Form **990**

Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

▶ The organization may have to use a copy of this return to satisfy state reporting requirements.

OMB No 1545-0047

2003

Open to Public Inspection

A For the 2003 calendar year, or tax year beginning , 2003, and ending , 20

B Check if applicable: ☐ Address change ☐ Name change ☐ Initial return ☐ Final return ☐ Amended return ☐ Application pending

Please use IRS label or print or type See Specific Instructions

C Name of organization: **Kids In the Middle, Inc.**

Number and street (or P O box if mail is not delivered to street address) Room/suite: **121 West Monroe Avenue**

City or town, state or country, and ZIP + 4: **Kirkwood, Missouri 63122-5815**

D Employer identification number: 43 1192510

E Telephone number: (314) 909-9922

F Accounting method ☐ Cash ☑ Accrual ☐ Other (specify) ▶

• **Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ)**

H and I are not applicable to section 527 organizations.

H(a) Is this a group return for affiliates? ☐ Yes ☑ No

H(b) If "Yes," enter number of affiliates ▶

H(c) Are all affiliates included? ☐ Yes ☐ No (If "No," attach a list See instructions)

H(d) Is this a separate return filed by an organization covered by a group ruling? ☐ Yes ☑ No

G **Website:** ▶ **http://www.kidsinthemiddle.org**

J **Organization type** (check only one) ▶ ☑ 501(c) (3) ◀ (insert no) ☐ 4947(a)(1) or ☐ 527

I Group Exemption Number ▶

K Check here ▶ ☐ if the organization's gross receipts are normally not more than $25,000 The organization need not file a return with the IRS, but if the organization received a Form 990 Package in the mail, it should file a return without financial data **Some states require a complete return**

M Check ▶ ☐ if the organization is **not** required to attach Sch B (Form 990, 990-EZ, or 990-PF).

L Gross receipts Add lines 6b, 8b, 9b, and 10b to line 12 ▶ **696,104**

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See page 18 of the instructions.)

Revenue	1	Contributions, gifts, grants, and similar amounts received				
	a	Direct public support	1a	126,011		
	b	Indirect public support	1b	256,106		
	c	Government contributions (grants)	1c			
	d	**Total** (add lines 1a through 1c) (cash $ 381,417 noncash $ 700)			1d	382,117
	2	Program service revenue including government fees and contracts (from Part VII, line 93)			2	240,410
	3	Membership dues and assessments			3	
	4	Interest on savings and temporary cash investments			4	2,580
	5	Dividends and interest from securities			5	
	6a	Gross rents	6a			
	b	Less rental expenses	6b			
	c	Net rental income or (loss) (subtract line 6b from line 6a)			6c	
	7	Other investment income (describe ▶)			7	
	8a	Gross amount from sales of assets other than inventory — (A) Securities / (B) Other	8a			
	b	Less cost or other basis and sales expenses	8b			
	c	Gain or (loss) (attach schedule)	8c			
	d	Net gain or (loss) (combine line 8c, columns (A) and (B))			8d	
	9	Special events and activities (attach schedule). If any amount is from **gaming**, check here ▶ ☐				
	a	Gross revenue (not including $ of contributions reported on line 1a)	9a	69,809		
	b	Less direct expenses other than fundraising expenses	9b	24,012		
	c	Net income or (loss) from special events (subtract line 9b from line 9a)			9c	45,797
	10a	Gross sales of inventory, less returns and allowances	10a			
	b	Less: cost of goods sold	10b			
	c	Gross profit or (loss) from sales of inventory (attach schedule) (subtract line 10b from line 10a)			10c	
	11	Other revenue (from Part VII, line 103)			11	1,188
	12	**Total revenue** (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11)			12	672,092
Expenses	13	Program services (from line 44, column (B))			13	515,846
	14	Management and general (from line 44, column (C))			14	51,358
	15	Fundraising (from line 44, column (D))			15	6,548
	16	Payments to affiliates (attach schedule)			16	
	17	**Total expenses** (add lines 16 and 44, column (A))			17	573,752
Net Assets	18	Excess or (deficit) for the year (subtract line 17 from line 12)			18	98,340
	19	Net assets or fund balances at beginning of year (from line 73, column (A))			19	271,769
	20	Other changes in net assets or fund balances (attach explanation)			20	
	21	Net assets or fund balances at end of year (combine lines 18, 19, and 20)			21	370,109

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Part II Statement of Functional Expenses All organizations must complete column (A). Columns (B), (C), and (D) are required for section 501(c)(3) and (4) organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others (See page 22 of the instructions.)

Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I.		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22 Grants and allocations (attach schedule) (cash $ ____ noncash $ ____)	22				
23 Specific assistance to individuals (attach schedule)	23				
24 Benefits paid to or for members (attach schedule)	24				
25 Compensation of officers, directors, etc	25				
26 Other salaries and wages	26	377,599	341,298	36,301	
27 Pension plan contributions	27				
28 Other employee benefits	28	24,040	22,994	1,046	
29 Payroll taxes	29	29,131	26,393	2,738	
30 Professional fundraising fees	30				
31 Accounting fees	31	3,000	2,760	240	
32 Legal fees	32				
33 Supplies	33	2,516	782	1,734	
34 Telephone	34	3,794	3,137	657	
35 Postage and shipping	35	5,404	5,372	32	
36 Occupancy	36	60,651	57,733	2,918	
37 Equipment rental and maintenance	37	1,428	1,357	71	
38 Printing and publications	38	9,428	8,808	620	
39 Travel	39	235	235		
40 Conferences, conventions, and meetings	40	5,721	4,223	1,498	
41 Interest	41	993	585	408	
42 Depreciation, depletion, etc. (attach schedule)	42	5,574	5,574		
43 Other expenses not covered above (itemize). a	43a				
b Development Expenses	43b	6,548			6,548
c Insurance (Commercial Liabilities)	43c	6,893	6,548	345	
d Membership Dues	43d	1,820	580	1,240	
e Other Misc. Operating Expenses	43e	28,977	27,467	1,510	
44 Total functional expenses (add lines 22 through 43) *Organizations completing columns (B)-(D), carry these totals to lines 13—15*	44	573,752	515,846	51,358	6,548

Joint Costs. Check ▶ ☐ if you are following SOP 98-2.

