Form **990** 

# **Return of Organization Exempt From Income Tax**

OMB No. 1545-0047

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

Dep	partment (	of the Treasury nue Service	Do not enter social security numbers on this form as it may	iduq ebam ed	ic.	Open to Public				
Inte			► Go to www.irs.gov/Form990 for instructions and the lates	t information.		Inspection				
A	For th		dar year, or tax year beginning , 2018, and end	ing		, 20				
В	Check i	f applicable:	Name of organization KaBOOM!, INC.		D Employe	er identification number				
	Address	s change	Doing business as			370904				
	Name o	hange	Number and street (or P.O. box if mail is not delivered to street address) Room/	suite	E Telephone number					
	Initial re	turn	4301 CONNECTICUT AVENUE, NW ML-1		(202)659-0215					
	Final retu	um/terminated	(202)	055-0215						
	Final return/terminated City or town, state or province, country, and ZIP or foreign postal code  Amended return WASHINGTON, DC 20008  GGross receiptions and ZIP or foreign postal code									
	ceipts \$ 33 , 740 , 979 .									
			Name and address of principal officer: JAMES SIEGAL, 4301 CONNECTICUT AVE. NW, ML-1, WASHINGTON, DC 20	ntal is inis a g	roup resum for s	ubordinates? Yes X No				
-	Tax-exe	mpt status:	Sol1(c)(3)	rib) Are all	subordinates	included? L Yes No				
Ţ	Wabsit		w.kaboom.org							
ĸ	_				exemption					
100	art I	Summa		ation: 199	6 M State	of legal domicile: DC				
	1									
63	l '	Drieily ues	cribe the organization's mission or most significant activities: KABOO	M! INC. IS TH	JAMIONAL S	NON-PROFIT ORGANIZATION				
2		DEDICAL	ED TO GIVING ALL KIDS - PARTICULARLY THOSE GRO	WING UP II	N POVER	TY IN AMERICA -				
Ë	١.	THE CHI	LDHOOD THEY DESERVE FILLED WITH BALANCED AND A	CTIVE PLAT	', SO T	HEY CAN THRIVE.				
Activities & Governance	2	Check this	Dox ► Lift the organization discontinued its operations or disposed	of more than	25% of i	ts net assets.				
Ğ	3	Number of	voting members of the governing body (Part VI, line 1a)		3	11				
40	4	Number of	independent voting members of the governing body (Part VI, line 11	)	4	11				
ij	5	Total numb	per of Individuals employed in calendar year 2018 (Part V, line 2a)		5	105				
흝	6	Total numb	per of volunteers (estimate if necessary)		6	29,415				
Ą	7a	Total unrela	ated business revenue from Part VIII, column (C), line 12		7a	0.				
_	b	Net unrelat	ted business taxable income from Form 990-T, line 38		7b	0.				
				ar	Current Year					
	8	Contributio	ons and grants (Part VIII, line 1h)	,359.	10,826,364.					
Ž	9	Program se	ervice revenue (Part VIII, line 2g)							
Revenue	10	Investment	income (Part VIII, column (A), lines 3, 4, and 7d)		-	18,354,797.				
Œ	111	Other rever	nue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	682	157.	952,279.				
	12	Total reven	ue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	22 122	448.	72.				
	13	Grants and	similar amounts paid (Part IX, column (A), lines 1–3)	23,408	-	30,133,512.				
	14	Renefits na	aid to or for members (Part IX, column (A), line 4)	869	,756.	3,036,759.				
- 40	15	Salaries of	her compensation, employee benefits (Part IX, column (A), lines 5–10)		-					
Expenses	16a	Profession	-1 4 1 1 1 1 1 1 1	10,164	764.	9,636,069.				
듗	Ь	Total funda	al fundraising fees (Part IX, column (A), line 11e)							
置	17	Other even	aising expenses (Part IX, column (D), line 25) ► 1,025,230.		A Committee					
	1	Ciner expe	nses (Part IX, column (A), lines 11a-11d, 11f-24e)	12,742	,364.	14,075,515.				
	18	Total exper	nses. Add lines 13-17 (must equal Part IX, column (A), line 25)	23,776	,884.	26,748,343.				
-	19	Hevenue ie	ss expenses. Subtract line 18 from line 12	-368	,871.	3,385,169.				
200	l			Beginning of Cu	rrent Year	End of Year				
See	20	Total asset	s (Part X, line 16)	22,652	,210.	22,895,362.				
et Assets or ind Balances	21	Total liabilit	ties (Part X, line 26)	8,469	,189.	6,659,860.				
Z.Z	22	Net assets	or fund balances. Subtract line 21 from line 20	14,183		16,235,502.				
Pa	art II	Signatu	re Block							
Uni	der pena	ities of perjury,	I declare that I have examined this return, including accompanying schedules and state	ements, and to th	e hest of m	knowledge, and helief it is				
true	а, сопес	t, and complete	<ol> <li>Declaration of preparer (other than officer) is based on all information of which prepare</li> </ol>	er has any knowle	dge	A WILLIAMOORD BILL DRINGE IT IS				
	•					<del>-:</del>				
Sig	ın	Signatu	re of officer	Dat	e					
He	re	GEOR	RGE MEGAS, CFO	>	-	< (8 (a				
			print name and title			7,016				
D~	id	Print/Type	preparer's name Prepayer signature	late		PTIN				
Check X if					[ II ]					
	pare	-		05/06/2019		Dyed P01622353				
US	e Oni					2-1738520				
May	/ the IF	S discuss t	his return with the preparer shown above? (see instructions)	IC 20006 Phor	e no. (20	2) 463 - 6500				
	,		······································			Y Ves No				

Form 990 (2018) Part III **Statement of Program Service Accomplishments** 

	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission:
	KABOOM!, INC. IS THE NATIONAL NON-PROFIT DEDICATED TO GIVING ALL KIDS -
	ESPECIALLY THOSE LIVING IN POVERTY - THE CHILDHOOD THEY DESERVE THROUGH
	GREAT, SAFE PLACES TO PLAY. SEE SCHEDULE O FOR ADDITIONAL INFORMATION.
2	Did the organization undertake any significant program services during the year which were not listed on the
	prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program
	services?
	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by
	expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others,
	the total expenses, and revenue, if any, for each program service reported.
4a	(Code: ) (Expenses \$ 22, 453, 526. including grants of \$ 3,036,760.) (Revenue \$ 17,148,890.)
	SEE SCHEDULE O FOR DESCRIPTIONS
	PART I - FACILITATING THE CREATION OF COMMUNITY-BUILT PLAYSPACES
4b	(Code:) (Expenses \$ 1,983,961. including grants of \$ 0) (Revenue \$1,205,908)
	CHE COMPINE O DOD DECORDEDIONS
	PART II - DRIVING INNOVATION IN PLAYSPACE DESIGN
	PART III - DRIVING INNOVATION IN PLAISPACE DESIGN PART III - HELPING CITIES MAKE PLAY THE EASY CHOICE FOR KIDS AND FAMILIES
	TAKE TITE HEDELING CITTED PARE FURL THE EAST CHOICE FOR KIDS AND FAMILIES
4c	(Code: ) (Expenses \$ including grants of \$ ) (Revenue \$ )
.0	(2222
74	Other program convices (Describe in Schedule O.)
4d	Other program services (Describe in Schedule O.)
4d 4e	Other program services (Describe in Schedule O.) (Expenses \$ including grants of \$ ) (Revenue \$ )  Total program service expenses \$ 24,437,487.

