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)

OMB No 1545-0047

Open to Public Inspection

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

Α	For	the 20	011 calendar year, or tax year beginning	and ending		
В	Check	rf able.	C Name of organization SPIRITUALITY FOR KIDS INTERNATIONAL, INC		D Employer identif	ication number
Г	Ad	dress ange	FKA SFK SUCCESS FOR KIDS, INC.			
Ē	Na	me	Doing Business As		- 26-222	24994
Ë	Ini	ange tial	Number and street (or P.0. box if mail is not delivered to street address)	Room/sur		
F	_	urn rmin-	1054 S. ROBERTSON BLVD., 2ND FLOOR	Roomisui		54-0560
F	—¦ate An	ed nended		J		4,886,057.
F	□Ap	urn plica-	City or town, state or country, and ZIP + 4		G Gross receipts \$	
L	tiò	n nding	LOS ANGELES, CA 90035		H(a) Is this a group r	
			F Name and address of principal officer.MICHAL BERG		for affiliates?	Yes X No
_			SAME AS C ABOVE		H(b) Are all affiliates in	
<u> </u>				a)(1) or 5	⊣ ,	a list. (see instructions)
			www.SPIRITUALITYFORKIDS.COM	I. v	H(c) Group exemption	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
			anization: X Corporation Trust Association Other	L Ye	ar of formation: 2009	M State of legal domicile; CA
L	aπ		ummary			· - · · · · · · · · · · · · · · · · · ·
Activities & Governance	1	Bri	efly describe the organization's mission or most significant activities:	SCHEDULE		·
	2	Ch	eck this box $lacktriangle$ if the organization discontinued its operations or ${f c}$	disposed of mo	re than 25% of its net a	ssets.
	; з	Nu	mber of voting members of the governing body (Part VI, line 1a)		3	5
ΠÜ	} 4	Nu	mber of independent voting members of the governing body (Part VI, line	1b)	4	4
フ~g	<u> </u>	Tot	al number of individuals employed in calendar year 2011 (Part V, line 2a)		5	38
굮	6	Tot	al number of volunteers (estimate if necessary)		6	30
وَّر	7	a To	al unrelated business revenue from Part VIII, column (C), line 12		7a	0.
—~	'	b Ne	t unrelated business taxable income from Form 990-T, line 34		7b	0.
-7				, -	Prior Year	Current Year
2	, 8	Co	ntributions and grants (Part VIII, line 1h)		9,453,419.	967,374.
2012	9		ogram service revenue (Part VIII, line 2g)		0.	. 0.
	1 10		estment income (Part VIII, column (A), lines 3, 4, and 7d)		756,450,	547,310.
ď	1.		ner revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		10,394,	
	12		ral revenue - add lines 8 through 11 (must equal Part VIII, column (A), line	12)	10,220,263.	1,551,182.
_	10		ants and similar amounts paid (Part IX, column (A), lines 1-3)	:-/	454,778,	
	14		nefits paid to or for members (Part IX, column (A), line 4)		0	
u	Ι.,		aries, other compensation, employee benefits (Part IX, column (A), lines 5	S-10)	2,177,468.	1,555,040.
Fxnenses	<u> </u>		ofessional fundraising fees (Part IX, column (A), line 11e)	,,,,,, . -	0	
ğ	į ا '`			269,769.		, , , , , , , , , , , , , , , , , , , ,
Ä	<u>آ </u> ا		ner expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		1,899,575	992,992.
			· · · · · · · · · · · · · · · · · · ·		4,531,821,	<u> </u>
	1,	יטו כ	ral expenses. Add lines 13-177 (must equal Part IX, column (A), line 25) venue less expenses. Subtract-line 18-from-line 12-7 .	-	5,688,442	
=	g 	, ne	770		Beginning of Current Year	End of Year
Net Assets or	[일 20) To	tal assets (Part X, line 26) NOV 2 1 2012	-	6,510,113	4,076,514.
SSE	[2		ral assets (Part X, line 36) NUV 4 2 /UI/	-	845,664	
let /	2 2 2		t assets or fund balances Subtract line 21 from line 20	-	5,664,449	
	art		Signature Block	· ·	3,001,413	3,030,032,
			s of perjury, I declare that I have examined this return, including accompanying sch	edules and state	ments and to the hest of n	ov knowledge and belief it is
			nd complete. Declaration of preparer (other than officer) is based on all information			ny knowieuge and belief, it is
	16, 601	1661, a		or willon prepar		<u></u>
٥.			Signature of officer		-' -15 Date	72
	gn	- [[MICHAL BERG, PRESIDENT		54.0	
He	ere		Type or print name and title			
_		-			Date Check	PTIN
n.	.:A		Int/Type preparer's name Preparer's signature	>	11/15/12	
	aid Sanara		OR TEMKIN		11/15/12 self-empto	
	epare	_	m's name SINGERLEWAK LLP	_	Firm's EIN ▶	95-2302617
US	se Onl	y Fii	m's address 10960 WILSHIRE BLVD. STE 700			240) 455 200
_		L_	LOS ANGELES, CA 90024-3783		Phone no. (310) 477-3924
M	ay th	e IRS	discuss this return with the preparer shown above? (see instructions)			X Yes No

SEE SCHEDULE O FOR CONTINUATION(S)

_	SPIRITUALITY FOR KIDS INTERNATIONAL, INC	0.4	_	
	1990 (2011) FKA SFK SUCCESS FOR KIDS, INC. 26-22249 rt IV Checklist of Required Schedules	94	- Р	age 3
ra	One chilst of frequired schedules		TV	T No
	le the organization described in section 501(c)(2) or 4047(c)(1) (other than a private foundation)?		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	١.,	х	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	x	-
2 3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for	-	Ë	
3	public office? If "Yes," complete Schedule C, Part I	3	1	x
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effection in			
7	during the tax year? If "Yes," complete Schedule C, Part II	4	1	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	ì	x
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to		<u> </u>	
_	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Par	t/ 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		х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		х
9	Did the organization report an amount in Part X, line 21; 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		Х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanei	nt		
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		Х
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X			
	as applicable.	<u>.</u> }		
а			٠,,	
	Part VI	11a	х	-
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total	446		x
_	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total	11b	 	
С	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		x
Ч	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	· '''C		<u> </u>
•	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		x
е		11e	х	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		х
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI, XII, and XIII	12a		х
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, XII, and XIII is optional	. 12b	ļ	Х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	ļ	Х
14a		14a	 	х
b				
	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	 	Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization	4.5	х	
16	or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals	. 15	<u> </u>	
16	located outside the United States? If "Yes," complete Schedule F, Parts III and IV	10		x
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	. 16		
• •	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17	х	
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	х	

Form **990** (2011)

х

19

20a

Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"

20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule ${\cal H}$

b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?

complete Schedule G, Part III ...

Part IV | Checklist of Required Schedules (continued)

	·		Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the			
	United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		х
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX,			
	column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		Х
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			ľ
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
04-	Schedule J	23		Х
248	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No", go to line 25	040		x
h	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24a 24b		 ^ _
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease	240		
•	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a			
	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		x
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		Х
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified			
	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		x
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member	l		
00	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	s žs		
а	Instructions for applicable filing thresholds, conditions, and exceptions). A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a	~	x .
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		x
	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,	200		
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		х
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	,,		х
34	Was the organization related to any tax-exempt or taxable entity?	33		
•	If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34	x	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		x
b	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of			
	section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		x
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		х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?			
	Note. All Form 990 filers are required to complete Schedule O	38	X	
		Form	99U (2	2011)

Form 990 (2		26-2224994	P	age
Part V	Statements Regarding Other IRS Filings and Tax Compliance			
,	Check if Schedule O contains a response to any question in this Part V			
			1	T

			Yes	No
19	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable		100	110
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
·	(gambling) winnings to prize winners?	1c	X	
22	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
Za	filed for the calendar year ending with or within the year covered by this return 2a 38			
h	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		
b	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
20	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," provide an explanation in Schedule O	3b		
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a	JD		
48	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		x
	If "Yes," enter the name of the foreign country.			 -
D	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.	1 67	- i. i	
Ea	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a	-å.3% i	x -
_	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?			x
b		5c		┝┈
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T? Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit	- 30		
6a	any contributions that were not tax deductible?	6a		l x
L	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts	Va		
b	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).	- OD	Ĺ	-
7	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	-
a	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	х	
b c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required	-,5		
C	to file Form 8282?	7c		x
d	If "Yes," indicate the number of Forms 8282 filed during the year			i i i
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e	14 M.	X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		х
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting		{ ^s	11
•	organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.		عدد الم	
a	Did the organization make any taxable distributions under section 4966?	9a	<i>i</i>	
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:		· %	
а	Initiation fees and capital contributions included on Part VIII, line 12		,	
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders		ŀ	
b	Gross income from other sources (Do not net amounts due or paid to other sources against	. 3		
	amounts due or received from them.)	1 130	,	
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	» .	,	
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	,) 	<i>}</i>	
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note. See the instructions for additional information the organization must report on Schedule O.	(X)	,	
b	Enter the amount of reserves the organization is required to maintain by the states in which the	\$ }	 `	
	organization is licensed to issue qualified health plans	\$^> , •		1 : 3
С	40-1	٠, ١	<u>ll</u> ä	
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		
		Form	000	(2011)

FRA SFK SUCCESS FOR KIDS, INC.

