

Form JJU
(Rev. January 2020)
Department of the Treasury Internal Revenue Service
internal neverifie del vice

** PUBLIC DISCLOSURE COPY **

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

AF	or th	e 2019 calendar year, or tax year beginning an	d ending		
	heck if pplicab	e: C Name of organization		D Employer identified	cation number
	Addre	e SONGS FOR KIDS FOUNDATION INC			
	Name Chang	Doing business as		61-15161	32
	Initial	Number and street (or P.O. box if mail is not delivered to street address)	Room/su	uite E Telephone number	r
	Final return		В	404-541-	
	termi ated	City or town, state or province, country, and ZIP or foreign postal code		G Gross receipts \$	452,753.
	Amer	AILANIA, GA 30303	H(a) Is this a group re	eturn	
	Appli tion	F Name and address of principal officer: 00511 KIRKIND		for subordinates	? Yes X No
	pend	SAME AS C ABOVE		H(b) Are all subordinates in	icluded? Yes No
		empt status: 🚺 501(c)(3) 📃 501(c) ()◀ (insert no.) 🗌 4947(a)(1) or 📃 :	527 If "No," attach a	list. (see instructions)
		te: WWW.SONGSFORKIDSFOUNDATION.ORG		H(c) Group exemptio	
KF	orm o	f organization: 🔀 Corporation 🔄 Trust 🔄 Association 🔄 Other 🕨	LY	ear of formation: 2007	A State of legal domicile: GA
Pa	art I	Summary			
Ø	1	Briefly describe the organization's mission or most significant activities:			
Š		IN NEED THROUGH MUSIC. SONGS FOR KIDS F	OUNDA	TION BRINGS M	USICIANS
Governance	2	Check this box 🕨 🛄 if the organization discontinued its operations or disp	osed of m	ore than 25% of its net ass	
0 Vē	3				3
	4	Number of independent voting members of the governing body (Part VI, line 1b)			2
es	5	Total number of individuals employed in calendar year 2019 (Part V, line 2a)			30
Activities &	6	Total number of volunteers (estimate if necessary)		20	
Acti		Total unrelated business revenue from Part VIII, column (C), line 12			0.
_	b	Net unrelated business taxable income from Form 990-T, line 39	<u></u>		0.
				Prior Year	Current Year
ē	8	Contributions and grants (Part VIII, line 1h)		314,848.	319,721.
enu	9	Program service revenue (Part VIII, line 2g)		0.	0.
Revenue	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		0.	6,804.
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		77,834.	70,327.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		392,682.	396,852.
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		0.	0.
	14	Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.
es	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		138,248.	172,320.
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.
ğ	b	Total fundraising expenses (Part IX, column (D), line 25)		000 514	486.550
ш	1 17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		239,511.	170,553.
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		377,759.	342,873.
	19	Revenue less expenses. Subtract line 18 from line 12		14,923.	53,979.
Net Assets or Fund Balances				Beginning of Current Year	End of Year
sset	20	Total assets (Part X, line 16)		363,908.	421,879.
t As	21	Total liabilities (Part X, line 26)		5,441.	9,394.
		Net assets or fund balances. Subtract line 21 from line 20		358,467.	412,485.
	art II	Signature Block			
		alties of perjury, I declare that I have examined this return, including accompanying schedul			knowledge and belief, it is
true,	corre	ct, and complete. Declaration of preparer (other than officer) is based on all information of v	which prepa	arer has any knowledge.	

Sign Here	Signature of officer JOSH RIFKIND, OFFICER Type or print name and title		Date			
	Print/Type preparer's name Preparer's signature	Date				
Paid	KATHERINE MOOSARIPARAMBIL		"self-employed P01361871			
Preparer	Firm's name 🕨 CHERRY BEKAERT LLP		Firm's EIN 🕨 56-0574444			
Use Only	Firm's address 🕨 1029 GREENE STREET					
	AUGUSTA, GA 30901 Phone no.706-724-					
May the I	RS discuss this return with the preparer shown above? (see instructions)		X Yes No			
932001 01-2	0-20 LHA For Paperwork Reduction Act Notice, see the separate instructions.		Form 990 (2019)			

SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION

Form	1 990 (2019) SONGS FOR KIDS FOUNDATION INC	61-1516132 Pag	ge 2
Pa	rt III Statement of Program Service Accomplishments		
	Check if Schedule O contains a response or note to any line in this Part III	[
1	Briefly describe the organization's mission:		
	ENRICHING THE LIVES OF CHILDREN IN NEED THROUGH MUSIC.	SONGS FOR KIDS	
	FOUNDATION BRINGS MUSICIANS YEAR ROUND TO CHILDREN'S HOS	SPITALS AND	
	SPECIAL NEEDS KIDS CAMPS.		
2	Did the organization undertake any significant program services during the year which were not listed on the		
2		Yes X	No
	prior Form 990 or 990-EZ? If "Yes," describe these new services on Schedule O.		NO
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	Yes X	No
U	If "Yes," describe these changes on Schedule O.		NO
4	Describe the organization's program service accomplishments for each of its three largest program services, as	s measured by expenses	
•	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to oth		
	revenue, if any, for each program service reported.		
4a	(Code:) (Expenses \$308, 486. including grants of \$) (Rev	enue \$)
	TO BRING MUSICIANS YEAR ROUND TO CHILDREN'S HOSPITALS AN	ND SPECIAL NEEDS	<u>,</u> '
	KIDS CAMPS.		
4b	(Code:) (Expenses \$ including grants of \$) (Rev	enue \$)
4c	(Code:) (Expenses \$ including grants of \$) (Rev	enue \$)
4d	Other program services (Describe on Schedule O.)		
'n	(Expenses \$ including grants of \$) (Revenue \$)	
4e	Total program service expenses > 308, 486.	/	
		- 000 /-	

<u>Form 990 (</u>				-		FOUNDATION	INC
Part IV	Che	ecklist of Req	uired S	chedu	iles		

			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?	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 Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		x
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		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			
10	or in quasi endowments? If "Yes," complete Schedule D, Part V	10		x
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VII, IX, or X			
••	as applicable.			
~	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
а	Part VI	11a	х	
h	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total	11a	23	
b		116		x
-	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		
C	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total	110		x
لم	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		
a	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			x
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	Х	
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	A	
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)? <i>If "Yes," complete Schedule D, Part X</i>	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?			
	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		<u>x</u>
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			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		X X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		X X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18	X	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			<u>-</u> -
	complete Schedule G, Part III	19		X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		x
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes." complete Schedule I. Parts I and II	21		X

