part VIII, line 1			\$
	Assets included in Form 990, Part X			
	, leaded moradod mir ordii 000, i uit /			🗡

	rt III Organizations Maintaining Co								ets _{(contin}		age Z	
3	Using the organization's acquisition, accession	n, and other record	ls, check an	y of the f	ollowing that	make s	ignifica	nt use of it	S			
	collection items (check all that apply).		,	•	· ·							
а	Public exhibition	ď	ı Lo	an or exc	hange progra	m						
b Scholarly research e Other												
c												
4	Provide a description of the organization's co	lloctions and ovnlai	n how thoy	furthar th	o organizatio	n'e ovor	mnt nu	rnoco in Da	ort VIII			
5									II L AIII.			
3	During the year, did the organization solicit or to be sold to raise funds rather than to be ma								Yes		No	
Par	rt IV Escrow and Custodial Arrang										INO	
ı uı	reported an amount on Form 990, Part		ete ii trie org	ariizatioi	i aliswered i	es on	FOIIII	990, Part IV	, iii le 9, oi			
10	Is the organization an agent, trustee, custodia		dian, for on	atribution	o or other see	oto not	inalud					
ıa			-						Yes		No	
	on Form 990, Part X?							L	res		_ NO	
D	If "Yes," explain the arrangement in Part XIII a	and complete the to	llowing tabl	e:					Amoun			
							\vdash		Amoun			
	Beginning balance						—	С				
	Additions during the year						- 1	d				
е	Distributions during the year							е				
f	Ending balance						L	lf				
2 a	Did the organization include an amount on Fo	orm 990, Part X, line	21, for esc	row or cu	ıstodial accou	ınt liabil	lity?	L	Yes	L	No	
	If "Yes," explain the arrangement in Part XIII.											
Pai	rt V Endowment Funds Complete if		swered "Ye	s" on For	1							
		(a) Current year	(b) Prio	r year	(c) Two years	s back	(d) Th	ree years bac	k (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												
2	Provide the estimated percentage of the curre		e (line 1a. c	olumn (a)	ı) held as.							
	Board designated or quasi-endowment		%	olalilii (a)	n ricia ao.							
b		%	— ′°									
C	The percentages on lines 2a, 2b, and 2c shou											
0-	, ,	•		سماماما								
Зa	Are there endowment funds not in the posses	ssion of the organiza	ation that ar	e neid ar	ia administere	ea for tr	е		ſ	Yes	No	
	organization by:								0 (1)	163	NO	
	(m) = 1								3a(i)			
b	If "Yes" on line 3a(ii), are the related organizat								3b			
4	Describe in Part XIII the intended uses of the		wment fund	ds.								
rai	rt VI Land, Buildings, and Equipme) Dest 11 (!!		F 000	D+ \	Date of C	,				
	Complete if the organization answered		i		<u> </u>							
	Description of property	(a) Cost or o			or other		ccumi	I .	(d) Boo	k valu	е	
		basis (investr	ment)	basis	(other)	de	precia	tion				
1a	Land											
b	Buildings											
	Leasehold improvements											
	Equipment				6,145.		6	145.			0.	
	Other											
Total	Add lines 1a through 1e (Column (d) must on	aual Form 000 Port	V line 10e	column	(D))						0 -	