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

	Check if Schedule O contains a response to any question in this Part VI			[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 5			
	If there are material differences in voting rights among members of the governing body, or if the governing			
	body delegated broad authority to an executive committee or similar committee, explain in Schedule 0.			
b	Enter the number of voting members included in line 1a, above, who are independent 1b 4		Ì	
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 direct supervision	١ _		.,
	of officers, directors, or trustees, or key employees to a management company or other person?	3	х	х
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	5	-	х
5 6	Did the organization become aware during the year of a significant diversion of the organization's assets? Did the organization have members or stockholders?	6	\vdash	x
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or	۳		
, a	more members of the governing body?	 7a		х
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or	<u> </u>		
_	persons other than the governing body?	7b	x	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	x	~ ~ ~
b	Each committee with authority to act on behalf of the governing body?	8b		х
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		Х
<u>Sec</u>	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code)			
			Yes	No
	Did the organization have local chapters, branches, or affiliates?	10a		х
ь	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,			
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	х	
_	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	<u> </u>	
100	Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	х	** * * * * * * * * * * * * * * * * * * *
12a b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	х	
C	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe	120	-	
	in Schedule O how this was done	12c	x	
13	Did the organization have a written whistleblower policy?	13	х	
14	Did the organization have a written document retention and destruction policy?	14	х	
15	Did the process for determining compensation of the following persons include a review and approval by independent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a		х
b	Other officers or key employees of the organization	15b	ļ	х
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
	taxable entity during the year?	16a		x
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's			
Sac	exempt status with respect to such arrangements? tion C. Disclosure	16b	L	
	List the states with which a copy of this Form 990 is required to be filed ▶CA			
17 18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) (availah	ole	
.0	for public inspection. Indicate how you made these available. Check all that apply.		,,,	
	Own website Another's website X Upon request			
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, an	d finar	ncial	
	statements available to the public during the tax year.			
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organiza	tion: 🕨	-	
	MONIQUE GREEN, GLOBAL CONTROLLER - 310-464-0570			
1 200 00	1054 S. ROBERTSON BLVD., LOS ANGELES, CA 90035			
13200 01-23-		Form	990 (2011)

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FKA SFK SUCCESS FOR KIDS, INC.

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

Check if Schedule O contains a response to any question in this Par	art Vi	11
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Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

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

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

Check this box if neither the organization i												
(A)	• •				C)			(D)	(E)	(F)		
Name and Title	Average	Position (do not check more t		than	опе	Reportable	Reportable	Estimated				
	hours per	box offi	box, unless person is both an officer and a director/trustee)		compensation	compensation from related	amount of other					
	week (describe	Ē						from the	organizations	compensation		
	hours for	gree			1	Ē		organization	(W-2/1099-MISC)	from the		
	related	tee or	stee			al Self		(W-2/1099-MISC)	, ,	organization		
	organizations	trus	na! tri		oyee	E E				and related		
	in Schedule O)	Individual trustee or director	Institutio	Officer	Key employee	Highest compensated employee	Former			organizations		
(1) MIA BAUER												
BOARD MEMBER	5.00	х				_	<u> </u>	0.	0.	0.		
(2) JUDITH BOOKBINDER												
BOARD MEMBER	5.00	Х			<u> </u>			_0.	0.	0.		
(3) MICHAL BERG												
PRESIDENT	40.00	х		Х		<u> </u>	_	0.	133,997.	0.		
(4) BRAD FARBER												
TREASURER	5.00	х		х				0.	0.	0.		
(5) WENDY NEWMAN-GLANTZ												
SECRETARY	5.00	х	_	х	$oxed{oxed}$	<u> </u>	L	0.	0.	0.		
(6) DWAYNE ASHLEY (UNTIL 06/2011)			İ		1							
CEO, GLOBAL OPERATIONS	40.00	<u> </u>	<u> </u>	х	L	┞	L.	135,906.	0.	2,619.		
(7) HEATH GRANT (UNTIL 05/2011)									_			
CEO, GLOBAL EDUCATION & OUTREACH	40.00	╙	<u> </u>	х	L.	┡	_	144,255.	0.	1,835.		
(8) YOSSEF SAGI (UNTIL 06/2011)						ļ						
EXECUTIVE DIRECTOR	40.00	-		х	<u> </u>	<u> </u>	├	58,903.	0.	1,310.		
(9) JENNIFER WEIL (UNTIL 06/2011)				l_			İ	50 550		_		
EXECUTIVE DIRECTOR	40.00	⊢		х	<u> </u>	1	┡	50,772.	0.	0.		
							İ					
				-	-	┢	-					
		ļ	ļ	_	_	ļ	_					
	 	-	\vdash	\vdash	\vdash	\vdash						
	 	\vdash		\vdash		-			-, -			
	<u> </u>	_				_						

Form 990 (2011)

FRA SFK SUCCESS FOR KIDS, INC.

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)													
· (A)	(B)			(0)			(D)	(E)	(1	 F)		
Name and title	Average	(do		Posi heck		than	one	Reportable	Reportable	Estin	nated		
	hours per	box	, unle	ss pe	rson	s bot	h an	compensation	compensation	amoı	unt of		
	week	├	Cer ar		# CC	1/443	100)	from	from related		ner		
	(describe hours for	Individual trustee or director						the	organizations		nsation		
	related	5	8			sated		organization	(W-2/1099-MISC)	I	n the		
	organizations	Ustee	ğ		es.	ubeus		(W-2/1099-MISC)		1 -	ızatıon elated		
	in Schedule	lad to	tona		ploy	st con	_				zations		
	0)	JA PE	Institutional trustee	Officer	Key employee	Highest compensated employee	orme			0.95			
			1										
	†	 	┢		-								
			ł										
		<u> </u>	┢										
				$ldsymbol{ld}}}}}}$					_				
				Щ									
	ļ	<u> </u>	╙							+			
						Ļ		200 026	122.00		5 564		
1b Sub-total								389,836.	133,99		5,764.		
c Total from continuation sheets to Part \	II, Section A							0.		0.	0.		
d Total (add lines 1b and 1c)	 .					<u> </u>		389,836.	133,99	7.1	5,764.		
2 Total number of individuals (including but	not limited to th	nose	liste	ed al	DOV	e) wh	no r	eceived more than \$100	,000 of reportable				
compensation from the organization											es No		
O Datha annual latan famous ff								LL.a.kaaa.		<u></u>	ES 140		
3 Did the organization list any former officer			е, ке	y en	npic	yee.	, or	nignest compensated e	mpioyee on				
line 1a? If "Yes," complete Schedule J for										3	- ^ -		
4 For any individual listed on line 1a, is the s									tne organization		* - X		
and related organizations greater than \$15Did any person listed on line 1a receive or									dual for convece	4	,		
rendered to the organization? If "Yes," cor	•				-		elat	ed organization or indivi	dual for services	5	_x		
Section B. Independent Contractors	ripiete ochedar		Ur St	JCII ,	Ders	5011							
Complete this table for your five highest c	omnensated in	deni	ende	ent c	ontr	racto	ors t	that received more than	\$100,000 of compe	ensation froi			
the organization. Report compensation for	•								•	modelon no.			
(A)	the calendary	<u> </u>	0.101	··g·	*****	<u> </u>	Ï	(B)	, , , , , , , , , , , , , , , , , , , ,	(C)			
Name and busines	s address	NO	NE					Description of s	ervices	Compensa	ation		
	-												
							T						
]						
-													
										_	-		
													
2 Total number of independent contractors	· .	ot li	mıte	d to			stec	d above) who received m	nore than	***	1 1		
\$100,000 of compensation from the organ	ization 🕨					0				¥ 52	·# (
										Form 99	0 (2011)		

Form 990 (2011)