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			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		_X_
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			v
	Schedule J	23		<u> </u>
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	0.4		х
L	Schedule K. If "No," go to line 25a	24a 24b		
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	240		
C		24c		
d	any tax-exempt bonds? Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	240 24d		
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	2.70		
200	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	200		
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L. Part I	25b		х
26	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	26		х
27	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	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	instructions, for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			
	"Yes," complete Schedule L, Part IV	28a		_X_
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		X
С	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If			
	"Yes," complete Schedule L, Part IV	28c		_X_
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Х	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			37
.	contributions? If "Yes," complete Schedule M	30		X X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			х
22	Schedule N, Part II Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	32		
33		33		х
34	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		- 23
07	Part V, line 1	34		х
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			<u> </u>
	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		Х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?			
	Note: All Form 990 filers are required to complete Schedule O	38	Х	
Ра	rt V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V			
4	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable		Yes	No
1a b		-		
c v				
Ū	(gambling) winnings to prize winners?	1c	х	

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Par	t V Statements Regarding Other IRS Filings and Tax Compliance (continued)					
			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 2a 30					
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х			
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see instructions)					
	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		<u> </u>		
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		
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).			v		
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X		
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		x		
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		<u> </u>		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			v		
	any contributions that were not tax deductible as charitable contributions?	6a		<u>x</u>		
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts					
_	were not tax deductible?	6b				
7	Organizations that may receive deductible contributions under section 170(c).	-		v		
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		X		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		<u> </u>		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required	-		x		
	to file Form 8282?	7c				
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X X		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f 7a				
g L	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g 7h		<u> </u>		
h o	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	8				
0	sponsoring organization have excess business holdings at any time during the year?	0				
9	Sponsoring organizations maintaining donor advised funds. Did the sponsoring organization make any taxable distributions under section 4966?	9a				
a b		9a 9b		<u> </u>		
b 10	Section 501(c)(7) organizations. Enter:	30				
10						
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b					
11	Section 501(c)(12) organizations. Enter:					
	Gross income from members or shareholders					
a b	Gross income from other sources (Do not net amounts due or paid to other sources against					
D.	amounts due or received from them.) 11b					
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	12-0				
13	Section 501(c)(29) qualified nonprofit health insurance issuers.					
	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.	100				
b	Enter the amount of reserves the organization is required to maintain by the states in which the					
~	organization is licensed to issue qualified health plans					
с	Enter the amount of reserves on hand					
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		x		
b	If "Yes," has it filed a Form 720 to report these payments? <i>If</i> "No," <i>provide an explanation on Schedule O</i>	14b				
15 15	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		x		
	If "Yes," see instructions and file Form 4720, Schedule N.			_		
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		x		
-	If "Yes," complete Form 4720, Schedule O.					
			000			

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SONGS FOR KIDS FOUNDATION INC

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

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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. X

Sec	tion A. Governing Body and Management						
				_		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a		3			
	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 0.						
b	Enter the number of voting members included on line 1a, above, who are independent	1b		2			
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		Х
3	Did the organization delegate control over management duties customarily performed by or under the			Γ			
	of officers, directors, trustees, or key employees to a management company or other person?				3		Х
4	Did the organization make any significant changes to its governing documents since the prior Form 9			··	4		Х
5	Did the organization become aware during the year of a significant diversion of the organization's ass			··· F	5		Х
6	Did the organization have members or stockholders?				6		Х
7a	Did the organization have members, stockholders, or other persons who had the power to elect or ap			F			
	more members of the governing body?				7a		Х
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, st			· F			
	persons other than the governing body?				7b		Х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the yea						
а	The governing body?	2	0	- 1	8a	x	
b	Each committee with authority to act on behalf of the governing body?			· -	8b	x	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be read			" F			
-	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 Re	vonuo	Code)				
		venue				Yes	No
10a	Did the organization have local chapters, branches, or affiliates?			Г	10a		X
	If "Yes," did the organization have written policies and procedures governing the activities of such ch			F			
		•	,		10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body			··· -	11a	х	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.		ie innig the ieliti		110		
	Did the organization have a written conflict of interest policy? <i>If "No," go to line 13</i>			- 1	12a	x	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise				12b	x	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? $If "Y$			··· -			
Ū	in Schedule O how this was done	,			12c		х
13	Did the organization have a written whistleblower policy?			· F	13	x	
14	Did the organization have a written document retention and destruction policy?			Г	14	X	
15	Did the process for determining compensation of the following persons include a review and approva			·			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		aoponaon	- 1			
а	The organization's CEO, Executive Director, or top management official			- E	15a		Х
h	Other officers or key employees of the organization				15b		X
~	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 arrangen	nent w	vith a				
100	taxable entity during the year?			- E	16a		Х
h	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluat			· F	100		
2	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organ	-	-				
	exempt status with respect to such arrangements?			- 1	16b		
Sec	tion C. Disclosure				10.0		
17	List the states with which a copy of this Form 990 is required to be filed \blacktriangleright GA , CA						
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, ar	nd 990)-T (Section 501(c))(3)s	onlv)	availał	ole
	for public inspection. Indicate how you made these available. Check all that apply.		(======================================	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
	Own website Another's website X Upon request Other (explain	on S	chedule ()				
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, co		,	and f	inanc	ial	
	statements available to the public during the tax year.		e. meereer poney,				
20	State the name, address, and telephone number of the person who possesses the organization's boo	oks an	d records				
_•	JOSH RIFKIND - 404-541-9231						
	145 NASSAU ST NW, SUITE B, ATLANTA, GA 30303						

SONGS	FOR	KIDS	FOUNDATION	INC	

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.

Form 990 (2019)

• 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.

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

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

(A)	(B)			((Doo	C) ition			(D)	(E)	(F)
Name and title	Average hours per week	box offi	not c , unle: cer ar	heck	more	than o	one n an tee)	Reportable compensation from	Reportable compensation from related	Estimated amount of other
	(list any hours for related organizations below line)	Individual trustee or director	In stitutional trustee	Officer	Key em ployee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) RYAN RADDING	1.00									
BOARD MEMBER		х						0.	0.	0.
(2) JOSH RIFKIND	40.00									
PRESIDENT				Х				60,000.	0.	6,171.
(3) JUSTIN KERENYI SECRETARY	7.00			x				0.	0.	0.
(4) SANJAY KOTHARI	15.00									
TREASURER				x				0.	0.	0.
		-								
		-								
	1	1				1	l			