Are any joint costs from a combined educational campaign and fundraising solicitation reported in (B) Program services? ▶ ☐ Yes ☑ No

If "Yes," enter (i) the aggregate amount of these joint costs $____; (ii) the amount allocated to Program services $____, (iii) the amount allocated to Management and general $ ____, and (iv) the amount allocated to Fundraising $

Part III Statement of Program Service Accomplishments (See page 25 of the instructions.)

What is the organization's primary exempt purpose? ▶ **Counseling children of divorced / separated families**

All organizations must describe their exempt purpose achievements in a clear and concise manner State the number of clients served, publications issued, etc. Discuss achievements that are not measurable. (Section 501(c)(3) and (4) organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others.)

	Program Service Expenses (Required for 501(c)(3) and (4) orgs, and 4947(a)(1) trusts, but optional for others)
a **Agency-Based Therapy Services: For children ages 3 to 18, the program provided 308 initial consultations, 1,200 group therapy, 656 individual counselings, and 183 family therapy, to benefit 604 children. Child questionnaires showed positive changes in emontional and behavioral areas.** (Grants and allocations $)	397,412
b **School-Base Programs: For students in grades K-12, the program offered time-limited groups to 146 students and provided Rainbows training for 55 school personnel. Teachers completed forms which showed an increase in students' positive behaviors while participating in the program.** (Grants and allocations $)	49,823
c **Court Program: 641 parents attended PTAS workshops and FOCAS sessions mandated by Family Court of St. Louis City, benefiting 1,335 children of the attendees. Parents completed evaluations and perceived the program to be beneficial to their understaning of the impacts upon their children** (Grants and allocations $)	41,201
d **Community Educaiton: For parents and professionals in the community who are coping with family changes, the program provided 25 presentations and seminars reaching about 5637 people. The program provided media presentations and website information reaching over 30,000 people.** (Grants and allocations $)	27,410
e Other program services (attach schedule) (Grants and allocations $)	
f **Total of Program Service Expenses** (should equal line 44, column (B), Program services) ▶	515,846

Part IV **Balance Sheets** (See page 25 of the instructions.)

	Line	Note: *Where required, attached schedules and amounts within the description column should be for end-of-year amounts only.*			(A) Beginning of year		(B) End of year
Assets	45	Cash—non-interest-bearing			69,776	45	29,853
	46	Savings and temporary cash investments			23,913	46	68,381
	47a	Accounts receivable	47a	21,693			
	b	Less: allowance for doubtful accounts	47b	5,000	16,277	47c	16,693
	48a	Pledges receivable	48a	256,106			
	b	Less: allowance for doubtful accounts	48b	-0-	151,933	48c	256,106
	49	Grants receivable				49	
	50	Receivables from officers, directors, trustees, and key employees (attach schedule)				50	
	51a	Other notes and loans receivable (attach schedule)	51a				
	b	Less: allowance for doubtful accounts	51b			51c	
	52	Inventories for sale or use				52	
	53	Prepaid expenses and deferred charges			1,441	53	1,284
	54	Investments—securities (attach schedule) ▶ ☐ Cost ☐ FMV				54	
	55a	Investments—land, buildings, and equipment: basis	55a				
	b	Less: accumulated depreciation (attach schedule)	55b			55c	
	56	Investments—other (attach schedule)				56	
	57a	Land, buildings, and equipment: basis	57a	63,549			
	b	Less: accumulated depreciation (attach schedule)	57b	45,819	22,321	57c	17,730
	58	Other assets (describe ▶)				58	
	59	**Total assets** (add lines 45 through 58) (must equal line 74)			285,661	59	390,047
Liabilities	60	Accounts payable and accrued expenses			9,959	60	11,401
	61	Grants payable				61	
	62	Deferred revenue				62	7,500
	63	Loans from officers, directors, trustees, and key employees (attach schedule)				63	
	64a	Tax-exempt bond liabilities (attach schedule)				64a	
	b	Mortgages and other notes payable (attach schedule)				64b	
	65	Other liabilities (describe ▶ Long-term lease payable)			3,933	65	1,037
	66	**Total liabilities** (add lines 60 through 65)			13,892	66	19,938
Net Assets or Fund Balances		**Organizations that follow SFAS 117, check here ▶** ☐ and complete lines 67 through 69 and lines 73 and 74.					
	67	Unrestricted			119,836	67	114,003
	68	Temporarily restricted			151,933	68	256,106
	69	Permanently restricted				69	
		Organizations that do not follow SFAS 117, check here ▶ ☐ and complete lines 70 through 74.					
	70	Capital stock, trust principal, or current funds				70	
	71	Paid-in or capital surplus, or land, building, and equipment fund				71	
	72	Retained earnings, endowment, accumulated income, or other funds				72	
	73	**Total net assets or fund balances** (add lines 67 through 69 **or** lines 70 through 72, column (A) **must** equal line 19; column (B) **must** equal line 21)			271,769	73	370,109
	74	**Total liabilities and net assets / fund balances** (add lines 66 and 73)			285,661	74	390,047

Form 990 is available for public inspection and, for some people, serves as the primary or sole source of information about a particular organization How the public perceives an organization in such cases may be determined by the information presented on its return Therefore, please make sure the return is complete and accurate and fully describes, in Part III, the organization's programs and accomplishments.

Part IV-A Reconciliation of Revenue per Audited Financial Statements with Revenue per Return (See page 27 of the instructions.)

a	Total revenue, gains, and other support per audited financial statements . . ▶	a	696,104
b	Amounts included on line a but not on line 12, Form 990		
	(1) Net unrealized gains on investments . . $		
	(2) Donated services and use of facilities $		
	(3) Recoveries of prior year grants . . . $		
	(4) Other (specify): Direct Special Event Expenses $ 24,012		
	Add amounts on lines (1) through (4) ▶	b	24,012
c	Line a minus line b. . . . . . ▶	c	672,092
d	Amounts included on line 12, Form 990 but not on line a:		
	(1) Investment expenses not included on line 6b, Form 990 . . . $		
	(2) Other (specify). $		
	Add amounts on lines (1) and (2) ▶	d	
e	Total revenue per line 12, Form 990 (line c plus line d) . . . . . . ▶	e	672,092