Part	V Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	×	
2	Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> (see instructions)?	2	×	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		×
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		×
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		×
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		×
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If</i> "Yes," <i>complete Schedule D, Part II</i>	7		×
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If</i> "Yes," complete Schedule D, Part III	8		×
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i>	9		×
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part $V$	10	×	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	×	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		×
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		×
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		×
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	×	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X</i>	11f	×	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		×
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	×	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule $E$	13		×
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		×
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b	×	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		×
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If "Yes," complete Schedule F, Parts III and IV.</i>	16		×
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		×
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If</i> "Yes," <i>complete Schedule G, Part II</i>	18		×
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?  If "Yes," complete Schedule G, Part III	19		×
20 a	Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H </i>	20a		×
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? .	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? #E!Yası''/16 Propolete Schedule I, Parts I and II	21	×	

Part	Checklist of Required Schedules (continued)			
			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		×
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	×	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		×
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		×
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		×
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II	26		×
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		×
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		×
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		×
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>	28c		×
29 30	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i> Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified	29		×
31	conservation contributions? <i>If "Yes," complete Schedule M </i>	30		×
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		×
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I </i>	33	×	
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		×
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		×
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		×
36	<b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2 </i>	36		×
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? <i>If "Yes," complete Schedule R, Part VI</i>	37		×
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? <b>Note.</b> All Form 990 filers are required to complete Schedule O.	38	×	
Part				
	Check if Schedule O contains a response or note to any line in this Part V		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable   1a   39		168	IAO
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and			
	reportable gaming (gambling) winnings to prize winners?	1c	×	

Part	Statements Regarding Other IRS Filings and Tax Compliance (continued)			
			Yes	No
<b>2</b> a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 105			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b	×	
_	<b>Note.</b> If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		×
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		×
b	If "Yes," enter the name of the foreign country:	4a		^
D	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		×
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		×
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		×
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
	and services provided to the payor?	7a		×
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	7.		
a	required to file Form 8282?	7с		×
d e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		v
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  .	7f		×
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring 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 . [10b]			
11	Section 501(c)(12) organizations. Enter:			
a	Gross income from members or shareholders			
b	against amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year   12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note. See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which			
	the organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand	4.		
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		×
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?	15		
	excess parachute payment(s) during the year?	10		
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		
. •	If "Yes," complete Form 4720, Schedule O.	.,		
	, I - 1 - 2 - 2 - 2 - 2 - 2 - 2 - 2 - 2 - 2			

Form 990 (2018)

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Section A. Governing Body and Management No 1a Enter the number of voting members of the governing body at the end of the tax year . . . 11 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 O. Enter the number of voting members included in line 1a, above, who are independent 11 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with 2 × 3 Did the organization delegate control over management duties customarily performed by or under the direct 3 supervision of officers, directors, or trustees, or key employees to a management company or other person? × 4 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? X 5 Did the organization become aware during the year of a significant diversion of the organization's assets? . 5 X 6 6 × Did the organization have members, stockholders, or other persons who had the power to elect or appoint 7a X Are any governance decisions of the organization reserved to (or subject to approval by) members, 7b × Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: 8a X 8b × 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 X Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) No 10a × b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10b Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a × **b** Describe in Schedule O the process, if any, used by the organization to review this Form 990. **12a** Did the organization have a written conflict of interest policy? If "No," go to line 13 12a X Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b × Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," 12c × 13 Did the organization have a written whistleblower policy? . . . . . . . . . . . . 13 × 14 14 Did the organization have a written document retention and destruction policy? × Did the process for determining compensation of the following persons include a review and approval by 15 independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official . . . . . . . . . . . . . . . 15a X 15b X If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement 16a × 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 Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed ▶ See Part VI, Line 17 stmt 17 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable), 990, and 990-T (Section 501(c) 18 (3)s only) available for public inspection. Indicate how you made these available. Check all that apply. X Own website Another's website X Upon request Other (explain in Schedule O) Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and 19 financial statements available to the public during the tax year. State the name, address, and telephone number of the person who possesses the organization's books and records ▶ 20 GEORGE MEGAS, 4301 CONNECTICUT AVE. NW, ML-1, WASHINGTON,, DC 20008 (202)659-0215

Form 990 (2018) Page

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

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
  - List all of the organization's current key employees, if any. See instructions for definition of "key employees."
- 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 nor any related organization compensated any current officer, director, or trustee.										
	(C)									
(A) Name and Title	(B) Average hours per week (list any	box, ι	unles	s pe	more rson	than of the thick that is both or/trust	an tee)	(D)  Reportable compensation from	(E) Reportable compensation from related	<b>(F)</b> Estimated amount of other
	hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) STEPHANIE GAILLARD WHITE BOARD CHAIR	1.75	×		×				0.	0.	0.
(2) SHARON PRICE JOHN BOARD VICE CHAIR	1.50	×		×				0.	0.	0.
(3) DEBORAH A. COWAN TREASURER	1.75	×		×				0.	0.	0.
(4) UDAYA PATNAIK SECRETARY	1.75	×		×				0.	0.	0.
(5) TIMOTHY M. FESENMYER MEMBER	1.75	×						0.	0.	0.
(6) RON LUMBRA MEMBER	1.50	×						0.	0.	0.
(7) JAKE SIEWERT MEMBER	1.50	×						0.	0.	0.
(8) BILL NOVELLI MEMBER	1.75	×						0.	0.	0.
(9) MICHAEL ARATEN MEMBER	1.50	×						0.	0.	0.
(10) COLIN O'DONNELL MEMBER	1.50	×						0.	0.	0.
(11) ERIC ROTHMAN MEMBER	1.50	×						0.	0.	0.
(12) JAMES SIEGAL CEO	53.00			×				337,760.	0.	42,807.
(13) BRUCE M. BOWMAN PRESIDENT, PLAY PRODUCTS INITIATIVE	49.00			×				280,552.	0.	34,987.
(14) GEORGE T. MEGAS CFO	46.00			×				211,713.	0.	32,445.