	ONGS FOR	R KIDS F	UO	ND	AT	IO	N	IN	1C	61-1	5161	L32	P	age 8
	Directors, Trus	tees, Key Emp (B)	oloy I	ees,			ghes	t C	ompensated Employee	, ,	— T			
(A) Name and title					(C) Position do not check more than one ox, unless person is both an officer and a director/trustee)				(D) Reportable compensation from	(E) Reportable compensation from related		(F) Estimated amount of other		
		(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organization (W-2/1099-MIS		fr orga and	pensa om th anizat d relat nizati	e ion ed
			-											
			-											
			-											
1b Subtotal c Total from continuation sh	eets to Part VI	I, Section A		I 			 		60,000.		0.		-	71. 0.
d Total (add lines 1b and 1c)									60,000.		0.	(5,1	71.
2 Total number of individuals (compensation from the orga	•	ot limited to th	ose	liste	dab	ove) wh	o re	eceived more than \$100,	000 of reportable	;			0
3 Did the organization list any	former officer	director trust	ee k	ev e	emol	ove	e or	hia	best compensated emp	lovee on	ſ		Yes	No
line 1a? If "Yes," complete S	chedule J for s	uch individual								•	[3		х
4 For any individual listed on li and related organizations groups												4		Х
5 Did any person listed on line	1a receive or a	iccrue compen	Isati	on fr	rom	any	unre	elate	ed organization or individ	dual for services		-		
rendered to the organization Section B. Independent Contract		plete Schedule	e J fe	or sı	ich r	oers	on .	<u></u>			<u></u>	5		Х
1 Complete this table for your		mpensated ind	lepe	ndei	nt co	ontra	actor	rs th	nat received more than \$	6100,000 of comp	oensat	ion fro	m	
the organization. Report con	npensation for t (A) e and business			ndir DNE		<u>ith c</u>	or wi	thin	n the organization's tax y (B) Description of s			(C omper		
			140		-									
2 Total number of independen \$100.000 of compensation f		•	ot lin	niteo	d to f	thos C		ted	above) who received me	ore than				

				S FOUNDAI	ION INC		61-1516	132 Page 9
Pa	rt VI							_
		Check if Schedule O contain	ns a response o	or note to any line I	e in this Part VIII (A)	(B)	(C)	[]
					Total revenue	Related or exempt	Unrelated	Revenue excluded
						function revenue	business revenue	from tax under sections 512 - 514
s s	1 a	Federated campaigns	1a					
ant	b							
ng,	c			63,525.				
ifts ar A	d	Related organizations						
s, G milå	е	Government grants (contribution						
Contributions, Gifts, Grants and Other Similar Amounts	f	All other contributions, gifts, grants	, and					
ibut		similar amounts not included above	: 1f	<u>256,196.</u>				
d O	g	Noncash contributions included in lines 1a	-1f 1g \$	25,190.				
an Co	h	Total. Add lines 1a-1f			319,721.			
				Business Code				
ice	2 a	l						
ervi	b							
n S /eni	С							
Program Service Revenue	d							
roç	e	All other program service reven						
-	f							
	3	Investment income (including di						
	Ŭ	other similar amounts)			277.			277.
	4	Income from investment of tax-						
	5	Royalties		Г				
			(i) Real	(ii) Personal				
	6 a	Gross rents 6a						
	b	Less: rental expenses 6b						
	с	Rental income or (loss)						
	d	Net rental income or (loss)						
	7 a	Gross amount from sales of	(i) Securities	(ii) Other				
			56,998.					
•	b	Less: cost or other basis						
svenue			50,471. 6,527.					
eve		. ,			6,527.			6,527.
er Re		Net gain or (loss) Gross income from fundraising even			0,527.			0,527.
Other	0 4	including \$63,52	· ·					
0		contributions reported on line 1						
		Part IV, line 18		75,757.				
	b	Less: direct expenses						
		Net income or (loss) from fundra		►	70,327.			70,327.
	9 a	Gross income from gaming activ	vities. See					
		Part IV, line 19						
	b	Less: direct expenses						
		Net income or (loss) from gamin	-	▶				
	10 a	Gross sales of inventory, less re						
		and allowances						
		Less: cost of goods sold		· · · · · · · · · · · · · · · · · · ·				
	C	Net income or (loss) from sales	or inventory					
sn	44 -			Business Code				
Miscellaneous Revenue	11 a b							
ellar Ven	u c							
isce Be	н П	All other revenue						
Σ	e	Total. Add lines 11a-11d						
	12	Total revenue. See instructions			396,852.	0.	0.	77,131.

 Form 990 (2019)
 SONGS
 FOR
 KIDS
 FOUNDATION
 INC

 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).

	Check if Schedule O contains a response			, , , , , , , , , , , , , , , , , , , ,	
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic individuals. See Part IV, line 22				
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	60,000.	51,000.	9,000.	
6	Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	100.074		15 011	
7	Other salaries and wages	100,074.	85,063.	15,011.	
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9	Other employee benefits	10.040	10 110	1 000	
10	Payroll taxes	12,246.	10,410.	1,836.	
11	Fees for services (nonemployees):				
a		1,785.	1,517.	268.	
		6,482.	5,510.	972.	
	Accounting	0,402.	5,510.	572.	
d	Lobbying Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
	Other. (If line 11g amount exceeds 10% of line 25,				
	column (A) amount, list line 11g expenses on Sch O.)	6,328.	5,379.	949.	
12	Advertising and promotion	6,047.	6,047.		
13	Office expenses	15,688.	13,334.	2,354.	
14	Information technology	14,268.	12,128.	2,140.	
15	Royalties				
16	Occupancy	54,685.	54,685.		
17	Travel	6,013.	6,013.		
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	2 570	2 570		
22	Depreciation, depletion, and amortization	3,579. 12,379.	3,579. 10,522.	1,857.	
23 24	Insurance	14,313.	10,344.	1,057.	
24	above (List miscellaneous expenses not covered line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.)				
a	ACTIVITY EXPENSE	43,299.	43,299.		
b					
C d					
d					
е 25	All other expenses	342,873.	308,486.	34,387.	0.
<u>25</u> 26	Joint costs. Complete this line only if the organization	512,0,5•			
20	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here Time if following SOP 98-2 (ASC 958-720)				

SONGS FOR KIDS FOUNDATION IN	IC
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		Check if Schedule O contains a response or not	e to any	line in this Part X					
					(A) Beginning of year		(B) End of year		
	1	Cash - non-interest-bearing			196,072.	1	282,863.		
	2	Savings and temporary cash investments				2	40.		
	3		Pledges and grants receivable, net						
	4	Accounts receivable, net			4				
	5	Loans and other receivables from any current or							
		trustee, key employee, creator or founder, subst							
		controlled entity or family member of any of thes	ns		5				
	6	Loans and other receivables from other disqualit	ons (as defined						
		under section 4958(f)(1)), and persons described	on 4958(c)(3)(B)		6				
s	7	Notes and loans receivable, net				7			
Assets	8	Inventories for sale or use				8			
As	9					9			
	10a	Land, buildings, and equipment: cost or other							
		basis. Complete Part VI of Schedule D	10a	166,604. 27,628.					
	b	Less: accumulated depreciation	10b	27,628.	142,555.	10c	138,976.		
	11	Investments - publicly traded securities	25,281.	11					
	12	Investments - other securities. See Part IV, line 1				12			
	13	Investments - program-related. See Part IV, line	11			13			
	14	Intangible assets				14			
	15	Other assets. See Part IV, line 11				15			
	16	Total assets. Add lines 1 through 15 (must equa	al line 33	3)	363,908.	16	421,879.		
	17	Accounts payable and accrued expenses		17					
	18	Grants payable				18			
	19	Deferred revenue				19			
	20	Tax-exempt bond liabilities				20			
	21	Escrow or custodial account liability. Complete I	Part IV o	f Schedule D		21			
Se	22	Loans and other payables to any current or form	er office	r, director,					
Liabilities		trustee, key employee, creator or founder, subst	ontributor, or 35%						
iabi		controlled entity or family member of any of thes			22				
	23	Secured mortgages and notes payable to unrela				23			
	24	Unsecured notes and loans payable to unrelated	d third pa	arties		24			
	25	Other liabilities (including federal income tax, pa							
		parties, and other liabilities not included on lines	17-24).	Complete Part X	F 441		0 004		
		of Schedule D		·····	5,441.	25	9,394.		
	26				5,441.	26	9,394.		
s		Organizations that follow FASB ASC 958, che	ck here						
JCe		and complete lines 27, 28, 32, and 33.			250 467		410 405		
alar	27	Net assets without donor restrictions			358,467.	27	412,485.		
ЧВ	28		· · · · · · · · · · · · · · · · · · ·		28				
nn		Organizations that do not follow FASB ASC 9	58, chec	ck here ▶ 🛄					
ЪГF		and complete lines 29 through 33.							
ts e	29	Capital stock or trust principal, or current funds				29			
SSe	30	Paid-in or capital surplus, or land, building, or ec				30			
Net Assets or Fund Balances	31	Retained earnings, endowment, accumulated in			250 167	31	110 AOF		
Ř	32	Total net assets or fund balances			358,467.	32	412,485.		
	33	Total liabilities and net assets/fund balances			363,908.	33	421,879.		