Part IV-B Reconciliation of Expenses per Audited Financial Statements with Expenses per Return

a	Total expenses and losses per audited financial statements . . ▶	a	597,764
b	Amounts included on line a but not on line 17, Form 990		
	(1) Donated services and use of facilities $		
	(2) Prior year adjustments reported on line 20, Form 990 . . . . $		
	(3) Losses reported on line 20, Form 990 . $		
	(4) Other (specify). Direct Special Event Expenses $ 24,012		
	Add amounts on lines (1) through (4) ▶	b	24,012
c	Line a minus line b . . . . . . ▶	c	573,752
d	Amounts included on line 17, Form 990 but not on line a:		
	(1) Investment expenses not included on line 6b, Form 990. . . $		
	(2) Other (specify)· $		
	Add amounts on lines (1) and (2) ▶	d	
e	Total expenses per line 17, Form 990 (line c plus line d) . . . . ▶	e	573,752

Part V List of Officers, Directors, Trustees, and Key Employees (List each one even if not compensated, see page 27 of the instructions)

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (If not paid, enter -0-.)	(D) Contributions to employee benefit plans & deferred compensation	(E) Expense account and other allowances
Carol McMahan 18 S. Kingshighway, #14, St. Louis, MO 63108	Exec. Director, 40 hrs.	66,226	-0-	-0-
(List of Board Officers and Directors is attached. Officers and Directors receive no compensations.)		-0-	-0-	-0-

75 Did any officer, director, trustee, or key employee receive aggregate compensation of more than $100,000 from your organization and all related organizations, of which more than $10,000 was provided by the related organizations? ▶ ☐ Yes ☑ No
If "Yes," attach schedule—see page 28 of the instructions.

Part VI Other Information (See page 28 of the instructions.)

			Yes	No
76	Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity	76		✔
77	Were any changes made in the organizing or governing documents but not reported to the IRS? If "Yes," attach a conformed copy of the changes.	77		✔
78a	Did the organization have unrelated business gross income of $1,000 or more during the year covered by this return?	78a		✔
b	If "Yes," has it filed a tax return on **Form 990-T** for this year?	78b		
79	Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement	79		✔
80a	Is the organization related (other than by association with a statewide or nationwide organization) through common membership, governing bodies, trustees, officers, etc., to any other exempt or nonexempt organization?	80a		✔
b	If "Yes," enter the name of the organization ▶ ______ and check whether it is ☐ exempt **or** ☐ nonexempt.			
81a	Enter direct and indirect political expenditures See line 81 instructions 81a			
b	Did the organization file **Form 1120-POL** for this year?	81b		✔
82a	Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value?	82a		✔
b	If "Yes," you may indicate the value of these items here. Do not include this amount as revenue in Part I or as an expense in Part II. (See instructions in Part III) 82b			
83a	Did the organization comply with the public inspection requirements for returns and exemption applications?	83a	✔	
b	Did the organization comply with the disclosure requirements relating to quid pro quo contributions?	83b	✔	
84a	Did the organization solicit any contributions or gifts that were not tax deductible?	84a		✔
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	84b		
85	*501(c)(4), (5), or (6) organizations.* **a** Were substantially all dues nondeductible by members?	85a		
b	Did the organization make only in-house lobbying expenditures of $2,000 or less?	85b		
	If "Yes" was answered to either 85a or 85b, **do not** complete 85c through 85h below unless the organization received a waiver for proxy tax owed for the prior year			
c	Dues, assessments, and similar amounts from members 85c			
d	Section 162(e) lobbying and political expenditures 85d			
e	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices 85e			
f	Taxable amount of lobbying and political expenditures (line 85d less 85e) 85f			
g	Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?	85g		
h	If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year?	85h		
86	*501(c)(7) orgs* Enter: **a** Initiation fees and capital contributions included on line 12 86a			
b	Gross receipts, included on line 12, for public use of club facilities 86b			
87	*501(c)(12) orgs* Enter: **a** Gross income from members or shareholders 87a			
b	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.) 87b			
88	At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Part IX	88		✔
89a	*501(c)(3) organizations* Enter: Amount of tax imposed on the organization during the year under: section 4911 ▶ ______ ; section 4912 ▶ ______ , section 4955 ▶ ______			
b	*501(c)(3) and 501(c)(4) orgs* Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach a statement explaining each transaction.	89b		✔

c Enter Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958. ▶ -0-

d Enter. Amount of tax on line 89c, above, reimbursed by the organization ▶ -0-

90a List the states with which a copy of this return is filed ▶

b Number of employees employed in the pay period that includes March 12, 2003 (See instructions) 90b 22

91 The books are in care of ▶ Kids In the Middle, Inc. Telephone no ▶ (314) 909-9922

Located at ▶ 121 West Monroe Avenue, Kirkwood, Missouri ZIP + 4 ▶ 63122-5815

92 *Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of* **Form 1041**—Check here ▶ ☐ and enter the amount of tax-exempt interest received or accrued during the tax year ▶ 92

Part VII **Analysis of Income-Producing Activities** (See page 33 of the instructions.)

Note: *Enter gross amounts unless otherwise indicated*	Unrelated business income		Excluded by section 512, 513, or 514		**(E)** Related or exempt function income
	(A) Business code	**(B)** Amount	**(C)** Exclusion code	**(D)** Amount	
93 Program service revenue.					
a Counseling and Training Fees					198,830
b					
c					
d					
e					
f Medicare/Medicaid payments					
g Fees and contracts from government agencies					41,580
94 Membership dues and assessments					
95 Interest on savings and temporary cash investments			14	2,580	
96 Dividends and interest from securities					
97 Net rental income or (loss) from real estate.					
a debt-financed property					
b not debt-financed property					
98 Net rental income or (loss) from personal property					
99 Other investment income					
100 Gain or (loss) from sales of assets other than inventory					
101 Net income or (loss) from special events					45,797
102 Gross profit or (loss) from sales of inventory					
103 Other revenue: **a** Book/Activity Game Sales					73
b Misc. Revenue					1,115
c					
d					
e					
104 Subtotal (add columns (B), (D), and (E))				2,580	287,395

105 **Total** (add line 104, columns (B), (D), and (E)) ▶ 289,975

Note: *Line 105 plus line 1d, Part I, should equal the amount on line 12, Part I.*

Part VIII **Relationship of Activities to the Accomplishment of Exempt Purposes** (See page 34 of the instructions.)

Line No. ▼	Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes)
93a	Reduced counseling fees were received from clients for providing therapy sessions to their families.
93g	Government fees were received from Family Court of St. Louis City to provide the court programs.
101	Special events were conducted to generate funds to subsidize the cost of providing counseling services.
103	Books and activity games are sold to families and schools as supplement of the counseling sessions.