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Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)												
(C)												
(A)	(B)	(-1	-4 -1-		ition	. 41		(D)	(E)	(F)		
Name and title	Average	١,٠				than on the second the		Reportable	Reportable	Estimated		
	hours per week (list any	office	er and	dad	irect	or/trust	tee)	compensation from	compensation from related	amount of other		
	hours for	or a	Ins	Qf	Ke.	Hig	For	the	organizations	compensation		
	related	Individual trustee or director	titut	Officer	Key employee	hes	Former	organization	(W-2/1099-MISC)	from the		
	organizations below dotted	ual 1	iona		oldt	ee t co	,	(W-2/1099-MISC)		organization and related		
	line)	rus	ıl tru		yee	npe				organizations		
		99	Institutional trustee			Highest compensated employee						
			U			ed						
(15) ROXANNE RUCKER	46.00											
VP, COMMUNITY IMPACT						×		195,066.	0.	28,870.		
(16) LYSA RATLIFF	43.00											
VP, PARTNERSHIP DEVELOPMENT						×		208,305.	0.	14,327.		
(17) AMY LEVNER	46.00											
VP, COMMUNICATIONS & MARKETING	7					×		171,227.	0.	41,379.		
(18) CARLYNE CARDICHON	47.00											
VP, FINANCE						×		178,266.	0.	30,681.		
(19) CARRIE LEOVY	45.00											
SENIOR STRATEGIST						×		168,768.	0.	29,003.		
(20)												
(21)												
(22)												
(23)												
(24)												
(25)												
1b Sub-total								1,751,657.	0.	254,499.		
c Total from continuation sheets to Part												
d Total (add lines 1b and 1c)								1,751,657.	0.	254,499.		
2 Total number of individuals (including bu								ho received mo	ore than \$100,0	00 of		
reportable compensation from the organ	ization >				2	4						
										Yes No		
3 Did the organization list any former o	,	,				_		, ,				
employee on line 1a? If "Yes," complete										- ,,		
4 For any individual listed on line 1a, is the												
organization and related organizations	_	an \$1	150,	000	1? [1	"Ye	s,"	complete Sch	edule J for su			
individual			٠.			•	-			4 ×		
5 Did any person listed on line 1a receive of for services rendered to the organization												
	rii res, c	отпрі	ete	SCI	ieat	iie J i	Or S	such person		5 X		
Section B. Independent Contractors			_									
1 Complete this table for your five highest												
compensation from the organization. Re	port compe	nsatio	on to	or tr	ne c	aiena	ar y	year ending wit	n or within the c	organization's tax		
year.								(5)		(0)		
(A) (B) (C) Name and business address Description of services Compensation												
PRO MOTION, INC., 18405 EDISON AVE		יידים	.D	M	. 6	3005	F17			520,282.		
FRO MOTION, INC., 10403 EDISON AVE	, CUTOIER	CLTFI	, ענ	IVIC	, 0.	2002	LE V.	EINT MOMT & F	IVECOLION	520,262.		
2 Total number of independent contracts	ors (includir	na hu	ıt n	ot I	imit	ed to	th	nose listed abo	ove) who			

received more than \$100,000 of compensation from the organization ▶

Part	: VIII	Statement of Revenue					
		Check if Schedule O contains a response	or note to				<u>.</u>
				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	Revenue excluded from tax under sections 512–514
Contributions, Gifts, Grants and Other Similar Amounts	1a	Federated campaigns 1a					
Gra	b	Membership dues 1b					
ts, An	C	Fundraising events 1c					
أق أو	d	Related organizations 1d					
Contributions, and Other Sim	e f	Government grants (contributions)  All other contributions, gifts, grants,					
utic her	'	and similar amounts not included above 1f 10,8	26 364				
<u>ال</u> ظ	g	Noncash contributions included in lines 1a–1f: \$	20,301.				
Cor	_	Total. Add lines 1a–1f	▶	10,826,364.			
		Busin	ness Code				
ven	2a	CONTRACTED PROGRAM SERVICES 9000	)99	18,354,797.	18,354,797.	0.	0.
e Re	b						
ξ	С						
Se	d						
Iran	e f	All other program convince revenue					
Program Service Revenue	g	All other program service revenue .   Total. Add lines 2a–2f	▶	18,354,797.			
	3	Investment income (including dividends,		10/331/737.			
		and other similar amounts)		455,376.	0.	0.	455,376.
	4	Income from investment of tax-exempt bond pro	oceeds ►				
	5	Royalties	▶				
		· · · · · · · · · · · · · · · · · · ·	Personal				
	6a	Gross rents					
	b	Less: rental expenses					
	c d	Rental income or (loss)  Net rental income or (loss)					
	7a		Other				
	1 a	assets other than inventory 4,104,370.					
	b	Less: cost or other basis					
		and sales expenses . 3,607,467.					
	С	Gain or (loss) 496,903.					
	d	Net gain or (loss)	▶	496,903.	0.	0.	496,903.
enne	8a	Gross income from fundraising events (not including \$					
Other Revenue		of contributions reported on line 1c). See Part IV, line 18					
Sth	b	Less: direct expenses b					
Ū		Net income or (loss) from fundraising events Gross income from gaming activities. See Part IV, line 19	s . <b>&gt;</b>				
	b	Less: direct expenses b					
	C	Net income or (loss) from gaming activities	•				
	10a	Gross sales of inventory, less returns and allowances a					
		Less: cost of goods sold b					
	С	Net income or (loss) from sales of inventory					
	4.		ness Code				
		MISCELLANEOUS INCOME 9000	199	72.	72.	0.	0.
	b						
	c d	All other revenue					
		Total. Add lines 11a–11d	•	72.			
		Total revenue. See instructions	H		18,354,869	0.	952,279.