Form 990 (2019)

Form 990 (
Part X	Balance Sheet

	90 (2019) SONGS FOR KIDS FOUNDATION INC	61-151	6132	Page	_e 12
Part	XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI			[
1 T	Fotal revenue (must equal Part VIII, column (A), line 12)	1	396		
2 T	Fotal expenses (must equal Part IX, column (A), line 25)	2	342	-	
3 F	Revenue less expenses. Subtract line 2 from line 1	3		<u>,97</u>	
4 N	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	358	,46	7.
5 N	Net unrealized gains (losses) on investments	5			
6 D	Donated services and use of facilities	6			
7 lı	nvestment expenses	7			
8 F	Prior period adjustments	8			9.
9 (Other changes in net assets or fund balances (explain on Schedule O)	9			0.
10 N	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,				
	column (B))	10	412	,48	5.
Part	XII Financial Statements and Reporting			_	
	Check if Schedule O contains a response or note to any line in this Part XII			<u>l</u>	
			`	Yes	No
1 A	Accounting method used to prepare the Form 990: Lash X Accrual Dther				
lt	f the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	0.			
2a V	Nere the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
lt	f "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a			
s	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
ьV	Nere the organization's financial statements audited by an independent accountant?		2 b		X
lt	f "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	basis,			
c	consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
	f "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the				
r	eview, or compilation of its financial statements and selection of an independent accountant?		2c		
	f the organization changed either its oversight process or selection process during the tax year, explain on Sch				
3a A	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sin	gle Audit			
	Act and OMB Circular A-133?		3a	-+	X
b If	f "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requi	red audit			
0	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b		

Form **990** (2019)

SCHEDULE A	١
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(Form	990	or	990-EZ)
	550		550 LZ

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section

4947(a)(1) nonexempt charitable trust.

OMB No. 1545-0047
2019
Open to Public Inspection

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		of the Treasury nue Service			Attach to Form 990 or F //Form990 for instruction			formation		Open to Public Inspection
Nam	e of t	the organizati	-			Jis anu u	ie ialest ii	normation.	Employer	identification number
Itali				S FOR KIDS	FOUNDATION	INC				1-1516132
Pa	rt I	Reason			All organizations must co		is part.) Se	e instructions		1 1910192
					For lines 1 through 12, c					
1					on of churches described			()(A)(i)		
2	H				Attach Schedule E (Forn			•,\~,\')•		
3					anization described in s			ii)		
4		•	•		njunction with a hospital			•	Viii) Entor	the hospital's name
4		city, and stat	+		njunetion with a nospital	ucsenbec	ant Sectio			the hospital s hame,
5		•		or the benefit of a col	llege or university owned	l or operat		vernmentalu	nit describe	ad in
5		-	-	Complete Part II.)		or operat	.cu by u ge	voninontara		
6					nental unit described in	section 1	70(h)(1)(A)	(v)		
	X			-	ntial part of its support fi				no gonoral i	public described in
'		-		omplete Part II.)	Intial part of its support in	on a gov	erninentai		le general j	
8					(1)(A)(vi). (Complete Par	+ 11 \				
9	\square	-			in section 170(b)(1)(A)(-	ed in coniu	inction with a	land-grant	college
5		-	-	-	ulture (see instructions).		-		-	-
		university:		grant conege of agric			name, ory	, and state of	the college	
10			on that norma	Illy receives: (1) more	than 33 1/3% of its sup	oort from (contributio	ns members	nin fees an	d aross receipts from
10		-		•	ct to certain exceptions,				-	-
				-	(less section 511 tax) fro					-
				mplete Part III.)			0000 0000		Janization	
11				• •	ively to test for public sa	fetv See	section 50)9(a)(4).		
12	\square	-	-	-	ively for the benefit of, to	•			rry out the	purposes of one or
		-	-	-	d in section 509(a)(1) o	-			-	
					f supporting organization					
а		-	•	• •	upervised, or controlled		-		-	aivina
				-	gularly appoint or elect a	•				
			-	complete Part IV, Se						1-
b		¬ -		-	or controlled in connect	tion with it	s supporte	ed organizatio	n(s), by hay	vina
				-	anization vested in the s			-		-
			-	t complete Part IV,		•			5	
с		¬ ~	. ,	•	g organization operated	in connec	tion with, a	and functional	ly integrate	d with,
			-). You must complete l				, 0	,
d		Type III no	n-functionally	/ integrated. A supp	oorting organization oper	ated in co	nnection v	vith its suppor	ted organiz	zation(s)
			-		ation generally must sat				-	
			-	• •	nplete Part IV, Sections	•				
е		Check this	box if the orga	anization received a v	written determination fro	m the IRS	that it is a	Туре I, Туре	II, Type III	
		functionally	/ integrated, or	r Type III non-function	nally integrated supporti	ng organiz	ation.			
f	Ente	er the number	of supported of	organizations						
g	Prov	vide the follow	ing informatior	about the supporte	d organization(s).					
	((i) Name of supp		(ii) EIN	(iii) Type of organization (described on lines 1-10	(IV) Is the org in your govern	anization listed ing document?	(v) Amount o	-	(vi) Amount of other
		organizatior	1		above (see instructions))	Yes	No	support (see ir	nstructions)	support (see instructions)