Part VIII Statement of Revenue (**D**) Revenue (A) (B) (C) Total revenue Related or Unrelated excluded from exempt function business tax under sections 512, 513, or 514 revenue revenue 1 a Federated campaigns 1a **b** Membership dues 1b 188,265 Fundraising events 1c 1d Related organizations Government grants (contributions) 1e All other contributions, gifts, grants, and 779,109 similar amounts not included above 15,390 g Noncash contributions included in lines 1a-1f \$ 967,374 h Total. Add lines 1a-1f Business Code All other program service revenue Total. Add lines 2a-2f Investment income (including dividends, interest, and 3 144,036 144,036. other similar amounts) Income from investment of tax-exempt bond proceeds 5,374 5 374 5 Royalties (ı) Real (II) Personal 6 a Gross rents b Less: rental expenses c Rental income or (loss) d Net rental income or (loss) Gross amount from sales of (II) Other (i) Securities 3,688,084 20,514 assets other than inventory b Less: cost or other basis 3,294,260 11,064 and sales expenses 393,824 9,450 c Gain or (loss) 403,274 403,274 d Net gain or (loss) 8 a Gross income from fundraising events (not Other Revenue 188,265. of including \$ contributions reported on line 1c). See 29,551 Part IV, line 18 29,551 b Less: direct expenses 0 c Net income or (loss) from fundraising events 9 a Gross income from gaming activities. See Part IV, line 19 b Less. direct expenses c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances b Less: cost of goods sold Net income or (loss) from sales of inventory Miscellaneous Revenue Business Code MISCELLANEOUS INCOME 900099 31,124 11 a 31,124. All other revenue Total. Add lines 11a-11d 31,124 Total revenue. See instructions. 1,551,182 583,808. 132009 01-23-12 Form 990 (2011)

26-2224994

FKA SFK SUCCESS FOR KIDS, 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) but are not required to complete columns (B), (C), and (D)

Do	Check if Schedule O contains a respon not include amounts reported on lines 6b,	(A)	(B)	(C)	(D)
	8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to governments and				
	organizations in the United States. See Part IV, line 21				
2	Grants and other assistance to individuals in				
	the United States. See Part IV, line 22				
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				
	United States See Part IV, lines 15 and 16	526,340.	526,340.		
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	395,600.	348,128.	19,780.	27,69
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	1,035,975.	911,658.	51,799.	72,51
8	Pension plan accruals and contributions (include				1
	section 401(k) and section 403(b) employer contributions)				
9	Other employee benefits	17,242.	15,173.	862.	1,20
10	Payroll taxes _	106,223.	93,476.	5,311.	7,43
11	Fees for services (non-employees):				
а	Management	_			
b	Legal	70,733.	60,123.	3,537.	7,07
C	Accounting .	2,588.	2,200.	129.	25
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17	26,578.			26,57
f	Investment management fees	27,969.	23,774.	1,398.	2,79
g	Other	97,512.	89,238.	2,758.	5,51
12	Advertising and promotion	143,680.	122,128.	7,184.	14,36
13	Office expenses	41,709.	35,690.	2,006.	4,01
14	Information technology	115,793.	98,424.	5,790.	11,57
15	Royalties .	107 101	400 404		
16	Occupancy	127,181.	108,104.	6,359.	12,71
17	Travel	110,929.	101,211.	3,239.	6,47
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	20 510	22.740	1 026	2.05
22	Depreciation, depletion, and amortization	38,518. 10,405.	32,740.	1,926.	3,85
3	Other expenses. Itemize expenses not covered	10,403.	8,844.	320.	1,04
24	above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.)		*	;	
а	FUNDRAISING EXPENSES	53,104.			53,10
b	BANK FEES	37,129.	31,560.	1,856.	3,71
C	CURRICULUM/EDUCATION MA	16,801.	16,801.		
d	MEALS & ENTERTAINMENT	16,103.	13,688.	805.	1,61
e	All other expenses	82,838.	72,493.	4,129.	6,21
25	Total functional expenses. Add lines 1 through 24e	3,100,950.	2,711,793.	119,388.	269,76
26	Joint costs. Complete this line only if the organization	•			· · · · · · · · · · · · · · · · · · ·
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.	1	!		
	Check here rf following SOP 98-2 (ASC 958-720)		[

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Page 11

Par	t X	Balance Sheet					
	,				(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing			143,584.	1	131,268.
	2	Savings and temporary cash investments			611,845.	2	607,520.
	3	Pledges and grants receivable, net			650,000.	3	17,070.
	4	Accounts receivable, net			4		
	5	Receivables from current and former officers, di	, trustees, key				
		employees, and highest compensated employee	es. Cor	nplete Part II			
ł		of Schedule L				5	
1	6	Receivables from other disqualified persons (as	define	d under section			
		4958(f)(1)), persons described in section 4958(c)	(3)(B),	and contributing			
		employers and sponsoring organizations of sect	ion 50	1(c)(9) voluntary			
		employees' beneficiary organizations (see instru	ctions)		- CONTROL OF PROPER OF STREET	6	
Assets	7	Notes and loans receivable, net	·			7	
Ass	8	Inventories for sale or use		•		8	
`	9	Prepaid expenses and deferred charges			57,782.	9	66,027.
	10a	Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D	10a	423,049.			
	b		10b	203,481.	246,725.	10c	219,568.
	11	Investments - publicly traded securities		·	4,734,766.	11	2,969,891.
	12	Investments - other securities. See Part IV, line 1	1			12	, ,
	13	Investments - program-related. See Part IV, line				13	
	14	Intangible assets			43,536.	14	49,710.
	15	Other assets. See Part IV, line 11	21,875.	15	15,460.		
	16	Total assets. Add lines 1 through 15 (must equa	al line 3	141	6,510,113.	16	4,076,514.
	17	Accounts payable and accrued expenses	27 111 10 (,,,	416,288.	17	44,744.
	18	Grants payable	,	18			
	19	Deferred revenue			19		
l	20	Tax-exempt bond liabilities		20			
ر ا	21	Escrow or custodial account liability. Complete F	Part IV	of Schedule D		21	
Liabilities	22	Payables to current and former officers, director		*	 -		
ᅙᅠᇔᅵ		highest compensated employees, and disqualifi			*		
<u> </u>		of Schedule L	-	orner Germphoto Fait II		22	
	23	Secured mortgages and notes payable to unrela	ted th	rd narties		23	
	24	Unsecured notes and loans payable to unrelated		•		24	
	25	Other liabilities (including federal income tax, pa		'		 -	
		parties, and other liabilities not included on lines					
		Schedule D			429,376.	25	400,878.
	26	Total liabilities. Add lines 17 through 25			845,664.	26	445,622.
		Organizations that follow SFAS 117, check he	re 🕨	and complete			
က္အ		lines 27 through 29, and lines 33 and 34.			* * *	, ,	
ဦ	27	Unrestricted net assets			The second becomes the same the same and second the same	27	
ala	28	Temporarily restricted net assets				28	
9 P	29	Permanently restricted net assets			29	_	
ا ق		Organizations that do not follow SFAS 117, cl	neck h	ere 🕨 🗓 and			
<u></u>		complete lines 30 through 34.					
ts (30	Capital stock or trust principal, or current funds	0.	30	0.		
SSE	31	Paid-in or capital surplus, or land, building, or eq	ulbme	nt fund	0.	31	0.
Net Assets or Fund Balances	32	Retained earnings, endowment, accumulated in	-	· · ·	5,664,449.	32	3,630,892.
ž	33	Total net assets or fund balances		c. caror range	5,664,449.	33	3,630,892.
	34	Total liabilities and net assets/fund balances		ł	6,510,113.	34	4,076,514.
	<u>~</u>	rotal nabilities and flet assets/fully balafices					Form 990 (2011)

Form **990** (2011)

POLIT	1990 (2011) 11dx B1 & B000 BB 10 K K1BB, The.	20-222433	•	Pа	ge I∠		
Pa	rt XI Reconciliation of Net Assets				<u> </u>		
	' Check if Schedule O contains a response to any question in this Part XI		<u>-</u>		X		
1	Total revenue (must equal Part VIII, column (A), line 12)	1	1	,551	,182.		
2	Total expenses (must equal Part IX, column (A), line 25)	2	3	,100	,950.		
3	Revenue less expenses. Subtract line 2 from line 1	3	-1	,549	,768.		
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	5	,664	,449.		
5	Other changes in net assets or fund balances (explain in Schedule O)	5		-483	,788.		
6	Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6	3	,630	,893.		
Pa	rt XII Financial Statements and Reporting						
	Check if Schedule O contains a response to any question in this Part XII				х		
				Yes	No		
1	Accounting method used to prepare the Form 990: Cash X Accrual Other						
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.						
2a							
b	Were the organization's financial statements audited by an independent accountant?		2b		х		
c	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of th	e audıt,					
	review, or compilation of its financial statements and selection of an independent accountant?		2c				
	If the organization changed either its oversight process or selection process during the tax year, explain in Scho	edule O.		*			
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issue	d on a			;		
	separate basis, consolidated basis, or both:				,		
	Separate basis Consolidated basis Both consolidated and separate basis						
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sir	ngle Audıt			1		
	Act and OMB Circular A-133?		3a		х		
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ	red audit		•			
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits.		3b		<u> </u>		
			Form	990 (2011)		

SCHEDULE A

(Form 990 or 990-EZ)

Public Charity Status and Public Support

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

➤ Attach to Form 990 or Form 990-EZ. ➤ See separate instructions.