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#### Part IX Statement of Functional Expenses Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A). Check if Schedule O contains a response or note to any line in this Part IX (C) Management and general expenses **(D)** Fundraising Do not include amounts reported on lines 6b, 7b, (A) Total expenses (B) Program service 8b, 9b, and 10b of Part VIII. expenses expenses Grants and other assistance to domestic organizations and domestic governments. See Part IV. line 21 . . . 3,036,759. 3,036,759. Grants and other assistance to domestic individuals. See Part IV. line 22 . . . . . Grants and other assistance to foreign 3 organizations, foreign governments, and foreign individuals. See Part IV. lines 15 and 16 . . . Benefits paid to or for members . . . . 5 Compensation of current officers, directors, trustees, and key employees . . . . . 959,316. 797,427. 83,582. 78,307. Compensation not included above, to disqualified 6 persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) . . . 7 Other salaries and wages 569,873. 6,952,665. 5,777,029. 605,763. Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) 142,964. 119,925. 12,456. 10,583. Other employee benefits . . . . . . 89,924. 9 1,032,111. 857,014. 85,173. 10 Payroll taxes . . . . . . . . . . . 549,013. 457,315. 47,834. 43,864. Fees for services (non-employees): 11 Management . . . . . . . . . Legal . . . . . . . . . . . . . . . . 19,989. 18,535. 856. 598. Accounting . . . . . . . . . . . . 69,246. 64,209. 2,965. 2,072. Lobbying . . . . . . . . . . Professional fundraising services. See Part IV, line 17 Investment management fees . . . . . f Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.) . . 1,027,710. 952,714. 44,003. 30,993. 12 Advertising and promotion . . . . . 27,568. 16,500. 8,621. 2,447. 13 308,284. 243,493. 42,495. 22,296. Office expenses . . . . . . . 14 Information technology . . . . . 312,448. 233,261. 57,299. 21,888. 15 Occupancy . . . . . . . . . . . . 567,330. 397,582. 138,512. 31,236. 16 1,064,485 1,019,595. 16,932. 27,958. 17 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 19 Conferences, conventions, and meetings . 0. 3,305. 76,860. 73,555. 20 21 Payments to affiliates . . . . . . 240,679. 169,229. 58,302. 13,148. 22 Depreciation, depletion, and amortization . 23 105,615. 63,214. 33,027. 9,374. Other expenses. Itemize expenses not covered 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 O.) PLAYGROUND EQUIPMENT 0. 0. 6,488,857. 6,488,857. CONSTRUCTION 3,340,664. 3,340,664. 0. 0. MARKETING С 96,142. 89,002. 0. 7,140. PRINTING & REPRODUCTION 150,736. 144,950. 4,499. 1,287. All other expenses 178,902. 76,658. 38,556. 63,688. Total functional expenses. Add lines 1 through 24e 25 26,748,343. 24,437,487. 1,285,626. 1,025,230. Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here following SOP 98-2 (ASC 958-720) if

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P	art X	Balance Sheet			
		Check if Schedule O contains a response or note to any line in this	s Part X		
			(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing		1	
	2	Savings and temporary cash investments	1,185,861.	2	1,329,549.
	3	Pledges and grants receivable, net	471,070.	3	1,668,350.
	4	Accounts receivable, net	342,623.	4	455,256.
	5	Loans and other receivables from current and former officers, director			
		trustees, key employees, and highest compensated employees Complete Part II of Schedule L		5	
ts	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers a sponsoring organizations of section 501(c)(9) voluntary employees' beneficial organizations (see instructions). Complete Part II of Schedule L	nd	6	
Assets	7	Notes and loans receivable, net		7	
As	8	Inventories for sale or use	40,363.	8	50,143.
	9	Prepaid expenses and deferred charges	583,100.	9	87,833.
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a 2,170,99			
	b	Less: accumulated depreciation 10b 1,598,42		10c	572,565.
	11	Investments—publicly traded securities	19,140,112.	11	18,542,321.
	12	Investments—other securities. See Part IV, line 11	27/210/222	12	
	13	Investments—program-related. See Part IV, line 11		13	
	14	Intangible assets	263,791.	14	176,209.
	15	Other assets. See Part IV, line 11	13,136.	15	13,136.
	16	<b>Total assets.</b> Add lines 1 through 15 (must equal line 34)	22,652,210.	16	22,895,362.
	17	Accounts payable and accrued expenses	1,858,543.	17	2,644,365.
	18	Grants payable	442,477.	18	395,540.
	19	Deferred revenue	5,559,704.	19	3,142,357.
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D .		21	
S	22	Loans and other payables to current and former officers, director	rs.		
Liabilities		trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
Ë	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related this parties, and other liabilities not included on lines 17–24). Complete Part			
		of Schedule D	608,465.	25	477,598.
	26	Total liabilities. Add lines 17 through 25	8,469,189.	26	6,659,860.
sex			and		
anc	27	Unrestricted net assets	12,787,846.	27	12,396,656.
3al	28	Temporarily restricted net assets	1,395,175.	28	3,838,846.
þ	29	Permanently restricted net assets		29	
Net Assets or Fund Balances		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ □ a complete lines 30 through 34.	and		
Ş	30	Capital stock or trust principal, or current funds		30	
set	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
As	32	Retained earnings, endowment, accumulated income, or other funds.		32	
<b>let</b>	33	Total net assets or fund balances	14,183,021.	33	16,235,502.
~	34	Total liabilities and net assets/fund balances		34	22,895,362.
_			,	+ +	Form <b>990</b> (2018)

Form **990** (2018)

Form 990 (2018) Page **12** Part XI Reconciliation of Net Assets Check if Schedule O contains a response or note to any line in this Part XI . . . . . . . 30,133,512. Total expenses (must equal Part IX, column (A), line 25) 2 2 26,748,343. 3 3 3,385,169. 4 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) . . . 4 14,183,021. 5 5 -1,332,688. 6 6 7 7 8 8 9 9 10 Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 10 16,235,502. **Financial Statements and Reporting** Accounting method used to prepare the Form 990: ☐ Cash X Accrual If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O. 2a Were the organization's financial statements compiled or reviewed by an independent accountant? . . . . 2a × If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis Were the organization's financial statements audited by an independent accountant? 2b × If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:

☒ Consolidated basis ☐ Both consolidated and separate basis

If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?

If the organization changed either its oversight process or selection process during the tax year, explain in

**b** If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.

Separate basis

Schedule O.

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×

×

2c

3a

KaBOOM!, INC. 52-1970904 1

### Additional information from your Form 990: Return of Organization Exempt from Income Tax

# Form 990: Return of Organization Exempt from Income Tax Part VI, Line 17 (continued)

**Continuation Statement** 

States Where Copy of Return is Required
२
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#### SCHEDULE A (Form 990 or 990-EZ)

#### **Public Charity Status and Public Support** Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

OMB No. 1545-0047 2018

Open to Public **Inspection** 

Department of the Treasury Internal Revenue Service

► Attach to Form 990 or Form 990-EZ. ▶ Go to www.irs.gov/Form990 for instructions and the latest information.