Schedule A (Form 990 or 990-EZ) 2019 SONGS FOR KIDS FOUNDATION INC Part II

61-1516132 Page 2

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) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	164,480.	217,538.	175,306.	314,848.	294,531.	1166703.
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	164,480.	217,538.	175,306.	314,848.	294,531.	1166703.
	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)						115,435.
6	Public support. Subtract line 5 from line 4.						1051268.
	tion B. Total Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
	Amounts from line 4	164,480.	217,538.	175,306.	314,848.	294,531.	1166703.
	Gross income from interest,		-	-	-	-	
_	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources					6,804.	6,804.
9	Net income from unrelated business						
•	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
10	or loss from the sale of capital						
	assets (Explain in Part VI.)	1,450.	2,263.				3,713.
11	Total support. Add lines 7 through 10						1177220.
12	Gross receipts from related activities,	etc. (see instructio	ne)			12	446,431.
	First five years. If the Form 990 is for		,	h fourth or fifth ta			110/1011
.0	organization, check this box and stop	-			•		
Sec	ction C. Computation of Publi						
14	Public support percentage for 2019 (li	ne 6, column (f) div	vided by line 11. co	olumn (f))		14	89.30 %
15	Public support percentage from 2018					15	90.89 %
	33 1/3% support test - 2019. If the c					· · ·	
	stop here. The organization qualifies						
b	33 1/3% support test - 2018. If the c		-				
	and stop here. The organization quali						
17a	10% -facts-and-circumstances test						
	and if the organization meets the "fac	-					
	meets the "facts-and-circumstances"			-	•	•	. —
h	10% -facts-and-circumstances test	-					
	more, and if the organization meets th	•					
	organization meets the "facts-and-circ						
18	Private foundation. If the organizatio						
-10				, 100, 170, 01 170	, shook this box a		🚩 📖

Schedule A (Form 990 or 990-EZ) 2019

Schedule A (Form 990 or 990-EZ) 2019 SONGS FOR KIDS FOUNDATION INC Part III Support Schedule for Organizations Described in Section 509(a)(2)

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

Se	ction A. Public Support	<u></u>					
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	9 (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						
Ł	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						
	Public support. (Subtract line 7c from line 6.)						
	ction B. Total Support		•	•			
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	9 (f) Total
9	Amounts from line 6						
10a	a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
k	Unrelated business taxable income						
	(less section 511 taxes) from businesses acquired after June 30, 1975						
	Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
	Total support. (Add lines 9, 10c, 11, and 12.)	L				<u> </u>	<u> </u>
14	First five years. If the Form 990 is fo	-			-		
Se	check this box and stop here ction C. Computation of Publi						▶∟
	Public support percentage for 2019 (column (f))		15	%
	Public support percentage from 2018		-			16	%
	ction D. Computation of Invest						
	Investment income percentage for 20			ne 13. column (f))		17	%
18	Investment income percentage from					18	%
	a 33 1/3% support tests - 2019. If the					· · · · · · · · · · · · · · · · · · ·	
	more than 33 1/3%, check this box a						
k	33 1/3% support tests - 2018. If the						
	line 18 is not more than 33 1/3%, che						
20	Private foundation. If the organization	on did not check a	box on line 14, 19	a, or 19b, check th	his box and see ins	tructions	

Schedule A (Form 990 or 990-EZ) 2019

Schedule A (Form 990 or 990-EZ) 2019 SONGS FOR KIDS FOUNDATION INC

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.)

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 (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.
- 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 12a or 12b in Part I, answer (b) and (c) 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 (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).
- **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 or 990-EZ).
- 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).*
- **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 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.**
- c 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.**
- **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.*
 - **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.)

3b 3c 4a 4b 4c 5a 5b 5c 6 7 8 9a 9b 9c 10a 10b

1

2

3a

Yes

No

Schedule A (Form 990 or 990-EZ) 2019 SONGS FOR KIDS FOUNDATION INC 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)			
	below, the governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11b		
с	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.	11c		
Sec	tion B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to			
	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			
	controlled the organization's activities. If the organization had more than one supported organization,			
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported	1		
0	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.			
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,	-		
<u></u>	supervised, or controlled the supporting organization.	2		
Sec	tion 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		
Sec	tion D. All Type III Supporting Organizations			
			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			
	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			
		3		
Sec	supported organizations played in this regard. tion E. Type III Functionally Integrated Supporting Organizations	3		I
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions)	•		
a	The organization satisfied the Activities Test. <i>Complete</i> line 2 <i>below.</i>			
b	The organization is the parent of each of its supported organizations. <i>Complete</i> line 3 <i>below.</i>			
c	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see inst	ructions)		
2	Activities Test. Answer (a) and (b) below.		Yes	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			
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the			
	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 "Yes," describe in Part VI the role played by the organization in this regard.	3b		
			•	•

Schedule A (Form 990 or 990-EZ) 2019

ection 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		
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		
ection 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		
7 Check here if the current year is the organization's first as a non-functiona	Illy integrate	d Type III supporting orga	inization (see
instructions).			
		Schedule A	(Form 990 or 990-EZ

Schedule A (Form 990 or 990-EZ) 2019 SONGS FOR KIDS FOUNDATION INC

1

1

2

5

6

Section A - Adjusted Net Income

4 Add lines 1 through 3.

Net short-term capital gain

Depreciation and depletion

7 Other expenses (see instructions)

Recoveries of prior-year distributions

Portion of operating expenses paid or incurred for production or

collection of gross income or for management, conservation, or

8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)

maintenance of property held for production of income (see instructions)

3 Other gross income (see instructions)

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

61-1516132 Page 6

(B) Current Year

(optional)

(A) Prior Year

Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI). See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

1

2

3 4

5

6 7

8

Schedule A (Form 990 or 990 EZ) 2019 SONGS FOR KIDS FOUNDATION INC

Par	t V Type III Non-Functionally Integrated 509(a)(3) Supporting Orga	nizations (continued)	
Sect	on D - Distributions			Current Year
_1	Amounts paid to supported organizations to accomplish exer	npt purposes		
2	Amounts paid to perform activity that directly furthers exempt	t purposes of supported		
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purpose	s of supported organizations	8	
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 which the	e organization is responsive		
	(provide details in Part VI). See instructions.			
9	Distributable amount for 2019 from Section C, line 6			
10	Line 8 amount divided by line 9 amount		1	
Sect	on E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2019	(iii) Distributable Amount for 2019
_1	Distributable amount for 2019 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2019 (reason-			
	able cause required- explain in Part VI). See instructions.			
3	Excess distributions carryover, if any, to 2019			
a	From 2014			
b	From 2015			
C	From 2016			
d	From 2017			
e	From 2018			
f	Total of lines 3a through e			
g	Applied to underdistributions of prior years			
<u>h</u>	Applied to 2019 distributable amount			
i	Carryover from 2014 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2019 from Section D,			
	line 7: \$			
<u>a</u>	Applied to underdistributions of prior years			
b	Applied to 2019 distributable amount			
C	Remainder. Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2019, 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 2019. Subtract lines 3h			
	and 4b from line 1. For result greater than zero, explain in			
	Part VI. See instructions.			
7	Excess distributions carryover to 2020. Add lines 3j			
	and 4c.			
8	Breakdown of line 7:			
<u>a</u>	Excess from 2015			
b	Excess from 2016			
C	Excess from 2017			
d	Excess from 2018			
e	Excess from 2019			