Schedule D (Form 990) (Rev. 12-2024) SPIRITUALI Part VII Investments - Other Securities			
Complete if the organization answered "Yes"	1		
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuati	ion: Cost or end-of-year market value
(1) Financial derivatives			
(2) Closely held equity interests (3) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
Total. (Col. (b) must equal Form 990, Part X, line 12, col. (B))			
Part VIII Investments - Program Related.			
Complete if the organization answered "Yes"			
(a) Description of investment	(b) Book value	(c) Method of valuati	ion: Cost or end-of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
<u>(7)</u>			
(8) (9)			
Total. (Col. (b) must equal Form 990, Part X, line 13, col. (B)) Part IX Other Assets Complete if the organization answered "Yes"	on Form 990, Part IV, line	e 11d. See Form 990, Part)	K, line 15.
(a)	Description		(b) Book value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
<u>(7)</u>			
(8)			
(9)	/ (D)\		
Total. (Column (b) must equal Form 990, Part X, line 15, co Part X Other Liabilities	i. (B))		
Complete if the organization answered "Yes"	on Form 990. Part IV. line	e 11e or 11f. See Form 990.	, Part X, line 25.
1. (a) Description of liability	, ,	300	(b) Book value
(1) Federal income taxes			,,
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, line 25, co	I. (B))		
2. Liability for uncertain tax positions. In Part XIII, provide	the text of the footnote	to the organization's financi	
organization's liability for uncertain tax positions under	FASB ASC 740. Check I	here if the text of the footno	te has been provided in Part XIII X

Schedule D (Form 990) (Rev. 12-2024)

Schedule D) (Form 990) (Rev. 12-2024) SPIRITUALITY	FOR	KIDS	INTERNATIONAL,	INC	26-2224994	Page 5
Part XIII) (Form 990) (Rev. 12-2024) SPIRITUALITY Supplemental Information (continued)						
	(continued)						

SCHEDULE O (Form 990)

FORM 990

(Rev. December 2024) Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

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

OMB No. 1545-0047

Open to Public Inspection

Employer identification number

Name of the organization

PART

SPIRITUALITY FOR KIDS INTERNATIONAL

26-2224994 DESCRIPTION OF ORGANIZATION MISSION: LINE 1

CONCEPTS EARLY INLIFE SO THEY CAN MAKE BETTER LIFE CHOICES FOR

THEMSELVES AND THEWORLD AROUND THEM

Ι

PART III, DESCRIPTION OF ORGANIZATION MISSION: LINE 1 SPIRITUALITY FOR KIDS (SFK) IS A 501(C)(3) EDUCATIONAL NONPROFIT ORGANIZATION THAT DEVELOPS ONLINE SOCIAL EMOTIONAL LEARNING PROGRAMS FOR KIDS (WWW.SFK.ORG) BASED ON UNIVERSAL SPIRITUAL PRINCIPLES DELIVERED VIA A CURRICULUM OF ENGAGING VIDEOS, ANIMATIONS, GAMES, PROJECTS, JOURNALING AND MORE.

THE AWARD-WINNING ONLINE PROGRAM IS USED BY KIDS AND ADULTS TOGETHER IN THE COMFORT OF THEIR OWN HOME AS WELL AS BY VOLUNTEERS AROUND THE ТО TEACHING GROUP CLASSES IN FOSTER HOMES, ORPHANAGES . KIDS PRISONS. HOSPITALS, AFTER-SCHOOL PROGRAMS, ANDIN SCHOOLS.

REGARDLESS OF WE BELIEVE EVERY CHILD IN THE WORLD, RACE, CLASS, RELIGION, SHOULD HAVE ACCESS TO A SOCIAL EMOTIONAL LEARNING PROGRAM THAT WILL EQUIP THEM WITH THE TOOLS TO MAKE BETTER LIFE CHOICES FOR THEMSELVES AND THE WORLD AROUND THEM, MANAGE THEIR EMOTIONS, AND DEVELOP A DEEPER SENSE OF RESPONSIBILITY AND SELF-WORTH.

OUR MISSION IS TO CREATE QUALITY AND TRANSFORMATIONAL SOCIAL-EMOTIONAL EDUCATIONAL CONTENT FOR CHILDREN, PARENTS, AND PROFESSIONALS TO ENSURE HEALTHIER, MORE PURPOSEFUL, AND EMPOWERED LIVES FOR FUTURE GENERATIONS.