**Employer identification number** Name of the organization KaBOOM!, INC. 52-1970904 Reason for Public Charity Status (All organizations must complete this part.) See instructions. Part I The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).) 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 5 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.) 8 An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: 🗵 An organization that normally receives: (1) more than 331/3% of its support from contributions, membership fees, and gross 10 receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 331/3% 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.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 12 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 in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12d, Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving а the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. b Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) d that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV. Sections A and D. and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations . . . . Provide the following information about the supported organization(s). (iii) Type of organization (i) Name of supported organization (ii) EIN (iv) Is the organization (v) Amount of monetary (vi) Amount of (described on lines 1-10 listed in your governing support (see other support (see above (see instructions)) document? instructions) instructions) Yes No (A) (B) (C) (D) (E) **Total** 

Part	(Complete only if you checked the Part III. If the organization fails to	e box on line	e 5, 7, or 8 of	Part I or if th	e organizatio	n failed to qu	•
Secti	on A. Public Support	quality unde	er trie tests ne	sted below, p	lease comple	ete i ait iii.j	
	dar year (or fiscal year beginning in) ▶	(a) 2014	<b>(b)</b> 2015	(c) 2016	(d) 2017	<b>(e)</b> 2018	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	(a) 2311	(8) 2010	(6) 2010	(a) 2011	(6) 2010	(i) Total
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6	Public support. Subtract line 5 from line 4						
	on B. Total Support					T	
	dar year (or fiscal year beginning in)	<b>(a)</b> 2014	<b>(b)</b> 2015	(c) 2016	(d) 2017	<b>(e)</b> 2018	(f) Total
7	Amounts from line 4						
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
11 12 13	Total support. Add lines 7 through 10 Gross receipts from related activities, etc.  First five years. If the Form 990 is for the	e organizatior	n's first, secon		, or fifth tax y		
Cooti	organization, check this box and stop her on C. Computation of Public Suppor						🕨 📙
<u> </u>	Public support percentage for 2018 (line 6			1 column (f)\		14	%
15 16a	Public support percentage from 2017 Sch 331/3% support test—2018. If the organiz	edule A, Part zation did not	II, line 14 . check the box	x on line 13, ar	 nd line 14 is 3	15 3 <sup>1</sup> / <sub>3</sub> % or more,	check this
	box and <b>stop here.</b> The organization qual			_			_
b	33 <sup>1</sup> / <sub>3</sub> % support test—2017. If the organization this box and stop here. The organization	qualifies as a	publicly suppo	rted organizat	ion		▶ □
17a	10%-facts-and-circumstances test—20 10% or more, and if the organization me Part VI how the organization meets the "forganization	ets the "facts facts-and-circ	-and-circumst	ances" test, ch est. The organi	neck this box zation qualifie	and <b>stop here</b> s as a publicly	. Explain in
b	10%-facts-and-circumstances test—20 15 is 10% or more, and if the organizar Explain in Part VI how the organization m supported organization	tion meets th	e "facts-and-o	circumstances stances" test.	" test, check	this box and	stop here.
18	Private foundation. If the organization did				a, or 17b, chec	k this box and	see

Schedule A (Form 990 or 990-EZ) 2018

#### Part III Support Schedule for Organizations Described in Section 509(a)(2)

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

Secti	on A. Public Support						
Calen	dar year (or fiscal year beginning in)	(a) 2014	<b>(b)</b> 2015	(c) 2016	(d) 2017	<b>(e)</b> 2018	(f) Total
1	Gifts, grants, contributions, and membership fees						
	received. (Do not include any "unusual grants.")	1,674,938.	6,529,655.	4,024,076.	4,203,359.	10,826,364.	27,258,392.
2	Gross receipts from admissions, merchandise						
	sold or services performed, or facilities furnished in any activity that is related to the						
	organization's tax-exempt purpose	25,391,106.	20,551,573.	21,854,391.	18,522,049.	18,354,797.	104,673,916.
3	Gross receipts from activities that are not an						
	unrelated trade or business under section 513						
4	Tax revenues levied for the						
	organization's benefit and either paid to						
	or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to the						
_	organization without charge						
6		27,066,044.	27,081,228.	25,878,467.	22,725,408.	29,181,161.	131,932,308.
/a	Amounts included on lines 1, 2, and 3						
	received from disqualified persons .	84,248.	57,214.	43,174.	59,511.	38,516.	282,663.
b	Amounts included on lines 2 and 3						
	received from other than disqualified						
	persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year	10 400 774	0 070 700	12 127 226	0 000 045	0 400 070	FO 041 010
	•						52,241,819.
	Add lines 7a and 7b	12,508,022.	9,035,916.	13,180,500.	9,268,556.	8,531,488.	52,524,482.
8	line 6.)						79,407,826.
Section	on B. Total Support						79,407,620.
	dar year (or fiscal year beginning in)	(a) 2014	<b>(b)</b> 2015	(c) 2016	(d) 2017	<b>(e)</b> 2018	(f) Total
9	Amounts from line 6		27,081,228.		_ ` '	<u> </u>	131,932,308.
10a	Gross income from interest, dividends,		2.7001,2201	20,0,0,10,1	2277207200		101/701/0001
	payments received on securities loans, rents,						
	royalties, and income from similar sources .	398,919.	237,209.	326,762.	364,209.	455,376.	1,782,475.
b	Unrelated business taxable income (less		,				
	section 511 taxes) from businesses						
	acquired after June 30, 1975						
С	Add lines 10a and 10b	398,919.	237,209.	326,762.	364,209.	455,376.	1,782,475.
11	Net income from unrelated business						
	activities not included in line 10b, whether						
	or not the business is regularly carried on						
12	Other income. Do not include gain or						_
	loss from the sale of capital assets						
	(Explain in Part VI.)	16,640.	-229.	801.	448.	72.	17,732.
13	Total support. (Add lines 9, 10c, 11,						
			27,318,208.				
14	First five years. If the Form 990 is for the	J	•				. , . ,
01	organization, check this box and stop he						🕨 📙
	on C. Computation of Public Suppo			40 1 (0)		1.5	
15	Public support percentage for 2018 (line		•				59.38 %
16	Public support percentage from 2017 Sc					16	55.78 %
	on D. Computation of Investment In			ov line 10 peli:	umn (fl)	17	1 22 0/
17 10	Investment income percentage for 2018	•		-		18	1.33 %
18 19a	Investment income percentage from 201 331/3% support tests—2018. If the organ						1.25 % and line
134	17 is not more than 331/3%, check this box						
b	33 <sup>1</sup> / <sub>3</sub> % support tests—2017. If the organization		=	-		_	_
D	line 18 is not more than 33 <sup>1</sup> / <sub>3</sub> %, check this						
20	<b>Private foundation.</b> If the organization d	_	_				_

Schedule A (Form 990 or 990-EZ) 2018 Page 4

#### **Supporting Organizations** Part IV

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

#### Se

Secti	on A. All Supporting Organizations			
			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in <b>Part VI</b> how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.	1		
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in <b>Part VI</b> how the organization determined that the supported organization was described in section 509(a)(1) or (2).	2		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.	3a		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in <b>Part VI</b> when and how the organization made the determination.	3b		
С	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in <b>Part VI</b> what controls the organization put in place to ensure such use.	3c		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in <b>Part VI</b> how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.	4b		
С	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in <b>Part VI</b> what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in <b>Part VI</b> , including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).	5a		
b	Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b		
С	<b>Substitutions only.</b> Was the substitution the result of an event beyond the organization's control?	5c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or			
	benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).	8		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in <b>Part VI.</b>	9a		
b	Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in <b>Part VI.</b>	9b		
С	Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in <b>Part VI.</b>	9c		
10a	Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below.	10a		
b	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to			

10b

determine whether the organization had excess business holdings.)