Schedule A (Form 990 or 990-EZ) 2019

Schedule A	(Form 990 or 990-EZ) 2019 SONGS FOR	KIDS FOU	JNDATION	INC	61-1516132 F	- age 8
Part VI	Supplemental Information. Provide the Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5 line 1; Part IV, Section D, lines 2 and 3; Part IV, Section D, lines 5, 6, and 8; and Part V, Section (See instructions.)	ne explanations i a, 6, 9a, 9b, 9c, ⁻ /, Section E, line	required by Part 11a, 11b, and 11 s 1c, 2a, 2b, 3a,	II, line 10; Part II, line 17a c; Part IV, Section B, lines and 3b; Part V, line 1; Par	t V, Section B, line 1e; Part	;, V,

Schedule B

(Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service

Name of the organization

** PUBLIC DISCLOSURE COPY **

Schedule of Contributors

Attach to Form 990, Form 990-EZ, or Form 990-PF.
 Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2019

Employer identification number

SONGS	FOR	KIDS	FOUNDATION	INC
Organization type (check one):				

61-1516132

Filers of:	Section:
Form 990 or 990-EZ	X 501(c)(3) (enter number) organization
	4947(a)(1) nonexempt charitable trust not treated as a private foundation
	527 political organization
Form 990-PF	501(c)(3) exempt private foundation
	4947(a)(1) nonexempt charitable trust treated as a private foundation
	501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**. **Note:** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

X For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year for an *exclusively* set is contributions totaling \$5,000 or more during the year for an *exclusively* set is contributions totaling \$5,000 or more during the year for an *exclusively* set is contributions totaling \$5,000 or more during the year for an *exclusively* set is contributions totaling \$5,000 or more during the year for an *exclusively* set is contributions.

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

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

Schedule B (Form 990, 990-EZ, or 990-PF) (2019)

Name of organization

Employer identification number

61-1516132

SONGS FOR KIDS FOUNDATION INC

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed. (0) (2) (h) Т

(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
1		\$ <u>25,000.</u>	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
2		\$ <u>7,500.</u>	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3		\$ <u>25,190.</u>	Person Payroll Noncash X (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4_		\$ <u>10,000.</u>	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5		\$29,140.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
6		\$7,500.	Person X Payroll Noncash (Complete Part II for noncash contributions.)

Name of organization

Employer identification number

61-1516132

SONGS FOR KIDS FOUNDATION INC

Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

art II	NONCASH Property (see instructions). Use duplicate copies of Pai	rt II if additional space is needed.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
3	272 SHARES OF TOTAL SYS SVCS INC		02/21/10
(a) No.	(b)	\$25,190. (c)	<u>03/31/19</u> (d)
from Part I	Description of noncash property given	FMV (or estimate) (See instructions.)	Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	

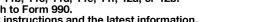
Page 4

	rganization			Employer identification number
SONGS	FOR KIDS FOUNDATION INC	r		61-1516132
Part III	Exclusively religious, charitable, etc., contributi from any one contributor. Complete columns (a) completing Part III, enter the total of exclusively religious, Use duplicate copies of Part III if additional	ons to organizations described in through (e) and the following line charitable, etc., contributions of \$1,000	entry. For organizations	hat total more than \$1,000 for the year
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Desc	cription of how gift is held
		(e) Transfer of g	gift	
	Transferee's name, address, a	nd ZIP + 4	Relationship of tra	nsferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Desc	cription of how gift is held
		(e) Transfer of g	gift	
	Transferee's name, address, ar	nd ZIP + 4	Relationship of tra	nsferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Desc	cription of how gift is held
-		(e) Transfer of g	gift	
-	Transferee's name, address, a	nd ZIP + 4	Relationship of tra	nsferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Desc	cription of how gift is held
-		(e) Transfer of g	l gift	
·	Transferee's name, address, a	nd ZIP + 4	Relationship of tra	nsferor to transferee

|--|

90)
90)

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

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number 61-1516132

	SONGS FOR KIDS FOUND		61-1516132
Pa	t I Organizations Maintaining Donor Advised F	unds 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 writi	ng that the assets held in donor advised	funds
	are the organization's property, subject to the organization's excl	lusive legal control?	Yes 🗌 No
6	Did the organization inform all grantees, donors, and donor advis	ors in writing that grant funds can be use	ed only
	for charitable purposes and not for the benefit of the donor or do	nor advisor, or for any other purpose cor	nferring
	impermissible private benefit?		
Pa	t II Conservation Easements. Complete if the organi	zation answered "Yes" on Form 990, Par	t IV, line 7.
1	Purpose(s) of conservation easements held by the organization (check all that apply).	
	Preservation of land for public use (for example, recreation	or education) Preservation of a	historically important land area
	Protection of natural habitat	Preservation of a	certified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualified	conservation contribution in the form of a	a 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			
С	Number of conservation easements on a certified historic structu	ire included in (a)	2c
d	Number of conservation easements included in (c) acquired after		
	listed in the National Register		2d
3	Number of conservation easements modified, transferred, release	ed, extinguished, or terminated by the or	ganization during the tax
	year ▶		
4	Number of states where property subject to conservation easeme		
5	Does the organization have a written policy regarding the periodi		
	violations, and enforcement of the conservation easements it hol		
6	Staff and volunteer hours devoted to monitoring, inspecting, han	dling of violations, and enforcing conserv	ation easements during the year
_	▶		
7	Amount of expenses incurred in monitoring, inspecting, handling	of violations, and enforcing conservation	n easements during the year
•			
8	Does each conservation easement reported on line 2(d) above sa		
•	and section 170(h)(4)(B)(ii)?		
9	In Part XIII, describe how the organization reports conservation e balance sheet, and include, if applicable, the text of the footnote	•	
		to the organization's infancial statement	s that describes the
Pa	organization's accounting for conservation easements. t III Organizations Maintaining Collections of Ar	t. Historical Treasures. or Othe	er Similar Assets.
	Complete if the organization answered "Yes" on Form 990	•	
1a	If the organization elected, as permitted under FASB ASC 958, n		balance sheet works
14	of art, historical treasures, or other similar assets held for public e	•	
	service, provide in Part XIII the text of the footnote to its financial	, ,	
b	If the organization elected, as permitted under FASB ASC 958, to		ance sheet works of
	art, historical treasures, or other similar assets held for public exh	•	
	provide the following amounts relating to these items:		
	(i) Revenue included on Form 990, Part VIII, line 1		▶ \$
2	If the organization received or held works of art, historical treasur		
	the following amounts required to be reported under FASB ASC		
а	Revenue included on Form 990, Part VIII, line 1	-	▶ \$
	Assets included in Form 990, Part X		