OMB No 1545-0047

2011

Open to Public

Department of the Treasury
Internal Revenue Service

Name of the organization

SPIRITUALITY FOR KIDS INTERNATIONAL, INC

FKA SFK SUCCESS FOR KIDS, INC.

Inspection
Employer identification number

26-2224994

Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) 10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h. **b** Type II c Type III - Functionally integrated Type III - Other By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, Yes the governing body of the supported organization? 11g(i) (ii) A family member of a person described in (i) above? 11g(ii) (iii) A 35% controlled entity of a person described in (i) or (ii) above? h Provide the following information about the supported organization(s). (iii) Type of (v) Did you notify the (vi) Is the (iv) Is the organization (i) Name of supported (ii) EIN (vii) Amount of organization gaňizátion in col. in col. (i) listed in your organization in col. organization support (i) organized in the U.S.? (described on lines 1-9 governing document? (i) of your support? above or IRC section (see instructions)) Yes No Yes Nο Yes

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

Schedule A (Form 990 or 990-EZ) 2011

132021 01-24-12 Schedule A (Form 990 or 990-EZ) 2011 FKA SFK SUCCESS FOR KIDS, INC.

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

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

Sec	ction A. Public Support							
Cale	ndar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total	
1	Gifts, grants, contributions, and	<u> </u>		1		7,		
	membership fees received. (Do not							
	include any "unusual grants.")				9,453,419.	940,796.	10,394,215.	
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				9,453,419.	940,796.	10,394,215.	
5	The portion of total contributions							
	by each person (other than a	4						
	governmental unit or publicly	7 7						
	supported organization) included	.*	, , ,			*		
	on line 1 that exceeds 2% of the					>		
	amount shown on line 11,							
	column (f)			*			1,085,261.	
6	Public support. Subtract line 5 from line 4	\$ 1/4 >		\$			9,308,954.	
	ction B. Total Support	<u> </u>		<u> </u>				
	ndar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total	
	Amounts from line 4	(1)		(-,	9,453,419.	940,796.	10,394,215.	
8	Gross income from interest,			-	· · · · · · · · · · · · · · · · · · ·	·		
_	dividends, payments received on							
	securities loans, rents, royalties	•	į					
	and income from similar sources		ļ		371,270.	138,985.	510,255.	
9	Net income from unrelated business					, -	· · _ · _ ·	
	activities, whether or not the							
	business is regularly carried on							
10	Other income. Do not include gain	-						
	or loss from the sale of capital	!						
	assets (Explain in Part IV.)	1			10,394.	31,124.	41,518.	
11	Total support. Add lines 7 through 10	· *		\$	£ * .		10,945,988.	
12	Gross receipts from related activities	etc. (see instructi	ons)	l —		12	, , .	
13		•	•	d. fourth, or fifth ta	x vear as a sectio			
	organization, check this box and stop	=	, ,		,		▶ x	
Se	ction C. Computation of Pub		rcentage	· · · · · · · · · · · · · · · · · · ·				
14	Public support percentage for 2011 (line 6, column (f) d	ivided by line 11, o	column (fl)		14	%	
15	Public support percentage from 2010	Schedule A, Part	II, line 14			15	%	
16a	33 1/3% support test - 2011. If the	organization did no	ot check the box o	n line 13, and line 1	14 is 33 1/3% or n	nore, check this bo		
	stop here. The organization qualifies	as a publicly supp	orted organization	1			ightharpoons	
t	b 33 1/3% support test - 2010. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box							
	and stop here. The organization qualifies as a publicly supported organization							
17a	10% -facts-and-circumstances tes	t - 2011. If the org	janization did not d	check a box on line	13, 16a, or 16b,	and line 14 is 10%	or more,	
	and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization							
	meets the "facts-and-circumstances"				•	_		
t	10% -facts-and-circumstances tes	t - 2010. If the org	janization did not d	check a box on line	13, 16a, 16b, or	17a, and line 15 is 1	10% or	
	more, and if the organization meets the							
	organization meets the "facts-and-circ						. ▶□	
18	Private foundation. If the organization	on did not check a	box on line 13, 16	a, 16b, 17a, or 17b	, check this box a	ind see instructions	<u>,</u> ▶□	
					Sche	dule A (Form 990	or 990-EZ) 2011	

Schedule A (Form 990 or 990-EZ) 2011 Part III | Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails	to
gualify under the tests listed below, please complete Part II.)	

Section A. Public Support						
Calendar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1 Gifts, grants, contributions, and	,_,	1	1 ,5,230	1,7,2,1,5	1 3,2311	17.514
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-				İ		
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		ļ				
6 Total. Add lines 1 through 5		<u> </u>				
7a Amounts included on lines 1, 2, and						
3 received from disqualified persons			<u> </u>	<u>L</u>		
b Amounts included on lines 2 and 3 received						
from other than disqualified persons that		1				
exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support (Subtract line 7c from line 6)				 		
Section B. Total Support	*	1	<u> </u>	<u> </u>	<u> </u>	<u> </u>
Calendar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
9 Amounts from line 6	(4) 2007	(B) 2000	(6) 2005	(4) 2010	(e) 2011	(1) 10(21
10a Gross income from interest,				-		
dividends, payments received on					İ	
securities loans, rents, royalties						
and income from similar sources	 	 		ļ	 	
b Unrelated business taxable income				ļ		
(less section 511 taxes) from businesses						
acquired after June 30, 1975				ļ		
c Add lines 10a and 10b						
11 Net income from unrelated business						
whether or not the business is						
regularly carried on					<u> </u>	
12 Other income. Do not include gain						
or loss from the sale of capital assets (Explain in Part IV)					<u> </u>	
13 Total support (Add lines 9, 10c, 11, and 12)						
14 First five years. If the Form 990 is for	the organization	's first, second, thi	d. fourth, or fifth t	ax vear as a secti	on 501(c)(3) organiz	ration.
check this box and stop here	3	,	-,,	,	· (-)(-) 9	 ,
Section C. Computation of Publi	c Support Pe	ercentage				
15 Public support percentage for 2011 (In		_	column (fl)	-	15	
16 Public support percentage from 2010			Solution (1))	- •	16	
Section D. Computation of Inves					110 1	
17 Investment income percentage for 20°	•				147	
	•		ile 13, coluinin (i))		17	9
18 Investment income percentage from 2			on line 4.4	. 45 H	22.1/20/	(7
19a 33 1/3% support tests - 2011. If the d						i / is not
more than 33 1/3%, check this box an						. ▶∟
b 33 1/3% support tests - 2010. If the						and
line 18 is not more than 33 1/3%, chec		-	•		-	▶⊑
20 Private foundation. If the organization	did not check a	box on line 14, 19	a, or 19b, check t			<u></u>
32023 01-24-12			4 -	Sc	hedule A (Form 99	0 or 990-EZ) 20

Schedule A (Form 990 or 990-EZ) 2011 FKA SFK SUCCESS FOR KIDS, INC. Part IV Supplemental Information. Complete this part to provide the explanations required by Part II.	26-2224994	Page 4
Part IV Supplemental Information. Complete this part to provide the explanations required by Part II,	line 10, Part II, line 17a	or 17b,
and Part III, line 12. Also complete this part for any additional information. (See instructions).		_
SCHEDULE A, PART II, LINE 10, EXPLANATION FOR OTHER INCOME:		
2010 OTHER REVENUE: \$10,394		
2011 OTHER REVENUE: \$31,124		
		