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

Schedule A (Form 990 or 990-EZ) 2018

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organical Part V	jan	zations	<u> </u>
1 Check here if the organization satisfied the Integral Part Test as a qualifying	tru	st on Nov. 20, 1970 (expl	ain in Part VI). <b>See</b>
instructions. All other Type III non-functionally integrated supporting organ	nizat	ions must complete Sect	ions A through E.
Section A—Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	1		
2 Recoveries of prior-year distributions	2		
3 Other gross income (see instructions)	3		
4 Add lines 1 through 3.	4		
5 Depreciation and depletion	5		
<b>6</b> Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7 Other expenses (see instructions)	7		
8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Section B-Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1 Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):			
a Average monthly value of securities	1a		
<b>b</b> Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	1d		
e Discount claimed for blockage or other factors (explain in detail in Part VI):			
2 Acquisition indebtedness applicable to non-exempt-use assets	2		
3 Subtract line 2 from line 1d.	3		
4 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).	4		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6 Multiply line 5 by .035.	6		
7 Recoveries of prior-year distributions	7		
8 Minimum Asset Amount (add line 7 to line 6)	8		
Section C-Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2 Enter 85% of line 1.	2		
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4 Enter greater of line 2 or line 3.	4		
5 Income tax imposed in prior year	5		
6 Distributable Amount. Subtract line 5 from line 4, unless subject to			
emergency temporary reduction (see instructions).	6		
7 Check here if the current year is the organization's first as a non-functionall instructions).	y in	tegrated Type III supporti	ng organization (see

Schedule A (Form 990 or 990-EZ) 2018

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

Part VI	III, line B, line 3a, an	e 12; Part es 1 and 2 d 3b; Par	IV, Secti 2; Part IV t V, line	ion A, lin , Section 1; Part V	es 1, 2, 3 C, line 1 , Section	3b, 3c, 1; Part i B, lin	4b, 4c IV, Sec e 1e; Pa	, 5a, 6, 9 tion D, art V, Se	9a, 9b lines 2 ection	Part II, line o, 9c, 11a, 2 and 3; F D, lines 5 ion. (See	11b, an art IV, S 5, 6, and	d 11c; Fection E 8; and I	Part IV, S E, lines 1d	ection c, 2a, 2b,
Pt III	Ln 12	: Other	Income	e Part	III, L	ine 1	l2 Des	cript	ion:	MISCELI	ANEOUS	INCO	ME	
2014:	16640.	2015:	-229. 2	2016: 8	301. 20	17: 4	148. 2	018:	72.					

#### Schedule B (Form 990, 990-EZ,

Department of the Treasury

Internal Revenue Service

or 990-PF)

Schedule of Contributors

► Attach to Form 990, Form 990-EZ, or Form 990-PF. ► Go to www.irs.gov/Form990 for the latest information. OMB No. 1545-0047

**Employer identification number** Name of the organization 52-1970904 KaBOOM!, INC. Organization type (check one): Filers of: Section: Form 990 or 990-EZ × 501(c)( 3) (enter number) organization 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation 527 political organization Form 990-PF ☐ 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. **General Rule** For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions. **Special Rules** For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 331/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III. ☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received

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

during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions Schedule B (Form 990, 990-EZ, or 990-PF) (2018) **Employer identification number** Name of organization 52-1970904 KaBOOM!, INC. Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed. (b) Name, address, and ZIP + 4 (a) (c) (d) **Total contributions** Type of contribution No. X Person **Payroll** 

		\$ 3,802,500.	Noncash  (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2		\$ 2,468,000.	Person Payroll Noncash  (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3		\$\$	Person Payroll Noncash  (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4		\$ 250,003.	Person Payroll Noncash  (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5		\$ 250,000.	Person Payroll Noncash  (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
6		\$ 249,956.	Person X Payroll

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raiti	Continuators (see instructions). Ose duplicate cop	nes of Fart Fill additional space is	needed.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7		\$ 216,668.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
8		\$ 200,000.	Person Payroll Noncash  (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
9		\$ 200,000.	Person X Payroll  Noncash  (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
10		\$\$	Person Payroll Noncash  (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
11		\$\$	Person Payroll Noncash  (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
12		\$ 49,178.	Person Payroll Noncash  (Complete Part II for noncash contributions.)

Dane 2

Name of organization
KaBOOM!, INC.

Employer identification number
52-1970904

Parti	Contributors (see instructions). Use duplicate copi	es of Part I if additional space is	needed.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
13		\$ 35,333.	Person Payroll Noncash  (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
14		\$ 33,725.	Person Payroll Noncash  (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
15		\$ 25,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
16		\$ 24,962.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
17		\$\$	Person Payroll Noncash  (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
18		\$\$	Person Payroll Noncash  (Complete Part II for noncash contributions.)

Dane 2

Parti	Contributors (see instructions). Ose duplicate copie	es of Fart Fil additional space is	needed.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
19		\$\$	Person Payroll Noncash  (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
20		\$\$	Person Payroll Noncash  (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
21		\$ 15,491.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
22		\$\$.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
23		\$\$.	Person Payroll Noncash  (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
24		\$\$	Person Payroll Noncash  (Complete Part II for noncash contributions.)

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raiti	Contributors (see instructions). Ose duplicate cop	les of Fart Fil additional space is	needed.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
25		\$\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
26		\$\$	Person Payroll Noncash  (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
27		\$ 11,412.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
28		\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
29		\$\$	Person Payroll Noncash  (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
30		\$ 10,000.	Person Payroll Noncash  (Complete Part II for noncash contributions.)

Dane 2

raiti	Contributors (see instructions). Ose duplicate copi	les of Fart III additional space is	needed.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
31		\$ 10,000.	Person Payroll Noncash  (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
32		\$ 10,000.	Person Payroll Noncash  (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
33		\$ 9,753.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
34		\$ 9,000.	Person Payroll Noncash  (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
35		\$6,000.	Person Payroll Noncash  (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
36		\$ 6,000.	Person Payroll Noncash  (Complete Part II for noncash contributions.)