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Schedule I	D (Form	990)	2019

Sche		OR KIDS FO								Page 2
Par	t III Organizations Maintaining C	ollections of A	rt, Histo	orical Tre	easures, o	r Other	Simila	r Assets	(continu	ied)
3	Using the organization's acquisition, accession	on, and other record	ds, check	any of the f	following that	t make sig	nificant ι	use of its		
	collection items (check all that apply):									
а	Public exhibition		d 🗌	Loan or exc	hange progra	am				
b	Scholarly research		e 🗌	Other						
с	Preservation for future generations									
4	Provide a description of the organization's co	ollections and explai	n how th	ey further th	ne organizatio	on's exem	pt purpos	se in Part	XIII.	
5	During the year, did the organization solicit o	r receive donations	of art, his	storical treas	sures, or othe	er similar a	assets		_	
	to be sold to raise funds rather than to be ma								Yes	No
Par	t IV Escrow and Custodial Arrang		lete if the	organizatio	n answered	"Yes" on I	Form 990	, Part IV,	ine 9, or	
	reported an amount on Form 990, Pa	rt X, line 21.								
1a	Is the organization an agent, trustee, custodi	an or other intermed	diary for o	contribution	s or other as	sets not ir	ncluded		_	
	on Form 990, Part X?							L	Yes	No
b	If "Yes," explain the arrangement in Part XIII	and complete the fo	llowing t	able:						
									Amount	
	Beginning balance									
	Additions during the year									
е	Distributions during the year									
f	Ending balance						1 f		7	
	Did the organization include an amount on Fe						y?	L	Yes	
Par	If "Yes," explain the arrangement in Part XIII.						<u></u>			
I ai	t V Endowment Funds. Complete i								(-) [
4.	Desiration of seven had a seven	(a) Current year	(b) ⊦	rior year	(c) Two yea	rs dack (a) Three y	ears dack	(e) Four y	ears dack
18	Beginning of year balance									
D										
C L	Net investment earnings, gains, and losses									
a	Grants or scholarships									
е	Other expenditures for facilities									
	and programs									
1	Administrative expenses									
g	End of year balance Provide the estimated percentage of the curr) hold oo:					
2	Board designated or quasi-endowment	•	e (inte Tç %	j, column (a)	j) field as.					
a h	Permanent endowment		70							
0		⁷⁰								
C	The percentages on lines 2a, 2b, and 2c sho	.^ =								
30	Are there endowment funds not in the posse		ation tha	t are held ar	nd administer	red for the	organiza	ation		
Ja	by:	SSIGH OF THE OFGATIZ	ation tha	t ale neiù al			organiza			res No
	(i) Unrelated organizations								3a(i)	
	(ii) Related organizations								3a(ii)	<u> </u>
b	If "Yes" on line 3a(ii), are the related organiza	tions listed as requi	red on S	chedule R?					3b	
4	Describe in Part XIII the intended uses of the									
Par	t VI Land, Buildings, and Equipm									
	Complete if the organization answere	d "Yes" on Form 99	0, Part IV	, line 11a. S	ee Form 990	, Part X, li	ine 10.			
	Description of property	(a) Cost or			or other		cumulate	ed	(d) Book	value
		basis (invest		• •	(other)	. ,	reciation		()	
1a	Land									
	Buildings			14	3,151.		4,1	75.	138	,976.
	Leasehold improvements									
	Equipment			2	3,453.		23,4	53.		0.
	Other									
Tota	. Add lines 1a through 1e. (Column (d) must e	qual Form 990, Part	X. colun	nn (B), line 1	0c.)				138	,976.

Schedule D (Form 990) 2019

Schedule D (F	orm 990) 2	019 S (ONGS F	FOR	KIDS	FOUNDATION	INC
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Part VII Investments - Other Securities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: 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, col. (B) line 12.)		

Part VIII Investments - Program Related.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ►		

Part IX Other Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (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 IV, line 11e or 11f. See Form 990, Part X, I	ine 25.
1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) PAYROLL TAX LIABILITY - FEDERAL	3,608.
(3) PAYROLL TAX LIABILITY - STATE	739.
(4) OTHER LIABILITY - CAPITAL ONE	
(5) SPARK	5,047.
(6)	
(7)	
(8)	

Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII

9,394.

(9)

Sche	dule D (Form 990) 2019 SONGS FOR KIDS FOUNDATION I	NC	61-1516132 Page 4
Par	t XI Reconciliation of Revenue per Audited Financial Statemen	ts With Revenue per Re	eturn.
	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		
с	Recoveries of prior year grants		
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	
с	Add lines 4a and 4b		4c
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		5
Pa	t XII Reconciliation of Expenses per Audited Financial Stateme	nts With Expenses per	Return.
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.		
1	Total expenses and losses per audited financial statements		1
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
а	Donated services and use of facilities	2a	_
b	Prior year adjustments	2b	_
С	Other losses	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 IX, line 25, 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	
с	Add lines 4a and 4b		4c
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)		5
Pa	t XIII Supplemental Information.		

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

SCHEDULE G	Suppleme	ntal Information Regarding	g Fund	Iraisi	ng or Gaming A	ctivi	ties	OMB No. 1545-0047
(Form 990 or 990-EZ)		e organization answered "Yes" o organization entered more than \$				r 19, i	or if the	2019
Department of the Treasury		Attach to Form 99						Open to Public Inspection
Internal Revenue Service Name of the organization		to www.irs.gov/Form990 for ins	truction	s and	the latest informati	on.		•
ivame of the organization				~			61-1516	ntification number
Part I Fundrais		OR KIDS FOUNDATIO						
	complete this part	Complete if the organization answ	vered "Y	es" or	n Form 990, Part IV, I	ine 17	'. Form 990-EZ	filers are not
•	· · ·	 ed funds through any of the follow	ing activ	vities (Check all that apply			
a Mail solicitat	•		•		overnment grants			
	email solicitations			0	nment grants			
c D Phone solicit	ations		al fundra					
d 📃 In-person sol	icitations			-				
2 a Did the organizatio	n have a written o	r oral agreement with any individu	al (includ	ling of	ficers, directors, trus	tees,	or	
key employees liste	ed in Form 990, Pa	art VII) or entity in connection with	professi	onal fi	undraising services?		Yes	s 🗌 No
b If "Yes," list the 10	highest paid indiv	viduals or entities (fundraisers) purs	suant to	agreei	ments under which th	ne fun	draiser is to be	9
compensated at le	ast \$5,000 by the	organization.						
(i) Name and address or entity (fund		(ii) Activity	or cor	Did raiser ustody ntrol of utions?	(iv) Gross receipts from activity	tò (o f	Amount paid r retained by) undraiser ed in col. (i)	(vi) Amount paid to (or retained by) organization
			Yes	No				
			103					
								· · · · ·
Total								
3 List all states in white or licensing.	ch the organizatio	n is registered or licensed to solici	t contrib	utions	or has been notified	it is e	exempt from re	gistration