	, -	
		
		 -
		
	<u> </u>	-

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

OMB No 1545-0047 Open to Public Inspection

Name of the organization

SPIRITUALITY FOR KIDS INTERNATIONAL, INC

Employer identification number

_	FKA SFK SUCCESS FOR KIDS, IN		26-2224994
Pa	t I Organizations Maintaining Donor Advise	d Funds or Other Similar Funds or	Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, line		
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in v	vriting that the assets held in donor advised t	funds
	are the organization's property, subject to the organization's	exclusive legal control?	Yes No
6	Did the organization inform all grantees, donors, and donor a	dvisors in writing that grant funds can be use	ed only
	for charitable purposes and not for the benefit of the donor o	r donor advisor, or for any other purpose con	nferring
	impermissible private benefit?		Yes No
Pai		anization answered "Yes" to Form 990, Part	
	Purpose(s) of conservation easements held by the organization		· · · · · · · · · · · · · · · · · · ·
-	Preservation of land for public use (e.g., recreation or e		cally important land area
	Protection of natural habitat	Preservation of a certified	
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualif	ied conservation contribution in the form of a	conservation easement on the last
_	day of the tax year	is a soriest valish sorial ballott in the form of a	toonservation easement on the last
	day of the tax your		Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
C	Number of conservation easements on a certified historic stri	icture included in (a)	2c
d	Number of conservation easements included in (c) acquired a	• • •	20
u	listed in the National Register	arter of 17700, and not on a historic structure	2d
3	Number of conservation easements modified, transferred, rel	again arting uphad, or tarminated by the arr	
•	year	eased, extinguished, or terminated by the ort	garlization during the tax
4	Number of states where property subject to conservation eas	coment is located	
5	Does the organization have a written policy regarding the per		
·	violations, and enforcement of the conservation easements it		Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting,		
7	Amount of expenses incurred in monitoring, inspecting, and	_	· · · ———
8	Does each conservation easement reported on line 2(d) abov	-	
0	and section 170(h)(4)(B)(ii)?	e satisfy the requirements of section 170(n)(2	Yes No
9	In Part XIV, describe how the organization reports conservati	On agreements in its revenue and expense ats	
•	include, if applicable, the text of the footnote to the organization	•	
	conservation easements	ion's illiancial statements that describes the	organization's accounting for
Pai	t III Organizations Maintaining Collections of	Art. Historical Treasures, or Othe	er Similar Assets
	Complete if the organization answered "Yes" to Form		
	If the organization elected, as permitted under SFAS 116 (AS		t and balance sheet works of art
	historical treasures, or other similar assets held for public exh		
	the text of the footnote to its financial statements that descri		or public service, provide, in rair XIV,
b	If the organization elected, as permitted under SFAS 116 (AS		d halance sheet works of art, historical
	treasures, or other similar assets held for public exhibition, ec		·
	relating to these items.	racation, or research in fatherance of public	service, provide the following amounts
	· ·		▶ ¢
	(i) Revenues included in Form 990, Part VIII, line 1		
•	(ii) Assets included in Form 990, Part X	ourse or other similar seeds for financial an	. • • • • • • • • • • • • • • • • • • •
2	If the organization received or held works of art, historical tree	-	iin, provide
_	the following amounts required to be reported under SFAS 1:	TO (MOU 900) relating to these items:	▶ ¢
a	Revenues included in Form 990, Part VIII, line 1		*
D	Assets included in Form 990, Part X		> \$

Schedule D (Form 990) 2011

Schedule D (Form 990) 2011

7 T N	CDD	CITCCECC	TIDO	TNC

Part VII Investments - Other Securities	See Form 990, Part X, III	ne 12.		
' (a) Description of security or category (including name of security)	(b) Book value	Cos	(c) Method of valua t or end-of-year mark	
(1) Financial derivatives				
(2) Closely-held equity interests				
(3) Other				
(A)			<u> </u>	
(B)				
(C)				
(D)				
(E)				
(F)				
(G)				
(H)				
(1)				
Total. (Col (b) must equal Form 990, Part X, col (B) line 12.)	>			
Part VIII Investments - Program Relate	d. See Form 990, Part X,	line 13.		
(a) Description of investment type	(b) Book value	Cos	(c) Method of valua at or end-of-year mar	
(1)			<u></u>	<u> </u>
(2)				
(3)				
(4)			-	
(5)				
(6)			 _	
			_	
(8)				
				_
(10)	_		<u> </u>	-
Total. (Col (b) must equal Form 990, Part X, col (B) line 13.)		<u> </u>	<i>*</i>	
Part IX Other Assets. See Form 990, Part X				(b) Book value
	(a) Description			(b) Book value
(1)				
(2)				
(3)	 · -			
(4)				
(5)				
(6)				
(8)				
(9)				
(10)	Di Iron 15 i	<u> </u>		
Total. (Column (b) must equal Form 990, Part X, col (l) Part X Other Liabilities. See Form 990, Part X				
(a) Decorption of liability	art A, line 25.	(b) Book value		
		(b) DOOK Value		
(1) Federal income taxes (2) DUE TO AFFILIATES		400,878.		
		400,070.		
(3)				
(5)				
<u>(6)</u>				
(7)		· · · · · · · · · · · · · · · · · · ·		
(8)			*	A
(9)				
(10)				*
(11)	Pline 25 l	400,878.	*	
Total. (Column (b) must equal Form 990, Part X, col (in Fin 48 (ASC 740) Footnote in Part XIV, provide the text of the too 2. FIN 48 (ASC 740)	mote to the organization's financial	Statements that reports the organi	zation's liability for uncerta	in tax positions under

132053 01-23-12

Schedule D (Form 990) 2011

SCHEDULE F (Form 990)

Statement of Activities Outside the United States

➤ Complete if the organization answered "Yes" to Form 990,

Part IV, line 14b, 15, or 16.

➤ Attach to Form 990. ➤ See separate instructions.

OMB No 1545-0047 **Open to Public** Inspection

Department of the Treasury Internal Revenue Service

Part I

Name of the organization SPIRITUALITY FOR KIDS INTERNATIONAL, INC

FKA SFK SUCCESS FOR KIDS, INC.

Employer identification number

26-2224994

General Information on Activities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 14b.

1	1 For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance,						
	the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?						
2	For grantmakers. Desc	ribe in Part V the	organization's p	procedures for monitoring the use of its	s grants and other assistance outs	ide the	
	United States.						
3	Activities per Region (Ti		I, line 3 table ca	in be duplicated if additional space is r	needed.)		
	(a) Region	(b) Number of	(c) Number of	(d) Activities conducted in region	(e) If activity listed in (d)	(f) Total	
		offices	employees, agents, and independent contractors	(by type) (e.g., fundraising, program	is a program service,	expenditures for and	
		ın the region	independent contractors	services, investments, grants to recipients located in the region)	describe specific type of service(s) in region	investments	
			ın region	recipients located in the region	or service(s) in region	ın region	
					· · · · · · · · · · · · · · · · · · ·		
					=		
	<u> </u>				· -		
					· · · · · · · · · · · · · · · · · · ·		
3 а	Sub-total	0	0			0.	
b	Total from continuation						
	sheets to Part I	0	0			0.	
С	Totals (add lines 3a						

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

Schedule F (Form 990) 2011

Page 2

26-2224994

×

FKA SFK SUCCESS FOR KIDS, INC.

Schedule F (Form 990) 2011

Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Check this box if no one recipient received more than \$5,000 Part II

Part II can be duplicated if additional space is needed

(i) Method of .valuation (book, FMV, appraisal, other) CASH GRANT CASH GRANT CASH GRANT (h) Description of non-cash assistance N/A 0.N/A ٥. 。 (g) Amount of non-cash assistance cash disbursement (f) Manner of 170,000.WIRE 312,314.WIRE 44,026.WIRE of cash grant (e) Amount (d) Purpose of PROGRAM FUNDING PROGRAM FUNDING PROGRAM FUNDING grant CENTRAL AMERICA (c) Region SOUTH AMERICA MIDDLE EAST (b) IRS code section and EIN (if applicable) (a) Name of organization

Schedule F (Form 990) 2011

29

Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by

the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter

Enter total number of other organizations or entities

က

N

Page 3

26-2224994

FKA SFK SUCCESS FOR KIDS, INC.

Schedule F (Form 990) 2011

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16.

(h) Method of valuation (book, FMV, appraisal, other) (g) Description of non-cash assistance (f) Amount of non-cash assistance (e) Manner of cash disbursement (c) Number of (d) Amount of recipients cash grant Part III can be duplicated if additional space is needed. (b) Region (a) Type of grant or assistance

Schedule F (Form 990) 2011

Schedule F (Form 990) 2011

SCHEDULE G (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

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

OMB No 1545-0047

Open To Public Inspection

Name of the organization SPIRITUALI FKA SFK SU	TY FOR KIDS INTERNATIONAL, CCESS FOR KIDS, INC.	INC			26-2224994	ntification number
	Complete if the organization answ	ered "\	'es" to	o Form 990, Part IV, I	ine 17. Form 990-EZ	filers are not
Indicate whether the organization rai	sed funds through any of the following of the following with a Solicita sol	tion of tion of fundra (includerofess	non-g gover using ding o ional f	overnment grants nment grants events fficers, directors, trus fundraising services?	stees or X Yes	
(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) fundr have c or con contrib	Did aiser ustody trol of utions?	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
GLOBAL IMPACT - 33 WEST 17TH STREET, 10TH FLOOR, NEW YORK,	BIKE RIDE	Yes	No	124,021.	26,578.	97,443.
						,
						
		 				
		├				
		-				
		ļ				
		_				
Total			•	124,021.	26,578.	97,443.
List all states in which the organizate or licensing.	on is registered or licensed to solicit	contrib	ution	s or has been notified	d it is exempt from re	egistration
CA						
				<u></u>		
LHA Paperwork Reduction Act Notice	, see the Instructions for Form 990	or 990	-EZ.		Schedule G (Forr	n 990 or 990-EZ) 2011