THE GOAL OF SPIRITUALITY FOR KIDS IS TO ENCOURAGE CHILDREN TO:

- DEVELOP SELF-AWARENESS;
- REFLECT ON THEIR PURPOSE IN LIFE;
- MAKE WISE DECISIONS AND UNDERSTAND THE IMPACT OF THEIR CHOICES;
- BUILD RESILIENCE AND TREAT CHALLENGES AS OPPORTUNITIES;
- LEARN BEHAVIORAL TOOLS TO BRING MORE FULFILLMENT INTO THEIR LIVES
- TAP INTO THEIR INNER STRENGTHS AND DEVELOP SELF-ESTEEM; AND
- AWAKEN THEIR DESIRE TO MAKE A DIFFERENCE IN THE WORLD AROUND THEM

FORM 990 PART VI, SECTION A, LINE

THE ORGANIZATION DID NOT MAINTAIN ANY COMMITTEES IN 2024.

FORM 990 PART VI, SECTION B LINE 11B:

990 IS PREPARED BY AN OUTSIDE INDEPENDENT ACCCOUNTING FIRM AND APPROVED BY MANAGEMENT PRIOR TO FILING.

FORM 990, PART VI, SECTION B, LINE

CONFLICT OF INTEREST, CODES OF ETHICS, RECORD RETENTION AND WHISTLEBLOWER ARE IN PLACE AT SFK. ALL EMPLOYEES AND DIRECTORS ARE MADE AWARE OF POLICIES WHICH ARE PROVIDED IN OUR EMPLOYEE HANDBOOKS OR BYLAWS. THE POLICIES, EMPLOYEES SIGN CONFIRMING DOCUMENTATION THAT THEY HAVE RECEIVED THE HANDBOOK AND ITS INCLUDED POLICIES AND PROCEDURES OFFICERS, DIRECTORS AND KEY EMPLOYEES ARE REQUIRED TO DISCLOSE ANNUALLY INTEREST THAT COULD GIVE RISE TO CONFLICTS.

FORM 990 PART VI SECTION C LINE 19: Schedule O (Form 990) 2024 Page **2**

Name of the organization SPIRITUALITY FOR KIDS INTERNATIONAL, INC		Employer identification number 26-2224994
UPON REQUEST FROM THE GENERAL PUBLIC, THE ORGANIZATION V	VIL:	
TO THE ORGANIZATION'S GOVERNING DOCUMENTS, CONFLICT OF	INT	EREST POLICIES
AND FINANCIAL STATEMENTS AS REQUIRED BY LAW.		
FORM 990, PART XII, LINE 2C:		
THE FINANCIALS ARE COMPILED BY AN INDEPENDENT AUDITOR.		
THE PINANCIALD ARE COMPILED BY AN INDEPENDENT AUDITOR:		

SCHEDULE R (Form 990)

(Rev. January 2025) Department of the Treasury Internal Revenue Service

Name of the organization

Related Organizations and Unrelated Partnerships
Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37. 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

	SPIRITUALITY F	<u>OR KIDS INTERNATION</u>	NAL, INC			26-222	4994	
Part I	Identification of Disregarded Entities. Complet	e if the organization answered "Yes"	on Form 990, Part IV, line 33	3.				
	(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) (d) Legal domicile (state or foreign country)		(e) me End-of-year	assets Dire	(f) Direct controlling entity	
Part II	Identification of Related Tax-Exempt Organiza	tions. Complete if the organization a	answered "Yes" on Form 990	, Part IV, line 34, b	pecause it had one o	or more related tax-	exempt	
raitii	organizations during the tax year. (a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	cont	512(b)(13) trolled tity?
					301(0)(3))		Yes	No

Page 2

Part III Identification of Related Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a partnership during the tax year.