Page 2

Name of organization **Employer identification number** KaBOOM!, INC. 52-1970904 Contributors (see instructions). Use duplicate copies of Part I if additional space is needed. Part I (c) (d) (a) (b) Name, address, and ZIP + 4 **Total contributions** Type of contribution No. Person X 37 **Payroll** Noncash 6,000. (Complete Part II for noncash contributions.) (d) (a) (b) (c) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution Person X 38 **Payroll** Noncash 5,887. (Complete Part II for noncash contributions.) (d) (a) (b) (c) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution X Person 39 **Payroll** Noncash 5,558. (Complete Part II for noncash contributions.) (a) (b) (c) (d) **Total contributions** Type of contribution No. Name, address, and ZIP + 4 Person X 40 **Payroll** 5,160. Noncash (Complete Part II for noncash contributions.) (a) (b) (c) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution 41 Person X **Payroll** 5,000. Noncash (Complete Part II for noncash contributions.) (a) (b) (c) (d) Type of contribution No. Name, address, and ZIP + 4 **Total contributions** Person X 42 **Payroll** 5,000. Noncash (Complete Part II for

noncash contributions.)

Name of organization

Page 2

Employer identification number

KaBOOM!	!, INC.	52	2-1970904
Part I	Contributors (see instructions). Use duplicate copi	es of Part I if additional space is	needed.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
43		\$5,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
44		\$5,000.	Person Payroll Noncash  (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash  (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash  (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash  (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person

Page 3

Name of organization

KaBOOM!, INC.

Employer identification number
52-1970904

Part II	Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.						
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received				
		   \$					
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received				
		   \$					
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received				
		\$					
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received				
		  \$					
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received				
		   \$					
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received				
		  \$					

Name of organization

Page 4

Employer identification number

KaBOOM!				52-1970904				
Part III	Exclusively religious, charitable, e (10) that total more than \$1,000 fo the following line entry. For organiza contributions of \$1,000 or less for the	r the year from any outlins completing Part	one contributor.	Complete columns (a) through (e) a I of exclusively religious, charitable,	nd			
	Use duplicate copies of Part III if ad							
(a) No. from Part I	(b) Purpose of gift	(c) Use o		(d) Description of how gift is he	ld			
Turt								
	(e) Transfer of gift  Transferee's name, address, and ZIP + 4  Relationship of transferor to transferee							
(a) No. from Part I	(b) Purpose of gift	(c) Use o	f gift	(d) Description of how gift is he	ld			
	(e) Transfer of gift  Transferee's name, address, and ZIP + 4  Relationship of transferor to transferee							
(a) No. from Part I	(b) Purpose of gift	(c) Use o	f gift	(d) Description of how gift is he	ld			
	(e) Transfer of gift							
	Transferee's name, address, and ZIP + 4 Relation			ship of transferor to transferee				
( ) ) !								
(a) No. from Part I	(b) Purpose of gift	(c) Use o	f gift	(d) Description of how gift is he	ld			
	(e) Transfer of gift							
	Transferee's name, address, and ZIP + 4 Relation			ship of transferor to transferee				

# SCHEDULE D (Form 990)

### **Supplemental Financial Statements**

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

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

Name o	the organization	Employer identification number
KaB	DOM!, INC.	52-1970904
Par		ised Funds or Other Similar Funds or Accounts.
	Complete if the organization answered	
	2 2	(a) Donor advised funds (b) Funds and other accounts
1	Total number at end of year	
	•	
2	Aggregate value of contributions to (during year)	
3	Aggregate value of grants from (during year) .	
4	Aggregate value at end of year	
5		advisors in writing that the assets held in donor advised
	funds are the organization's property, subject to the	e organization's exclusive legal control?
6	Did the organization inform all grantees, donors, a	nd donor advisors in writing that grant funds can be used
		it of the donor or donor advisor, or for any other purpose
	conferring impermissible private benefit?	
Par	Conservation Easements.	
	Complete if the organization answered	Yes" on Form 990. Part IV. line 7.
1	Purpose(s) of conservation easements held by the	
•	• • • •	ion or education) Preservation of a historically important land area
	Protection of natural habitat	Preservation of a certified historic structure
	<del></del> -	Preservation of a certified historic structure
_	Preservation of open space	
2		eld a qualified conservation contribution in the form of a conservation
	easement on the last day of the tax year.	Held at the End of the Tax Year
а	Total number of conservation easements	<u>2</u> a
b	Total acreage restricted by conservation easement	s
С	Number of conservation easements on a certified h	nistoric structure included in (a) <b>2c</b>
d	Number of conservation easements included in	(c) acquired after 7/25/06, and not on a
	historic structure listed in the National Register .	2d
3	Number of conservation easements modified, trans	sferred, released, extinguished, or terminated by the organization during the
	tax year ▶	
4	Number of states where property subject to conse	vation easement is located ▶
5		garding the periodic monitoring, inspection, handling of
•		sements it holds?
6		cting, handling of violations, and enforcing conservation easements during the year
U	Start and volunteer flours devoted to monitoring, insper	fing, nationing of violations, and emorcing conservation easements during the year
-	Amount of our areas in a most in most beginn in an action	
7		g, handling of violations, and enforcing conservation easements during the year
_	<b>&gt;</b> \$	
8		2(d) above satisfy the requirements of section 170(h)(4)(B)(i)
	and section $170(n)(4)(B)(II)?$	$\cdots \cdots \cdots \cdots \cdots $ Yes $\square$ No
9		conservation easements in its revenue and expense statement, and
	The state of the s	f the footnote to the organization's financial statements that describes the
	organization's accounting for conservation easeme	nts.
Part	III Organizations Maintaining Collection	s of Art, Historical Treasures, or Other Similar Assets.
	Complete if the organization answered '	Yes" on Form 990, Part IV, line 8.
1a	If the organization elected, as permitted under SF	AS 116 (ASC 958), not to report in its revenue statement and balance sheet
	, ,	assets held for public exhibition, education, or research in furtherance of
		potnote to its financial statements that describes these items.
b		FAS 116 (ASC 958), to report in its revenue statement and balance sheet
D		assets held for public exhibition, education, or research in furtherance of
	public service, provide the following amounts relati	
	(I) Revenue included on Form 990, Part VIII, line 1	
	(ii) Assets included in Form 990, Part X	
2		historical treasures, or other similar assets for financial gain, provide the
	following amounts required to be reported under S	
а	Revenue included on Form 990, Part VIII, line 1 .	<b>&gt;</b> \$
b		