SEE PART IV FOR CONTINUATIONS

		le G (Form 990 or 990-EZ) 2011 FKA SFK SU				224994 Page 2
Pa	IT I	Fundraising Events. Complete if the of fundraising event contributions and gi				
-		or lundraising event contributions and gi	(a) Event #1	(b) Event #2	(c) Other events	pts greater than \$5,000.
			(u) Event #1	(b) Event #2	NONE	(d) Total events
			LUNCHEON	BIKE RIDE		(add col. (a) through
an an			(event type)	(event type)	(total number)	col. (c))
Ď						
Revenue	1	Gross receipts	93,795.	124,021.		217,816.
	2	Less. Charitable contributions	76,620.	111,645.		188,265.
		Cross magnes (line 1 minus line 2)	17 175	12 276		20 551
	3	Gross income (line 1 minus line 2)	17,175.	12,376.		29,551.
	4	Cash prizes				
	•				.	
တ္ဆ	5	Noncash prizes	150.			150.
suse						
Direct Expenses	6	Rent/facility costs		4,189.		4,189.
t E						
ä	7	Food and beverages	17,025.	1,387.		18,412.
	8	Entertainment				
	9	Other direct expenses		6,800.		6,800.
	10	Direct expense summary. Add lines 4 throug	h 9 in column (d)	<u></u>	•	(29,551)
	11	Net income summary. Combine line 3, colum	n (d), and line 10			0.
Pa	rt		answered "Yes" to Form	990, Part IV, line 19, or i	reported more than	
_		\$15,000 on Form 990-EZ, line 6a.		1 5		<u> </u>
e ne			(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
Revenue				Billigo/progressive billige		coi. (a) through coi. (c)
æ	1	Gross revenue				

S	2	Cash prizes				
Expenses					_	
χĎ	3	Noncash prizes				
ಕ್ಷ	_	Part/facility and to				
D T	4	Rent/facility costs				
	5	Other direct expenses				
	Ť	сина инсектор	Yes %	Yes %	Yes %	4
	6	Volunteer labor	□ No	□ No	No No	
	7	Direct expense summary. Add lines 2 throug	h 5 ın column (d)			(
	_				_	
	8	Net gaming income summary. Combine line	1, column d, and line 7		<u>_</u>	
a	Ēn	ter the state(s) in which the organization opera	ates gaming activities.			
		the organization licensed to operate gaming a	_	states?		Yes No
		No," explain:		•		
		ere any of the organization's gaming licenses r				Yes No
b	lf "	Yes," explain:				
	_					
	_				<u> </u>	
1320	82 0	1-23-12			Schedule G (Fo	rm 990 or 990-EZ) 2011

Sch	edule G (Form 990 or 990-EZ) 2011 FKA SFK SUCCESS FOR KIDS, INC.	26-2224	994	Page 3
11	Does the organization operate gaming activities with nonmembers?	_[Yes	No No
	Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed			
	to administer charitable gaming?	[Yes	☐ No
13	Indicate the percentage of gaming activity operated in:	- 1	1	
	The organization's facility		13a	%
	An outside facility	<u> </u>	13b	
	Enter the name and address of the person who prepares the organization's gaming/special events books and record	_	100	
17	Effect the harne and address of the person who prepares the organization's garming/special events books and record	us.		
	Name ►			
	Name			
	Address			
	Address			
45.	Don't have been a section to take a third and form the section of	Г		
158	Does the organization have a contract with a third party from whom the organization receives gaming revenue?	L	Yes	∟l No
b	olf "Yes," enter the amount of gaming revenue received by the organization > \$ and the amount of gaming revenue received by the organization in the amount of gaming revenue received by the organization in the amount of gaming revenue received by the organization in the amount of gaming revenue received by the organization in the amount of gaming revenue received by the organization in the amount of gaming revenue received by the organization in the amount of gaming revenue received by the organization in the amount of gaming revenue received by the organization in the amount of gaming revenue received by the organization in the amount of gaming revenue received by the organization in the amount of gaming revenue received by the organization in the amount of gaming revenue received by the organization in the amount of gaming revenue received by the organization in the amount of gaming revenue received by the organization in the gaming revenue received by the organization in the gaming revenue received by the organization in the gaming revenue received by the organization in the gaming revenue received by the organization in the gaming revenue received by the organization in the gaming revenue received by the organization in the gaming received by the gaming revenue received by the gaming received by the gam	unt		
	of gaming revenue retained by the third party > \$			
C	If "Yes," enter name and address of the third party:			
	Name	-		·
	Address			
16	Garning manager information.			
	Name >	_		
	Gaming manager compensation > \$			
	Description of services provided	_		
	Director/officer Employee Independent contractor			
17	Mandatory distributions:			
	Is the organization required under state law to make charitable distributions from the gaming proceeds to			
	retain the state gaming license?	Γ	Yes	☐ No
	 Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent it 	n the		
•	organization's own exempt activities during the tax year > \$	in the		
Da	Irt IV Supplemental Information. Complete this part to provide the explanations required by Part I, line 2b, colu	mac (w) c	nd (v) on	l Dort III
I. e	· · · · · · · · · · · · · · · · · · ·			
—	lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this part to provide any additional info	ormation (see instru	cuons).
ecr.	EDULE G, PART I, LINE 2B, LIST OF TEN HIGHEST PAID FUNDRAISERS:			
501	BDOGE C, TAKE I, BING 25, BIST OF THE HIGHEST TAID FORDINATIONS:			
/ - \	NAME OF BIRDDATGER, GLORAL TARAGE			
(1)	NAME OF FUNDRAISER: GLOBAL IMPACT			
(1)	ADDRESS OF FUNDRAISER:			
33	WEST 17TH STREET, 10TH FLOOR, NEW YORK, NY 10011-5511			
1220	92.01-23-12 Schodula	G (Form C	200 0= 000	DEZ\ 2011

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SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

2011
Open to Public Inspection

Name of the organization

SPIRITUALITY FOR KIDS INTERNATIONAL, INC

Employer identification number

FKA SFK SUCCESS FOR KIDS, INC.	26-2224994				
FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:					
SPIRITUALITY FOR KIDS IS A 501(C)(3) NON-PROFIT ORGANIZATION THAT					
PROVIDES PARENTS, EDUCATORS AND CHILDREN FREE ONLINE CLASSES TO FOSTER					
SPIRITUAL AWARENESS AND DIALOGUE. BASED ON THE UNIVERSAL PRINCIPLES OF					
KABBALAH AS TAUGHT BY THE KABBALAH CENTRE, SPIRITUALITY FOR KIDS IS AN					
ENTERTAINING, SELF-GUIDED PROGRAM THAT ENCOURAGES CHILDREN TO REFLECT					
ON THEIR ACTIONS, TO SEE CHALLENGES AS OPPORTUNITIES, TO DEVELOP					
SELF-WORTH, AND TO ACTIVATE THE DESIRE TO MAKE A DIFFERENCE IN THE					
WORLD AROUND THEM.					
FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:					
SPIRITUALITY FOR KIDS IS A 501(C)(3) NON-PROFIT ORGANIZATION THAT					
PROVIDES PARENTS, EDUCATORS AND CHILDREN FREE ONLINE CLASSES TO FOSTER					
SPIRITUAL AWARENESS AND DIALOGUE, BASED ON THE UNIVERSAL PRINCIPLES OF					
KABBALAH AS TAUGHT BY THE KABBALAH CENTRE, SPIRITUALITY FOR KIDS IS AN					
ENTERTAINING, SELF-GUIDED PROGRAM THAT ENCOURAGES CHILDREN TO REFLECT					
ON THEIR ACTIONS, TO SEE CHALLENGES AS OPPORTUNITIES, TO DEVELOP					
SELF-WORTH, AND TO ACTIVATE THE DESIRE TO MAKE A DIFFERENCE IN THE					
WORLD AROUND THEM.					
FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS:					
IN PARTICIPATING PUBLIC SCHOOLS NATIONWIDE. THE WEEKLY LESSONS WERE					
PROVIDED BY TRAINED SFK TEACHERS AND VOLUNTEERS IN PUBLIC SCHOOLS AND					
ORGANIZATIONS LOCATED IN CALIFORNIA, NEW YORK, FLORIDA, CHICAGO AND					
NEVADA.					

IN MAY 2011, SFK DETERMINED THAT THEY COULD REACH MORE CHILDREN BY

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

Schedule O (Form 990 or 990-EZ) (2011)

. . .

AS REQUIRED BY LAW.