Part IX **Information Regarding Taxable Subsidiaries and Disregarded Entities** (See page 34 of the instructions.)

(A) Name, address, and EIN of corporation, partnership, or disregarded entity	**(B)** Percentage of ownership interest	**(C)** Nature of activities	**(D)** Total income	**(E)** End-of-year assets
	%			
	%			
	%			
	%			

Part X **Information Regarding Transfers Associated with Personal Benefit Contracts** (See page 34 of the instructions.)

(a) Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? ☐ Yes ☑ No

(b) Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? ☐ Yes ☑ No

Note: *If "Yes" to (b), file Form 8870 and Form 4720 (see instructions).*

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge

Please Sign

Treasurer 11/15/04

Signature of officer Date

[redacted]

Date | Check if self-employed ▶ ☐ | Preparer's SSN or PTIN (See Gen Inst W)

[redacted]

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Organization Exempt Under Section 501(c)(3)

(Except Private Foundation) and Section 501(e), 501(f), 501(k), 501(n), or Section 4947(a)(1) Nonexempt Charitable Trust

Supplementary Information—(See separate instructions.)

▶ MUST be completed by the above organizations and attached to their Form 990 or 990-EZ

OMB No 1545-0047

2003

Name of the organization: Kids In the Middle, Inc.

Employer identification number: 43 : 1192510

Part I Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees

(See page 1 of the instructions. List each one. If there are none, enter "None.")

(a) Name and address of each employee paid more than $50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
None				
Total number of other employees paid over $50,000 . . . . ▶				

Part II Compensation of the Five Highest Paid Independent Contractors for Professional Services

(See page 2 of the instructions. List each one (whether individuals or firms). If there are none, enter "None ")

(a) Name and address of each independent contractor paid more than $50,000	(b) Type of service	(c) Compensation
None		
Total number of others receiving over $50,000 for professional services . . . . ▶		

Part III Statements About Activities (See page 2 of the instructions.)

			Yes	No
1	During the year, has the organization attempted to influence national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid or incurred in connection with the lobbying activities ▶ $ ________ (Must equal amounts on line 38, Part VI-A, or line i of Part VI-B)	1		✔
	Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other organizations checking "Yes" must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities.			
2	During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or with any taxable organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal beneficiary? *(If the answer to any question is "Yes," attach a detailed statement explaining the transactions)*			
a	Sale, exchange, or leasing of property?	2a		✔
b	Lending of money or other extension of credit?	2b		✔
c	Furnishing of goods, services, or facilities?	2c		✔
d	Payment of compensation (or payment or reimbursement of expenses if more than $1,000)?	2d		✔
e	Transfer of any part of its income or assets?	2e		✔
3a	Do you make grants for scholarships, fellowships, student loans, etc ? (If "Yes," attach an explanation of how you determine that recipients qualify to receive payments.)	3a		✔
b	Do you have a section 403(b) annuity plan for your employees?	3b	✔	
4	Did you maintain any separate account for participating donors where donors have the right to provide advice on the use or distribution of funds?	4		✔

Part IV Reason for Non-Private Foundation Status (See pages 3 through 6 of the instructions.)

The organization is not a private foundation because it is (Please check only **ONE** applicable box.)

5 ☐ A church, convention of churches, or association of churches. Section 170(b)(1)(A)(i).

6 ☐ A school. Section 170(b)(1)(A)(ii) (Also complete Part V.)

7 ☐ A hospital or a cooperative hospital service organization Section 170(b)(1)(A)(iii)

8 ☐ A Federal, state, or local government or governmental unit Section 170(b)(1)(A)(v).

9 ☐ A medical research organization operated in conjunction with a hospital. Section 170(b)(1)(A)(iii) **Enter the hospital's name, city, and state ▶** ____________

10 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit. Section 170(b)(1)(A)(iv) (Also complete the **Support Schedule** in Part IV-A)

11a ☐ An organization that normally receives a substantial part of its support from a governmental unit or from the general public. Section 170(b)(1)(A)(vi). (Also complete the **Support Schedule** in Part IV-A)

11b ☐ A community trust Section 170(b)(1)(A)(vi). (Also complete the **Support Schedule** in Part IV-A.)

12 ☑ An organization that normally receives: **(1) more than 33⅓%** of its support from contributions, membership fees, and gross receipts from activities related to its charitable, etc., functions—subject to certain exceptions, and **(2) no more than 33⅓%** of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2) (Also complete the **Support Schedule** in Part IV-A.)

13 ☐ An organization that is not controlled by any disqualified persons (other than foundation managers) and supports organizations described in: **(1)** lines 5 through 12 above, or **(2)** section 501(c)(4), (5), or (6), if they meet the test of section 509(a)(2) (See section 509(a)(3))

Provide the following information about the supported organizations (See page 5 of the instructions)

(a) Name(s) of supported organization(s)	**(b)** Line number from above

14 ☐ An organization organized and operated to test for public safety. Section 509(a)(4). (See page 6 of the instructions)

Part IV-A Support Schedule (Complete only if you checked a box on line 10, 11, or 12.) ***Use cash method of accounting.***

Note: *You may use the worksheet in the instructions for converting from the accrual to the cash method of accounting.*

	Calendar year (or fiscal year beginning in) ▶	**(a)** 2002	**(b)** 2001	**(c)** 2000	**(d)** 1999	**(e)** Total
15	Gifts, grants, and contributions received (Do not include unusual grants See line 28)	297,741	286,708	249,406	234,962	1,068,817
16	Membership fees received					
17	Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is related to the organization's charitable, etc, purpose	279,221	261,273	230,417	188,873	959,784
18	Gross income from interest, dividends, amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975	863	2,414	512	681	4,470
19	Net income from unrelated business activities not included in line 18					
20	Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf					
21	The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge					
22	Other income. Attach a schedule Do not include gain or (loss) from sale of capital assets					
23	Total of lines 15 through 22	577,825	550,395	480,335	424,516	2,033,071
24	Line 23 minus line 17	298,604	289,122	249,918	235,643	1,073,287
25	Enter 1% of line 23	5,778	5,504	4,803	4,245	

26 Organizations described on lines 10 or 11: a Enter 2% of amount in column (e), line 24 ▶ 26a

b Prepare a list for your records to show the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 1999 through 2002 exceeded the amount shown in line 26a **Do not file this list with your return.** Enter the total of all these excess amounts ▶ 26b

c Total support for section 509(a)(1) test. Enter line 24, column (e) ▶ 26c

d Add. Amounts from column (e) for lines 18 ______ 19 ______ 22 ______ 26b ______ ▶ 26d

e Public support (line 26c minus line 26d total) ▶ 26e

f **Public support percentage (line 26e (numerator) divided by line 26c (denominator))** ▶ 26f %