(-)	(1-)	(-)	(-1)	(-)	(4)	()	T ,	L-1	(:)		(1-)
(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)	(i)	(j)	
Name, address, and EIN	Primary activity	Legal domicile	Direct controlling	Predominant income	Share of total	Share of	Disprop	ortionate	Code V-UBI	Gener	l or Percentage
of related organization		(state or foreign	entity	excluded from tax under	income	end-of-year assets	allocations?		amount in box 20 of Schedule	ount in box partne	Percentage ownership
		country)		(related, unrelated, excluded from tax under sections 512-514)		assets	Yes	No	K-1 (Form 1065)	Yes	No
	E-COMMERCE										
SECRET LIGHT LLC - 30-0686353	SALES OF										
434 S ALMONT DR	PRODUCTS,										
BEVERLY HILLS, CA 90211	CONSULTING AND	CA	N/A	N/A				X	N/A		ζ
]										
	1										
	1										
	1										
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	1										
	1	<u> </u>	1	1		ı			1		

Part IV Identification of Related Organizations Taxable as a Corporation or Trust. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a corporation or trust during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	Legal domicile (state or	(d) Direct controlling entity	(e) Type of entity (C corp, S corp,	(f) Share of total income	end-of-year	(h) Percentage ownership	Sect 512(b contro enti	tion ()(13) olled
		foreign country)		or trust)		assets		Yes	

Page 3

Yes No

Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity

р	Girt, grant, or capital contribution to related organization(s)				מו						
С	Gift, grant, or capital contribution from related organization(s)				1c		Х				
	d Loans or loan guarantees to or for related organization(s)										
	Loans or loan guarantees by related organization(s)				1e		X				
f	Dividends from related organization(s)				1f		<u>X</u>				
g	Sale of assets to related organization(s)				1g		<u>X</u>				
	Purchase of assets from related organization(s)				1h		<u>X</u>				
i	i Exchange of assets with related organization(s)										
j	j Lease of facilities, equipment, or other assets to related organization(s)										
k	k Lease of facilities, equipment, or other assets from related organization(s)										
	Performance of services or membership or fundraising solicitations for related organizations				11		<u>X</u>				
m	Performance of services or membership or fundraising solicitations by related organizations	ation(s)			1m		<u>X</u>				
n	Sharing of facilities, equipment, mailing lists, or other assets with related organization((s)			1n		<u>X</u>				
0	Sharing of paid employees with related organization(s)				10		<u> </u>				
							X				
p Reimbursement paid to related organization(s) for expenses											
q Reimbursement paid by related organization(s) for expenses											
							X				
r	r Other transfer of cash or property to related organization(s)										
s	Other transfer of cash or property from related organization(s)				1s		<u>X</u>				
2	If the answer to any of the above is "Yes," see the instructions for information on who	must complete th	is line, including covered relation	onships and transaction thresholds.							
	(a)	(b)	(c)	(d)							
	Name of related organization	Transaction	Amount involved	Method of determining amount in	volved						
		type (a-s)									
1)											
2)											
3)											
4)											
5)											
6)	<u>L</u>										
32163	3 10-23-24			Schedule R (Form	990) (Re	v. 1-2	025)				

Part VI Unrelated Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	Are all partners sec 501(c)(3) orgs.?		(g) Share of end-of-year assets	Disprotion allocat	por- ate ions?		Gener mana partn	(kal or Perce	(k) entage ership
		country)	Sections 5 (2-5 (4)	Yes No	income	855615	Yes	No	(FORM 1065)	Yes	NO	
										H		
									h . d. l. D (5			

Schedule R (F	orm 990) (Rev. 1-20)	25) SPIRI'	I,NYP1,I	Y FOR	KIDS	INTERN	IOT LAN	IAL, I	NC	26-222	4994	Page 5
	Supplemental Ir Provide additional in		sponses to	auestions	on Schedu	ıle R. See ins	structions					
											- a	
PART II	I, IDENTIF	ICATION	OF RE	LA'I'ED	ORGAN	ITZATTO	NS TA	XABLE	AS	PARTNE	RSHIF	' :
NAME OF	RELATED O	RGANIZAT	ION:									
SECRET	LIGHT LLC											
PRIMARY	ACTIVITY:	E-COMME	RCE S	ALES (OF PRO	DUCTS,	CONS	ULTING	3 AN	D COAC	HING	