FORM 990, PART VI, SECTION C, LINE 19: UPON REQUEST FROM THE GENERAL

PUBLIC, THE ORGANIZATION WILL PROVIDE ACCESS TO THE ORGANIZATION'S

GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICIES AND FINANCIAL STATEMENTS

Schedule O (Form 990 or 990-EZ) (2011)	 	Page 2
Name of the organization SPIRITUALITY FOR KIDS INTERNATIONAL,	INC	Employer identification number
FKA SFK SUCCESS FOR KIDS, INC.		26-2224994
FORM 990, PART XI, LINE 5, CHANGES IN NET ASSETS:		
NET UNREALIZED LOSSES ON INVESTMENTS:	-473,203.	
DONATED SERVICES AND USE OF FACILITIES:	3,556.	
PRIOR PERIOD ADJUSTMENTS:	-14,141.	
TOTAL TO FORM 990, PART XI, LINE 5	-483,788.	
FORM 990, PART XII, LINE 2:		
THE ORGANIZATION'S AUDIT OF THE FINANCIAL STATEMENTS HAS NO	OT BEGUN AT	
THE TIME OF FILING FORM 990. ONCE THE AUDIT IS COMPLETED FO	OR THE	
CURRENT YEAR, SHOULD THERE BE ANY CHANGES TO THE NUMBERS RE	EPORTED IN	
THE INFORMATIONAL RETURN, THERE WILL BE AN AMENDMENT TO THE	Е 990 ТО	
REFLECT SUCH CHANGES. THE ORGANIZATION WILL HAVE AN AUDIT (COMMITTEE	 .
THAT WILL OVERSEE FINANCIAL STATEMENT AUDIT AND SELECTION (OF AN	
INDEPENDENT ACCOUNTANT.		·
	· · · · · · · · · · · · · · · · · · ·	

Department of the Treasury Internal Revenue Service SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships

Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37.

► Attach to Form 990.

► See separate instructions.

2011 Open to Public Inspection

OMB No 1545-0047

Employer identification number 26-2224994

> Part I identification of Disregarded Entities (Complete if the organization answered "Yes" to Form 990, Part IV, line 33) FKA SFK SUCCESS FOR KIDS, INC. Name of the organization

SPIRITUALITY FOR KIDS INTERNATIONAL, INC

Ξ <u>e</u> 9 <u>ပ</u> (a

Name, address, and EIN of disregarded entity	Primary activity	Legal domicile (state or foreign country)	Total income	End-of-year assets	Direct controlling entity
Part II Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.)	tions (Complete if the organization an	swered "Yes" to Form 990, Par	t IV, line 34 because	e it had one or more re	slated tax-exempt

(a)	(q)	(0)	(p)	(e)	(t)	(6)	, Kr. 43
Name, address, and EIN	Primary activity	Legal domicile (state or	Exempt Code	Public charity	Direct controlling	controlled	(c) Ya):
of related organization		foreign country)	section	status (if section	entity	entrty?	2
				501(c)(3))		Yes	Š
KABBALAH CENTRE INTERNATIONAL, INC							
95-4685000, 1108 S. ROBERTSON BLVD., LOS	CHURCH & SPIRITUAL						
ANGELES, CA 90035	ORGANIZATION	CALIFORNIA	501(C)(3)	LINE 1	N/A		×
KABBALAH CHILDRENS ACADEMY - 91-2162623							
1108 S. ROBERTSON BLVD.							
LOS ANGELES, CA 90035	EDUCATIONAL ORGANIZATION	CALIFORNIA	501(C)(3)	LINE 2	N/A		×
RAISING MALAWI, INC 74-3248665							
C/O NKSF LLP 10960 WILSHIRE BLVD, 5TH FLOOR TO ASSIST THE	TO ASSIST THE POOR AND						
LOS ANGELES, CA 90024	NEEDY	CALIFORNIA	501(C)(3)	LINE 11A	N/A		×
KABBALAH CENTRE OF NEW YORK, INCORPORATED -							
13-4093698, 155 EAST 48TH STREET, NEW YORK,	CHURCH & SPIRITUAL						
NY 10017	ORGANIZATION	NEW YORK	501(C)(3)	LINE 1	N/A		×

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Schedule R (Form 990) 2011

FKA SFK SUCCESS FOR KIDS, INC.

Schedule R (Form 990)

Part II Continuation of Identification of Related Tax-Exempt Organizations	kempt Organizations		:				
(a) Name address and FIN	(b) Primary activity	(c)	(d) Exempt Code	(e) Public chanty	(f) Direct controlling	(g) Section 512(b)(13)	2(b)(13)
of related organization		foreign country)		status (if section 501(c)(3))		organization?	No No
KABBALAH CENTRE OF FLORIDA, INCORPORATED - 65-0638140, 2725 NE 163RD STREET, NORTH MIAMI BEACH, FL 33160	CHURCH & SPIRITUAL ORGANIZATION	FLORIDA	501(C)(3)	LINE 1	W/A		×
FRES OF THE UNITED 5 - 95-4436084, 1062 GELES, CA 90035	STATES, S. ROBERTSON CHURCH & SPIRITUAL ORGANIZATION	CALIFORNIA	501(C)(3)	LINE 1	N/A		×
					,		

SCHEDULE FOR ALDS INTERNATIONAL,
Schedule R (Form 990) 2011 FRA SFR SUCCESS FOR KIDS, INC.

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

3

Page 2

26-2224994

Percentage ownership Seneral or Percentage managing ownership .00% Schedule R (Form 990) 2011 Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.) 3 Ξ Yes ٥. Share of end-of-year assets Code V-UBI amount in box 20 of Schedule K-1 (Form 1065) <u>6</u> \equiv ö Share of total income ate allocations? Disproportion-Yes No Ξ Type of entity (C corp, S corp, or trust) Share of end-of-year assets **e** <u>6</u> CORP (d)
| Direct controlling entity Share of total income ε Predominant income (related, unrelated, excluded from tax under sections 512-514) Legal domicite (state or foreign country) 5 e 41 Primary activity Direct controlling entity 9 REAL ESTATE € (c)
Legal
domicile
(state or
foreign
country) Primary activity 9 - 95-4799957 Name, address, and EIN of related organization KABBALAH ENTERPRISES, INC. Name, address, and EIN of related organization <u>a</u> 1108 S. ROBERTSON BLVD. LOS ANGELES, CA 90035 132162 01-23-12 Part IV

Schedule R (Form 990) 2011 FRA SFR SUCCESS FOR KIDS, INC.

Part V Transactions With Related Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34, 35, 35a, or 36.)

Page 3

26-2224994

				ľ	Į,	:
Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.				7	Xes	ဍ
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?	s with one or more re	alated organizations listed	in Paris II-IV?	†	Ť	,
a Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity				Е	1	ا،
b Gift, grant, or capital contribution to related organization(s)				9		×
c Gift, grant, or capital contribution from related organization(s)				10		×
d Loans or loan quarantees to or for related organization(s)				P		×
				-	×	
f Sale of assets to related organization(s)				14		×
g Purchase of assets from related organization(s)				1g		×
h Exchange of assets with related organization(s)				ŧ		×
i Lease of facilities, equipment, or other assets to related organization(s)				F		×
(A) months and behalf a most advance and the second in the political and second in the				÷	×	~
Lease of facilities, equipment, or other assets figure related organization	1-7			+	T	>
Performance of services or membership or fundraising solicitations for related organization(s) Deformance of services or membership or fundraising solicitations by related organization(s)	inization(s) pization(s)			¥ =	T	. ×
m Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	on(s)			Ę		×
n Sharing of paid employees with related organization(s)				무		×
						:
				위	1	×
p Reimbursement paid by related organization(s) for expenses				4	1	×
n Other transfer of cash or property to related organization(s)				Ę	×	_
				╀	×	
2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.	ho must complete th	is line, including covered	relationships and transaction thresholds.		1	
(a) Name of other organization	(b) Transaction type (a-r)	(c) Amount involved	(d) Method of determining amount involved			
(1) KABBALAH CENTRE INTERNATIONAL, INC.	ņ	58,650.FWV	ЕМУ			
(2) KABBALAH CHILDRENS ACADEMY	ĸ	47,148.FMV	FMV			
(3)						
(4)						
(5)						
(6)						
132.163 01-23-12	42		Schedule R (Form 990) 2011	(Form	(066	2011

Schedule R (Form 990) 2011 FKA SFK SUCCESS FOR KIDS, INC.

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

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue). It is activities to each enstructions regarding exclusion for certain investment partnerships.