27 Organizations described on line 12: a For amounts included in lines 15, 16, and 17 that were received from a "disqualified person," prepare a list for your records to show the name of, and total amounts received in each year from, each "disqualified person." **Do not file this list with your return.** Enter the sum of such amounts for each year:

(2002) -0- (2001) -0- (2000) -0- (1999) -0-

b For any amount included in line 17 that was received from each person (other than "disqualified persons"), prepare a list for your records to show the name of, and amount received for each year, that was more than the **larger** of **(1)** the amount on line 25 for the year or **(2)** $5,000 (Include in the list organizations described in lines 5 through 11, as well as individuals) **Do not file this list with your return.** After computing the difference between the amount received and the larger amount described in **(1)** or **(2)**, enter the sum of these differences (the excess amounts) for each year:

(2002) 45,750 (2001) 33,155 (2000) 23,226 (1999) 20,696

c Add. Amounts from column (e) for lines: 15 1,068,817 16 -0- 17 959,784 20 -0- 21 -0- ▶ 27c 2,028,601

d Add. Line 27a total -0- and line 27b total 122,827 ▶ 27d 122,827

e Public support (line 27c total minus line 27d total) ▶ 27e 1,905,774

f Total support for section 509(a)(2) test: Enter amount from line 23, column (e) ▶ 27f 2,033,071

g **Public support percentage (line 27e (numerator) divided by line 27f (denominator))** ▶ 27g 93.7 %

h **Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator))** ▶ 27h 0.2 %

28 Unusual Grants: For an organization described in line 10, 11, or 12 that received any unusual grants during 1999 through 2002, prepare a list for your records to show, for each year, the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant. **Do not file this list with your return.** Do not include these grants in line 15

Part V **Private School Questionnaire** (See page 7 of the instructions.)
(To be completed ONLY by schools that checked the box on line 6 in Part IV)

			Yes	No
29	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?	29		
30	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?	30		
31	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves?	31		
	If "Yes," please describe, if "No," please explain. (If you need more space, attach a separate statement.)			
32	Does the organization maintain the following:			
a	Records indicating the racial composition of the student body, faculty, and administrative staff?	32a		
b	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	32b		
c	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	32c		
d	Copies of all material used by the organization or on its behalf to solicit contributions?	32d		
	If you answered "No" to any of the above, please explain (If you need more space, attach a separate statement)			
33	Does the organization discriminate by race in any way with respect to:			
a	Students' rights or privileges?	33a		
b	Admissions policies?	33b		
c	Employment of faculty or administrative staff?	33c		
d	Scholarships or other financial assistance?	33d		
e	Educational policies?	33e		
f	Use of facilities?	33f		
g	Athletic programs?	33g		
h	Other extracurricular activities?	33h		
	If you answered "Yes" to any of the above, please explain (If you need more space, attach a separate statement)			
34a	Does the organization receive any financial aid or assistance from a governmental agency?	34a		
b	Has the organization's right to such aid ever been revoked or suspended? If you answered "Yes" to either 34a or b, please explain using an attached statement	34b		
35	Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4 05 of Rev. Proc. 75-50, 1975-2 C B 587, covering racial nondiscrimination? If "No," attach an explanation	35		

Part VI-A Lobbying Expenditures by Electing Public Charities (See page 9 of the instructions.)

(To be completed **ONLY** by an eligible organization that filed Form 5768)

Check ▶ **a** ☐ if the organization belongs to an affiliated group Check ▶ **b** ☐ if you checked "a" and "limited control" provisions apply

	Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)		(a) Affiliated group totals	(b) To be completed for ALL electing organizations
36	Total lobbying expenditures to influence public opinion (grassroots lobbying)	36		
37	Total lobbying expenditures to influence a legislative body (direct lobbying)	37		
38	Total lobbying expenditures (add lines 36 and 37)	38		
39	Other exempt purpose expenditures	39		
40	Total exempt purpose expenditures (add lines 38 and 39)	40		
41	Lobbying nontaxable amount. Enter the amount from the following table—	41		
42	Grassroots nontaxable amount (enter 25% of line 41)	42		
43	Subtract line 42 from line 36. Enter -0- if line 42 is more than line 36	43		
44	Subtract line 41 from line 38. Enter -0- if line 41 is more than line 38	44		

If the amount on line 40 is—	**The lobbying nontaxable amount is—**
Not over $500,000	20% of the amount on line 40
Over $500,000 but not over $1,000,000	$100,000 plus 15% of the excess over $500,000
Over $1,000,000 but not over $1,500,000	$175,000 plus 10% of the excess over $1,000,000
Over $1,500,000 but not over $17,000,000	$225,000 plus 5% of the excess over $1,500,000
Over $17,000,000	$1,000,000

Caution: *If there is an amount on either line 43 or line 44, you must file Form 4720*

4-Year Averaging Period Under Section 501(h)

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 45 through 50 on page 11 of the instructions.)

	Lobbying Expenditures During 4-Year Averaging Period				
Calendar year (or fiscal year beginning in) ▶	**(a)** 2003	**(b)** 2002	**(c)** 2001	**(d)** 2000	**(e)** Total
45 Lobbying nontaxable amount					
46 Lobbying ceiling amount (150% of line 45(e))					
47 Total lobbying expenditures					
48 Grassroots nontaxable amount					
49 Grassroots ceiling amount (150% of line 48(e))					
50 Grassroots lobbying expenditures					

Part VI-B Lobbying Activity by Nonelecting Public Charities

(For reporting only by organizations that did not complete Part VI-A) (See page 12 of the instructions.)

During the year, did the organization attempt to influence national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:	Yes	No	Amount
a Volunteers			
b Paid staff or management (Include compensation in expenses reported on lines **c** through **h.**)			
c Media advertisements			
d Mailings to members, legislators, or the public			
e Publications, or published or broadcast statements			
f Grants to other organizations for lobbying purposes			
g Direct contact with legislators, their staffs, government officials, or a legislative body			
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means			
i Total lobbying expenditures (Add lines **c** through **h.**)			

If "Yes" to any of the above, also attach a statement giving a detailed description of the lobbying activities.