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

Schedule G (Form 990 or 990-EZ) 2019

Schedule (G (Form 990 or 990-EZ) 2019	SONGS	FOR	KIDS	FOUNDATION	INC	

Part II 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

		of fundraising event contributions and gro	oss income on Form 990	-EZ, lines 1 and 6b. List e	vents with gross receip	ts greater than \$5,000.
			(a) Event #1	(b) Event #2	(c) Other events NONE	(d) Total events (add col. (a) through
			CONCERTS	FOODFEST		col. (c)
a)			(event type)	(event type)	(total number)	
Revenue	1	Gross receipts	110,628.	28,654.		139,282.
ш	2	Less: Contributions	63,525.			63,525.
	3	Gross income (line 1 minus line 2)	47,103.	28,654.		75,757.
	4	Cash prizes				
	5	Noncash prizes				
Direct Expenses	6	Rent/facility costs				
Direct E	7	Food and beverages				
	8	Entertainment				
	9	Other direct expenses				5,430.
	10	Direct expense summary. Add lines 4 through	n 9 in column (d)			5,430.
	11	1				70,327.
Pa	rt I		answered "Yes" on Form	1990, Part IV, line 19, or r	eported more than	
		\$15,000 on Form 990-EZ, line 6a.	1	· · · · · · · · · · · · · · · · · · ·		
Revenue			(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
Re	1	Gross revenue				
s	2	Cash prizes				
Direct Expenses	3	Noncash prizes				
Direct E	4	Rent/facility costs				
_	5	Other direct expenses				
	6	Volunteer labor	Yes %	Yes %	└── Yes % └── No	
	7	Direct expense summary. Add lines 2 through	n 5 in column (d)		►	
	~		from the other of the state		•	
	8	Net gaming income summary. Subtract line 7	trom line 1, column (d)		••••••••••••••••••••••••••••••••••••••	<u> </u>
		ter the state(s) in which the organization condu				
		the organization licensed to conduct gaming an No," explain:				Yes No
		ere any of the organization's gaming licenses re Yes," explain:			ear?	Yes No
	_					

Schedule G (Form 990 or 990-EZ) 2019

Sch	hedule G (Form 990 or 990-EZ) 2019 SONGS FOR KIDS FOUNDATION INC 61-1	L516132	2 Page 3
11	Does the organization conduct gaming activities with nonmembers?	Yes	No
	Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed	Yes	No
12	to administer charitable gaming? Indicate the percentage of gaming activity conducted in:		
		120	07
	a The organization's facility	13a	<u>%</u>
	• An outside facility	13b	%
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records:		
	Name		
	Address		
15a	a Does the organization have a contract with a third party from whom the organization receives gaming revenue?	🗌 Yes	No No
ł	o If "Yes," enter the amount of gaming revenue received by the organization > \$ and the amount		
	of gaming revenue retained by the third party \blacktriangleright \$		
C	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:		
á	a Is the organization required under state law to make charitable distributions from the gaming proceeds to		
	retain the state gaming license?	Yes	No No
ł	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 🕨 \$		
Pa	ITT IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Pa 15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.	rt III, lines 9	, 9b, 10b,
	····, ···, ···, ···, ····, ·····, ·····, ·····, ······		

SCHEDULE M (Form 990)

Noncash Contributions

OMB No. 1545-0047 2019

Open to Public

. Inspection

Employer identification number

61-1516132

Department of the Treasury	
Internal Revenue Service	

Name of the organization

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

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

SONGS FOR KIDS FOUNDATION INC

Par	ιı	Types of Property							
			(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1	Method of o		•	3
1	Art -	Works of art							
2		Historical treasures							
3		Fractional interests							
4		ks and publications							
5		hing and household goods							
6		and other vehicles							
7		s and planes							
8		lectual property							
9		urities - Publicly traded	X	1	25,190	.FMV			
10		urities - Closely held stock							
11		urities - Partnership, LLC, or							
		interests							
12	Secu	urities - Miscellaneous							
13		lified conservation contribution -							
	Histo	pric structures							
14	Qua	lified conservation contribution - Other							
15	Real	estate - Residential							
16	Real	estate - Commercial							
17		estate - Other							
18		ectibles							
19		d inventory							
20		s and medical supplies							
21	Taxi	dermy							
22		orical artifacts							
23		ntific specimens							
24		eological artifacts							
25		er 🕨 ()							
26	Othe	er 🕨 ()							
27	Othe	er 🕨 ()							
28	Othe	er 🕨 ()							
29	Num	ber of Forms 8283 received by the organiz	zation during	g the tax year for co	ontributions				
	for w	which the organization completed Form 828	33, Part IV, I	Donee Acknowledg	jement 29			0	
								Yes	No
30a	Duri	ng the year, did the organization receive by	/ contributio	n any property rep	orted in Part I, lines 1 thro	ugh 28, that it			
	mus	t hold for at least three years from the date	e of the initia	l contribution, and	which isn't required to be	used for			
	exer	npt purposes for the entire holding period?	· · · · · · · · · · · · · · · · · · ·				30a		X
b	lf "Y	es," describe the arrangement in Part II.							
31	Does	s the organization have a gift acceptance p	oolicy that re	equires the review of	of any nonstandard contrib	outions?	31		Х
32a	Does	s the organization hire or use third parties o	or related or	ganizations to solid	cit, process, or sell noncas	h			
	cont	ributions?					32a		X
b	lf "Y	es," describe in Part II.							
33	If the	e organization didn't report an amount in c	olumn (c) foi	r a type of property	r for which column (a) is ch	iecked,			
	desc	ribe in Part II.							
LHA	Fo	r Paperwork Reduction Act Notice, see	the Instruct	tions for Form 990).	Schedule	M (Forn	n 990)	2019

Schedule M	(Form 990) 2019				FOUNDATIO			61-151613	
Part II	Supplemental	t I, column (t	o), the n	umber of c	e information require contributions, the n	ed by Part I, umber of ite	lines 30b, 32b, ar ms received, or a	nd 33, and whether the org combination of both. Also	anization

SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service Name of the organization Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information. ► Attach to Form 990 or 990-EZ. ► Go to www.irs.gov/Form990 for the latest information.

Employer identification number

OMB No. 1545-0047

SONGS FOR KIDS FOUNDATION INC

61-1516132

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

YEAR ROUND TO CHILDREN'S HOSPITALS AND SPECIAL NEEDS KIDS CAMPS.

FORM 990, PART VI, SECTION B, LINE 11B:

A COPY OF THE FORM 990 IS PROVIDED TO THE OFFICERS FOR REVIEW AND APPROVAL

BEFORE FILING.

FORM 990, PART VI, SECTION C, LINE 19:

THE GOVERNING DOCUMENTS AND FINANCIAL STATEMENTS ARE AVAILABLE TO THE

PUBLIC UPON REQUEST.