נוומן אמא ווטר מיופינים טוקמווועם של היים היים ווסויטים ווסויסים ווסויסים ווסויסים ווסויסים ווסויסים ווסיים	מייים פייים שליים בייים מייים מייים			-				[٤	177
(a)	(9)	(၁)	(e)	(e)		(6)	<u> </u>		€	¥)
Name, address, and EIN of entity	Primary activity	Legal domicile (state or foreign	(related, unrelated, 501(c)(3)	e partners sec 501(c)(3)	Share of total	Share of end-of-year	Dispropor- tonate allocations?	Dispropor- Code V-UBI General or/Percentage tonate amount in box 20 managing ownership allocations? of Schedule K-1 partner?	General or managing partner?	Percentage ownership
		country)	under section 512-514)	S No	income	assets	Yes No	(Form 1065)	Yes No	
									_	
							_			
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				$\frac{1}{4}$	1]		1	

Schedule R (Form 990) 2011

Schedule F	R (Form 990) 2011	FKA SFK SUCCESS FOR KIDS, INC.	26-2224994	Page 5
Part VII	R (Form 990) 2011 Supplemental Info	rmation		
	Complete this part to pro	ovide additional information for responses to questions on Schedule R	(see instructions).	
	Sample of the part to pit		,	
				
			 .	
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		<u> </u>		
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132 165		· · · · · · · · · · · · · · · · · · ·		

Form 8868 (Rev. 1-2012)					Pag	<u>де 2</u>
 If you are filing for an Additional (Not Automatic) 3-Month 	Extension,	complete only Part II and check th	is box		X	
Note. Only complete Part II if you have already been granted a			filed Form	8868.		
 If you are filing for an Automatic 3-Month Extension, comp 	plete only Pa	ert I (on page 1).				
Part II Additional (Not Automatic) 3-Month	Extensio	n of Time. Only file the origi	nal (no c	opies n	eeded).	
		Enter filer's	s identifyi	ng numb	er, see instructio	กร
Type or Name of exempt organization or other filer, see ins	structions		Employe	r identific	ation number (EIN	l) or
print						
File by the SFK SUCCESS FOR KIDS, INC.			х	26-22	24994	
due date for Number, street, and room or suite no. If a P.O. box	k, see instruc	tions.	Social se	curity nu	mber (SSN)	
return See 10960 WILSHIRE BLVD., SUITE 700					·	
City, town or post office, state, and ZIP code. For	a foreign add	dress, see instructions.				
LOS ANGELES, CA 90024						
Enter the Return code for the return that this application is for	(file a separa	te application for each return)			0 :	1
	···					
Application	Return	Application			Retu	rn
ls For	Code	Is For			Cod	e
Form 990	01					
Form 990-BL	02	Form 1041-A			08	
Form 990-EZ	01	Form 4720			09	
Form 990-PF 04 Form 5227 10						
Form 990-T (sec. 401(a) or 408(a) trust) 05 Form 6069 11						
Form 990-T (trust other than above)	06	Form 8870		<u> </u>	12	
STOP! Do not complete Part II if you were not already gran			viously file	ed Form	8868.	
MONIQUE GREEN, GLOBA						
• The books are in the care of 1054 S. ROBERTSON BI	LVD LOS					
Telephone No. ▶ 310-464-0570	•	FAX No.				
If the organization does not have an office or place of busing					▶ ∟	
If this is for a Group Return, enter the organization's four dig.	4					าเธ
box ▶		ch a list with the names and EINs o	f all memb	ers the e	xtension is for.	
4 I request an additional 3-month extension of time until	NOVEMBER	15, 2012				
5 For calendar year 2011, or other tax year beginning		, and endir				<u> </u>
6 If the tax year entered in line 5 is for less than 12 months	s, check reas	on: L Initial return [Final	return		
Change in accounting period						
7 State in detail why you need the extension ADDITIONAL TIME IS NECESSARY TO GATHER INF	ODVAMION	TAY ORDER TO THE T				_
COMPLETE AND ACCURATE TAX RETURN.	URMATION	IN ORDER TO FILE A				
COMPLETE AND ACCURATE TAX RETURN.						
0-			<u> </u>			
8a If this application is for Form 990-BL, 990-PF, 990-T, 472	u, or 6069, e	enter the tentative tax, less any		1		
nonrefundable credits. See instructions.	°C		8a	\$		0.
b If this application is for Form 990-PF, 990-T, 4720, or 606	-		Ì	1		
tax payments made. Include any prior year overpayment	callowed as a	a credit and any amount paid	-			
previously with Form 8868.		the Abdie Comment of the control of	8b	\$		<u> </u>
c Balance due. Subtract line 8b from line 8a. Include your		in this form, it required, by using				^
EFTPS (Electronic Federal Tax Payment System). See in		st be completed for Part II	8c	\$		<u>0.</u>
Under penalties of pergry, Leclare that I have examined this form, inc		-	-	of mu beau	dadaa and helief	
it is true, correct, and correlete, and that I am authorized to prepare thi	s form.	oanying schedules and Statements, and t	o ine desi (ii iiiy KilOW	reuge and bellet,	
	► CPA		Dota	08/	/00 /12	

Form 8868 (Rev. 1-2012)

Form **8868** .

(Rev. January 2012) Department of the Treasury Internal Ravenue Service

Application for Extension of Time To File an Exempt Organization Return

► File a separate application for each return.

OMB No. 1545-1709

					-			
_	are filing for an Automatic 3-Month Extension, complet	-	• • • • • • • • • • • • • • • • • • • •		•	х		
	are filing for an Additional (Not Automatic) 3-Month Ex							
	omplete Part II unless you have already been granted a							
	ic filing (e-file). You can electronically file Form 8868 if y							
	to file Form 990-T), or an additional (not automatic) 3-more				•			
	o file any of the forms listed in Part I or Part II with the exc							
	Benefit Contracts, which must be sent to the IRS in pap		(see instructions). For more details o	on the elec	ctronic filing of this	form,		
Part I	v.irs gov/efile and click on e-file for Charities & Nonprofits		u de mais en inicia el Anomeno de marco					
	ation required to file Form 990-T and requesting an autor	natic 6-mc	onth extension - check this box and	complete	_	$\overline{}$		
Part I on	• • • • • • • • • • • • • • • • • • • •				P	• 📖		
	corporations (including 1120-C filers), partnerships, REM come tax returns.	ics, and t	rusts must use Form 7004 to reques	t an exten	ision of time			
	†							
Type or	Name of exempt organization or other filer, see instru	ctions.		Employe	r identification num	ber (EIN) or		
print								
file by the	SFK SUCCESS FOR KIDS, INC.			Х	26-2224994			
due date fo		ee instruc	tions.	Social se	curity number (SSI	1)		
eturn See	10960 WILSHIRE BLVD., SUITE 700							
City, town or post office, state, and ZIP code. For a foreign address, see instructions.								
	LOS ANGELES, CA 90024							
Enter the	Return code for the return that this application is for (file	a separa	te application for each return)		•	0 1		
Applicat	ion	Return	Application			Return		
s For Code Is For Cod								
Form 99	0	01	Form 990-T (corporation)			07		
Form 99	0-BL	02	Form 1041-A			08		
Form 99	0-EZ	01	Form 4720			09		
Form 99	0-PF	04	Form 5227			10		
Form 99	0-T (sec. 401(a) or 408(a) trust)	05	Form 6069			11		
Form 99	0-T (trust other than above)	06	Form 8870			12		
	MONIQUE GREEN, GLOBAL							
	ooks are in the care of > 1054 S. ROBERTSON BLVI	LOS	ANGELES, CA 90035					
Telep	hone No ▶ 310-464-0570		FAX No. ▶					
If the	organization does not have an office or place of business	s in the Ur	nited States, check this box	•	•	. 🔲		
If this	is for a Group Return, enter the organization's four digit	Group Exe	emption Number (GEN) I	f this is fo	r the whole group,	check this		
box ►	. If it is for part of the group, check this box	and atta	ch a list with the names and EINs of	all memb	ers the extension is	for.		
1 Ire	equest an automatic 3-month (6 months for a corporation	required	to file Form 990-T) extension of time	until				
	AUGUST 15, 2012 , to file the exemp	t organiza	tion return for the organization name	ed above.	The extension			
IS '	for the organization's return for:		_					
>	x calendar year 2011 or							
>	tax year beginning	, an	đ ending					
					_			
2 If t	he tax year entered in line 1 is for less than 12 months, c	heck reas	on Initial return III	Final retur	n			
	Change in accounting period							
	3							
3a If t	his application is for Form 990-BL, 990-PF, 990-T, 4720,	or 6069. e	nter the tentative tax, less any					
	nrefundable credits See instructions			3a	\$	0.		
	his application is for Form 990-PF, 990-T, 4720, or 6069,	enter anv	refundable credits and		 	<u> </u>		
	timated tax payments made. Include any prior year overp	_		3b	\$	0.		
_	lance due. Subtract line 3b from line 3a. Include your pa				_	<u>.</u>		
	using EFTPS (Electronic Federal Tax Payment System).	-	·	3c	\$	0.		
	If you are going to make an electronic fund withdrawal v							
	For Privacy Act and Paperwork Reduction Act Notice,			2.111 007 9-	Form 8868 (R			
		JUG HISU	40401IJ.		1 01111 0000 (H	6V 1-2012)		