Part VII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations (See page 12 of the instructions.)

51 Did the reporting organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?

			Yes	No
a	Transfers from the reporting organization to a noncharitable exempt organization of.			
	(i) Cash	51a(i)		✔
	(ii) Other assets	a(ii)		✔
b	Other transactions.			
	(i) Sales or exchanges of assets with a noncharitable exempt organization	b(i)		✔
	(ii) Purchases of assets from a noncharitable exempt organization	b(ii)		✔
	(iii) Rental of facilities, equipment, or other assets	b(iii)		✔
	(iv) Reimbursement arrangements	b(iv)		✔
	(v) Loans or loan guarantees	b(v)		✔
	(vi) Performance of services or membership or fundraising solicitations	b(vi)		✔
c	Sharing of facilities, equipment, mailing lists, other assets, or paid employees	c		✔

d If the answer to any of the above is "Yes," complete the following schedule Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting organization If the organization received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received

(a) Line no	(b) Amount involved	(c) Name of noncharitable exempt organization	(d) Description of transfers, transactions, and sharing arrangements

52a Is the organization directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? ▶ ☐ Yes ☑ No

b If "Yes," complete the following schedule·

(a) Name of organization	(b) Type of organization	(c) Description of relationship

KIDS IN THE MIDDLE, INC.
Form 990
Part I, Line 9
Schedule of Special Events and Activities

Special Events and Activities	Cool Night off Washington		Unassociated Fundraising		Total	
Date	April 5, 2003		November 2003			
Gross Revenue	$	67,409	$	2,400	$	69,809
Direct Expenses	$	24,012	$	-	$	24,012
Net Income	$	43,397	$	2,400	$	45,797

KIDS IN THE MIDDLE, INC.
Form 990
Part II, Line 42 and Part IV, Line 57
Schedule of Depreciation

Acquisition / Purchase Date	Book Cost	FURNITURE & EQUIPMENT Items	Life of Equipment (Years)	Accumulated Depreciation Through 2002	2003 Depreciation
10/23/2003	$ 69 00	Microfiber Black Chair	7	$ -	$ 1 64
10/1/2003	$ 700 00	IBM NetVista A30P computer with 17" monitor (Donated by IBM)	5	$ -	$ 35 00
6/1/2003	$ 104 48	2 Fabric High-Back Manager Chairs	7	$ -	$ 8 71
1/14/2003	$ 109 99	HP DeskJet 5550 Color Inkjet Printer	5	$ -	$ 22 00
8/21/2002	$ 249 98	HP OfficeJet K-80 4-In-One Fax Machine	5	$ 16 67	$ 50 00
8/6/2002	$ 44 99	Berkley Executive Fabric Chair	7	$ 2 68	$ 6 43
7/16/2002	$ 481 95	Fire King Turtle 4-Drawer Insulated Fireproof Filing Cabinet	7	$ 28 69	$ 68 85
7/12/2002	$ 249 99	17" Compaq FS740 Flat Screen Monitor	5	$ 25 00	$ 50 00
6/18/2002	$ 249 99	17" Compaq FS740 Flat Screen Monitor	5	$ 25 00	$ 50 00
6/10/2002	$ 637 98	HP LaserJet 2200 DSE Printer	5	$ 74 43	$ 127 60
6/6/2002	$ 49 99	HP DeskJet 825C Printer	5	$ 5 83	$ 10 00
5/8/2002	$ 2,415 00	Dell Workstation 530 Computer with M782 Flat Screen Monitor	5	$ 322 00	$ 483 00
5/8/2002	$ 2,512 00	Two Dell Workstation 340 Computers with two M782 Flat Screen Monitors	5	$ 334 93	$ 502 40
4/29/2002	$ 79 98	Micro Mobile Computer Cart	7	$ 7 62	$ 11 43
4/20/2002	$ 169 99	Proview PRO730 - 17" Flat Screen Monitor	5	$ 22 67	$ 34 00
4/12/2002	$ 333 57	Philips TV & Sony VCR set	5	$ 50 04	$ 66 71
3/21/2002	$ 84 98	Double Smart Cart - Utility Cart	7	$ 9 11	$ 12 14
3/12/2002	$ 774 98	HP LaserJet 2200 DSE Printer	5	$ 129 16	$ 155 00
3/7/2002	$ 847 00	Dell Dimension 4300 S computer w/monitor	5	$ 141 17	$ 169 40
1/11/2002	$ 128 82	GE Bagless Vacuum Machine	5	$ 25 76	$ 25 76
12/21/2001	$ 500 00	5 Gateway Computers (no monitors)	5	$ 100 00	$ 100 00
9/14/2001	$ 54 99	Leather Manager's Chair	7	$ 10 48	$ 7 86
9/13/2001	$ 149 96	2 of HON 500 Series 25" Putty 4-Drawer Letter File Cabinets	7	$ 28 56	$ 21 42
9/6/2001	$ 99 99	Panasonic PV-V4611 VCR	5	$ 26 67	$ 20 00
9/6/2001	$ 189 99	Panasonic 20" Stereo TV	5	$ 50 67	$ 38 00
9/6/2001	$ 274 99	HP PSC 750 Multipurpose Copier	5	$ 73 33	$ 55 00
8/22/2001	$ 99 99	Netgear RP114 DSL Networking Router	5	$ 26 67	$ 20 00
7/30/2001	$ 1,115 00	Dell Workstation Computer - Precision 330	5	$ 315 92	$ 223 00
6/22/2001	$ 99 99	HON 500 Series 25 - Black, 4 Drawer Letter Size Vertical File Cabinet	7	$ 21 42	$ 14 28
6/22/2001	$ 75 98	2 Globe Budget Walnet Folding Tables	7	$ 16 28	$ 10 85
3/12/2001	$ 74 99	Chenille Executive Manager Chair	7	$ 19 64	$ 10 71
10/20/2000	$ 391 07	Data 2000 Computer (System Upgrade)	5	$ 169 46	$ 78 21
8/8/2000	$ 804 00	Getway 2000 Computer & Upgrades	5	$ 388 60	$ 160 80
9/1/2000	$ 250 00	5 Cannon BJC 2100 Color Printers	5	$ 116 67	$ 50 00
4/11/2000	$ 12,226 00	ESI IVX 128 Telephone Systems	10	$ 3,362 15	$ 1,222 60
11/1/1999	$ 100 00	Cannon Bubble Jet Printer (Donated)	5	$ 63 33	$ 20 00
3/9/1999	$ 568 00	Software	5	$ 435 47	$ 113 60
3/9/1999	$ 505 00	Okidata Laser Printer	5	$ 387 17	$ 101 00
3/9/1999	$ 2,541.00	3 Computers	5	$ 1,948 10	$ 508 20
6/30/1998	$ 100 00	Room Divider	7	$ 64 40	$ 14 29
6/30/1998	$ 100 00	5 Desk Chairs	7	$ 64 40	$ 14 29
6/30/1998	$ 600 00	3 Lateral File Cabinets	7	$ 386 28	$ 85 71
6/30/1998	$ 300 00	2 Large Storage Cabinets	7	$ 193 16	$ 42 86
6/30/1998	$ 200.00	Computer Tables	7	$ 128 76	$ 28 57
6/30/1998	$ 200 00	Refrigerator	7	$ 128.76	$ 28 57
6/30/1998	$ 500 00	3 Desks	7	$ 321 92	$ 71.43
3/31/1998	$ 316 99	Cannon Fax Machine	7	$ 215 36	$ 45 28
6/30/1998	$ 600 00	Laptop Computer	7	$ 386 28	$ 85 71
6/30/1998	$ 250 00	Computer & Monitor	7	$ 160 94	$ 35 71
3/8/1997	$ 329 99	TV - VCR	7	$ 274 32	$ 47 14
5/8/1997	$ 125 50	2 Sound Machines	7	$ 101 34	$ 17 93
2/19/1997	$ 720 00	HP LaserJet Printer	7	$ 603 35	$ 102 86
5/15/1997	$ 899 92	Office Furniture - Chesterfield	7	$ 724 16	$ 128 56
2/20/1997	$ 1,114 90	Display Board	7	$ 933 80	$ 159 27
Before 1997	$ 26,776 54	Retired Furniture & Equipment		$ 26,776 54	$ -
TOTAL	**$ 63,549.44**			**$ 40,245.12**	**$ 5,573.78**

Yearend Total Accum. Depreciation: $ 40,245.12 $ 45,818.90

Yearend Total Equipment Cost: $ 62,565.97 $ 63,549.44

Total Book Value of Equipment & Furniture After Accum. Depreciation: $ 22,320.85 $ 17,730.54

Kids In the Middle

Form 990

Part V – List Of Officers and Directors Serving From January - July 2003

Name and Address	Title and Hours	Name and Address	Title and Hours
All Officers and Directors are uncompensated			
Alan Freed 7 Layton Terrace St. Louis, MO 63124	President 10 Hours	Terry Marvin 16326 Valley Oaks Estate Ct. Wildwood, MO 63005	Vice President 6 Hours
Steve Albart 2504 Rockford St. Louis, MO 63144	Treasurer 6 Hours	Scott Kelly 8805 Brenda Ave. St. Louis, MO 63123	Secretary 6 Hours
Mike Jenny 15 Hillard Rd. St. Louis, MO 63122	Director 6 Hours	Ed Alizadeh 2003 Brook Hill Ridge Dr. Chesterfield, MO 63017	Director 6 Hours
Lisa Norman 4400 Lindell Blvd. Apt. 4K St. Louis, MO 63108	Director 6 Hours	Jeanice Geis 13493 Post Road St. Louis, MO 63166	Ex-Officio 6 Hours
Cy Alizadeh 17954 Saddle Horn Rd. Wildwood, MO 63038	Director 6 Hours	Richard Boalbey 860 Blossom Lane St. Louis, MO 63119	Director 6 Hours
William Borresen 9326 Olive Blvd. St. Louis, MO 63132	Director 6 Hours	Charles Cobaugh 50 Clermont Ln. St. Louis, MO 63124	Director 6 Hours
Henry Elbert 10320 Arthur Place St. Louis, MO 63131	Director 6 Hours	Jeanne B. Gladden P.O. Box 1009 Washington, MO 63039	Director 6 Hours
Richard Goldberg 6929 Pershing University, MO 63130	Director 6 Hours	Philip Graham 646 Clark Avenue Webster Grove, MO 63119	Director 6 Hours
Mark Graves 3440 Tedmar St. Louis, MO 63139	Director 6 Hours	Jay Hardman 1034 Station Bend Lane St. Louis, MO 63122	Director 6 Hours
William Hogan 6426 Sutherland St. Louis, MO 63109	Director 6 Hours	Roy Kramer 9225 Mathews Lane Sunset Hills, MO 63127	Director 6 Hours
Judy Zisk Lincoff 17 Granada Way St. Louis, MO 63124	Director 6 Hours	Lois Weir 322 S. Ballas Rd. St. Louis, MO 63122	Director 6 Hours

Kids In the Middle
Form 990
Part V – List Of Officers and Directors Serving From
August - December 2003

Name and Address	Title and Hours	Name and Address	Title and Hours
All Officers and Directors are uncompensated			
Alan Freed 7 Layton Terrace St. Louis, MO 63124	President 10 Hours	Ed Alizadeh 2504 Rockford St. Louis, MO 63144	Vice President 6 Hours
Steve Albart 2504 Rockford St. Louis, MO 63144	Treasurer 6 Hours	William Borresen 9326 Olive Blvd. St. Louis, MO 63123	Secretary 6 Hours
Roy Kramer 10730 Roxanna Drive St. Louis, MO 63128	Director 6 Hours	Judy Zisk Lincoff 17 Granada Way St. Louis, MO 63124	Director 6 Hours
Cy Alizadeh 17954 Saddle Horn Rd. Wildwood, MO 63038	Director 6 Hours	Kyle Baxter 1102 Art Hill Place St. Louis, MO 63139	Director 6 Hours
Richard E. Boalbey 7623 Delmar St. Louis, MO 63130	Director 6 Hours	Charles H. Cobaugh 50 Clermont Ln. St. Louis, MO 63124	Director 6 Hours
Jeanne B. Gladden P.O. Box 1009 Washington, MO 63090	Director 6 Hours	Richard Goldberg 6924 Pershing St. Louis, MO 63130	Director 6 Hours
Mark Graves 3440 Tedmar St. Louis, MO 63139	Director 6 Hours	Jay Hardman 1034 Station Bend Lane St. Louis, MO 63122	Director 6 Hours
William Hogan 5878 Walsh St. Louis, MO 63109	Director 6 Hours	Pat Knoerle-Jordan 1262 Lynchester Kirkwood, MO 63122	Director 6 Hours
Eric Marquardt 800 Audubon Drive St. Louis, MO 63105	Director 6 Hours	Michael Mullen 6353 Murdoch St. Louis, MO 63109	Director 6 Hours
Lisa Norman 4400 Lindell Blvd. Apt. 4K St. Louis, MO 63108	Director 6 Hours	Mildred Pettiford 12179 Red Lion Drive Florissant, MO 63033	Director 6 Hours
Alan Zvibleman 341 Hartwell Ct. Chesterfield, MO 63017	Director 6 Hours		

Form **8868**
(December 2000)
Department of the Treasury
Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

▶ File a separate application for each return

OMB No 1545-1709

- If you are filing for an **Automatic 3-Month Extension, complete only Part I** and check this box . . . . ▶ ☑
- If you are filing for an **Additional (not automatic) 3-Month Extension, complete only Part II** (on page 2 of this form).

Note: ***Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868.***

Part I **Automatic 3-Month Extension of Time**—Only submit original (no copies needed)

Note: *Form **990-T corporations** requesting an automatic 6-month extension—check this box and complete Part I only* . . ▶ ☐

All other corporations (including Form 990-C filers) must use Form 7004 to request an extension of time to file income tax returns Partnerships, REMICs and trusts must use Form 8736 to request an extension of time to file Form 1065, 1066, or 1041

Type or print	Name of Exempt Organization **Kids In the Middle, Inc.**	**Employer identification number** **43 : 1192510**
File by the due date for filing your return See instructions	Number, street, and room or suite no. If a P.O box, see instructions. **121 West Monroe Avenue**	
	City, town or post office, state, and ZIP code For a foreign address, see instructions **Kirkwood, Missouri 63122**	

Check type of return to be filed (file a separate application for each return):

☑ Form 990	☐ Form 990-T (corporation)	☐ Form 4720
☐ Form 990-BL	☐ Form 990-T (sec. 401(a) or 408(a) trust)	☐ Form 5227
☐ Form 990-EZ	☐ Form 990-T (trust other than above)	☐ Form 6069
☐ Form 990-PF	☐ Form 1041-A	☐ Form 8870

- If the organization does **not** have an office or place of business in the United States, check this box . . . . . . ▶ ☐
- If this is for a **Group Return,** enter the organization's four digit Group Exemption Number (GEN) ________ . If this is for the **whole** group, check this box ▶ ☐ . If it is for part of the group, check this box ▶ ☐ and attach a list with the names and EINs of all members the extension will cover.

1 I request an automatic 3-month (6-month, for **990-T corporation**) extension of time until August 15 .... , 20 04 , to file the exempt organization return for the organization named above. The extension is for the organization's return for·
▶ ☑ calendar year 20 03 or
▶ ☐ tax year beginning .... , 20... , and ending .... , 20....

2 If this tax year is for less than 12 months, check reason: ☐ Initial return ☐ Final return ☐ Change in accounting period

3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions . . . . $

b If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated tax payments made Include any prior year overpayment allowed as a credit . . . . $

c **Balance Due.** Subtract line 3b from line 3a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions . . . . $

Signature and Verification

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form

Signature ▶ Carol McMahon Title ▶ **Executive Director** Date ▶ 5-12-04

• If you are filing for an **Additional (not automatic) 3-Month Extension, complete only Part II** and check this box . ▶ ☑

Note: ***Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868.***

• If you are filing for an **Automatic 3-Month Extension, complete only Part I** (on page 1)

Part II Additional (not automatic) 3-Month Extension of Time—Must File Original and One Copy.

Type or print		
	Name of Exempt Organization **Kids In the Middle, Inc.**	Employer identification number **43 : 1192510**
File by the extended due date for filing the return See instructions	Number, street, and room or suite no If a P O box, see instructions **121 West Monroe Avenue**	For IRS use only
	City, town or post office, state, and ZIP code For a foreign address, see instructions **Kirkwood, Missouri 63122**	

Check type of return to be filed (File a separate application for each return)

☑ Form 990 ☐ Form 990-EZ ☐ Form 990-T (sec. 401(a) or 408(a) trust) ☐ Form 1041-A ☐ Form 5227 ☐ Form 8870
☐ Form 990-BL ☐ Form 990-PF ☐ Form 990-T (trust other than above) ☐ Form 4720 ☐ Form 6069

STOP: Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.

• If the organization does **not** have an office or place of business in the United States, check this box . . . . . ▶ ☐

• If this is for a **Group Return**, enter the organization's four digit Group Exemption Number (GEN) ________ If this is for the **whole** group, check this box ▶ ☐ If it is for **part** of the group, check this box ▶ ☐ and attach a list with the names and EINs of all members the extension is for.

4 I request an additional 3-month extension of time until **November 15** , 20**04**

5 For calendar year **2003** , or other tax year beginning ...., 20... and ending ...., 20....

6 If this tax year is for less than 12 months, check reason: ☐ Initial return ☐ Final return ☐ Change in accounting period

7 State in detail why you need the extension **The audit of Year 2003 Financial Statements has just been recently completed by an independent auditor. More time is needed to prepare an accurate tax return to the IRS.**

8a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits See instructions . . . . . $ ________

b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868 . . . . . $ ________

c **Balance Due.** Subtract line 8b from line 8a Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions . . . . . $

Signature and Verification

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form

Signature ▶ Title ▶ **President** Date ▶ 8/12/04

Notice to Applicant—To Be Completed by the IRS

☒ We **have** approved this application Please attach this form to the organization's return.

☐ We **have not** approved this application However, we have granted a 10-day grace period from the later of the date shown below or the due date of the organization's return (including any prior extensions) This grace period is considered to be a valid extension of time for elections otherwise required to be made on a timely return Please attach this form to the organization's return

☐ We **have not** approved this application After considering the reasons stated in item 7, we cannot grant your request for an extension of time to file We are not granting a 10-day grace period

☐ We **cannot consider** this application because it was filed after the due date of the return for which an extension was requested

☐ Other ....

EXTENSION APPROVED

Director ________ By ________ Date

SUBMISSION PROCESSING FIELD DIRECTOR

Alternate Mailing Address — Enter the address if you want the copy of this application for an additional 3-month extension returned to an address different than the one entered above

Type or print	
	Name
	Number and street (include suite, room, or apt. no.) Or a P.O. box number
	City or town, province or state, and country (including postal or ZIP code)