Schedule D (Form 990) 2018 Page **2** 

Part	III Organizations Maintaining	Collections of	Art, Hist	orical 1	reasures,	, or Ot	her Similar As	ssets (continued)
3	Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):							
а	☐ Public exhibition		<b>d</b> [	Loan	or exchang	ge progr	ams	
b	☐ Scholarly research e ☐ Other							
С	☐ Preservation for future generations							
4	Provide a description of the organizat XIII.	ion's collections a	and expla	in how t	hey further	the org	anization's exe	mpt purpose in Part
5	During the year, did the organization							ar
	assets to be sold to raise funds rather		ained as p	art of the	e organizati	on's co	llection?	☐ Yes ☐ No
Part	Complete if the organization 990, Part X, line 21.	answered "Yes"						
1a	included on Form 990, Part X?							
b	If "Yes," explain the arrangement in Pa	art XIII and comple	ete the fol	lowing ta	able:			
								Amount
C	Beginning balance					1c		
d	Additions during the year					1d		
e	Distributions during the year					1e 1f		
f	Ending balance							√2 □ Vaa □ Na
2a b	If "Yes," explain the arrangement in Pa							
Par		art Am. Check here	e ii tile ex	piariatio	II IIas Deeli	provide	u on Fait Aii .	· · · · <u> </u>
I GI	Complete if the organization	answered "Yes"	" on Forr	n 990 F	Part IV line	e 10		
	Complete in the organization	(a) Current year	<b>(b)</b> Prio		(c) Two year		(d) Three years bac	k (e) Four years back
1a	Beginning of year balance	4,500,000.		,000.	4,500,		4,500,000	
b	Contributions			,				
С	Net investment earnings, gains, and losses							
d	Grants or scholarships							
e	Other expenditures for facilities and							
	programs							
f	Administrative expenses							
g	End of year balance	4,500,000.	4,500	,000.	4,500,	000.	4,500,000	. 4,500,000.
2	Provide the estimated percentage of t							
а	Board designated or quasi-endowmer			, ,	,			
b	Permanent endowment ►	%						
С	Temporarily restricted endowment ▶	%						
	The percentages on lines 2a, 2b, and							
3a	Are there endowment funds not in the	e possession of th	ne organiz	ation tha	at are held	and adı	ministered for t	ne
	organization by:							Yes No
	(i) unrelated organizations							3a(i) ×
	(ii) related organizations							3a(ii) ×
b	If "Yes" on line 3a(ii), are the related or	•						3b X
4	Describe in Part XIII the intended uses		on's endo	wment for	unds.			
Part	, , ,		" a.a. Faww	000 [	ا ۱۱ ا است	- 11 - (	Coo Forms 000	David V. lina 10
	Complete if the organization							
	Description of property	(a) Cost or ot (investment)	ent)		or other basis other)		Accumulated preciation	(d) Book value
1a	Land		0.					0.
b	Buildings				00.55			
С	Leasehold improvements				83,010.		747,370.	435,640.
d	Equipment				31,405.		794,480.	136,925.
e	Other		00 -		56,576.	. ,	56,576.	0.
Total.	Add lines 1a through 1e. (Column (d) n	nust equal Form 9	90, Part X	, columr	n (B), line 10	)c.)	•	572,565.

Schedule D (Form 990) 2018 Page **3** 

Part VII	Investments - Other Securities.					
	Complete if the organization answe	red "Yes" on For	m 990, Par	t IV, line 1	1b. See Form	990, Part X, line 12.
	(a) Description of security or category (including name of security)		(b) Book	/alue		nod of valuation: -of-year market value
(1) Financial	derivatives					
(2) Closely-h	eld equity interests					
(3) Other						
(A)						
(B)						
(C)						
(D)						
(E)						
(F)						
(G)						
(H)						
	o) must equal Form 990, Part X, col. (B) line 12.) ▶					
Part VIII	Investments—Program Related.					
	Complete if the organization answe	red "Yes" on For	m 990, Par	t IV, line 1	1c. See Form	990, Part X, line 13.
	(a) Description of investment		(b) Book	value		hod of valuation:
					Cost or end-	-of-year market value
(1)						
(2)						
(3)						
(4)						
(5)						
(6)						
(7)						
(8)						
(9)	15 000 D 17 1/D) // 40 \ \					
	o) must equal Form 990, Part X, col. (B) line 13.)					
Part IX	Other Assets.	"	000 D	4.11.7 19 4	4 d   O = - E =	000 David V. Brand F
	Complete if the organization answer	ered "Yes" on For escription	m 990, Par	t IV, line I	ia. See Form	(b) Book value
	(a) D	escription				(b) Book value
(1)						
(2)						
(3)						
(4)						
(5)						
(6)						
(7)						
(8)						
(9) Total. (Colur	mn (b) must equal Form 990, Part X, col.	(B) line 15.)				
Part X	Other Liabilities.	(2)		<u></u>		
rarex	Complete if the organization answe	red "Yes" on For	m 990 Par	t IV line 1	1e or 11f See	Form 990 Part X
	line 25.		000, r a.	,		, , , , , , , , , , , , , , , , , , ,
1.	(a) Description of liability	(b) Book value				
(1) Federal in	. , , ,	(1)				
(2) <sub>DEFERR</sub>		477,5	98			
(3)	ED KENI	4//,3	90.			
(4)						
(5)						
(6)						
(7)						
(8)						
(9)						
	o) must equal Form 990, Part X, col. (B) line 25.)	477,5	9.8			
0 1: 1::::	,	<del>'1</del> //, 5	, , , , , , , , , , , , , , , , , , ,			

<sup>2.</sup> Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

Schedule D (Form 990) 2018 Page **4** 

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.							
	Complete if the organization answered "Yes" on Form 990, F	Part I	V, line 12a.				
1	Total revenue, gains, and other support per audited financial statements			1	29,795,661.		
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:						
а	Net unrealized gains (losses) on investments	2a					
b	Donated services and use of facilities	2b	614,500.				
С	Recoveries of prior year grants	2c					
d	Other (Describe in Part XIII.)	2d					
е	Add lines 2a through 2d			2e	614,500.		
3	Subtract line <b>2e</b> from line <b>1</b>			3	29,181,161.		
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:						
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a					
b	Other (Describe in Part XIII.)	4b	952,351.				
С	Add lines <b>4a</b> and <b>4b</b>			4c	952,351.		
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line	12.)		5	30,133,512.		
Part				r Ret	turn.		
	Complete if the organization answered "Yes" on Form 990, F	Part I	V, line 12a.				
1	Total expenses and losses per audited financial statements			1	27,244,994.		
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:						
а	Donated services and use of facilities	2a	614,500.				
b	Prior year adjustments	2b					
С	Other losses	2c					
d	Other (Describe in Part XIII.)	2d					
е	Add lines 2a through 2d			2e	614,500.		
3	Subtract line <b>2e</b> from line <b>1</b>			3	26,630,494.		
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:						
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a					
b	Other (Describe in Part XIII.)	4b	117,849.				
С	Add lines <b>4a</b> and <b>4b</b>			4c	117,849.		
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line	e 18.)		5	26,748,343.		
Part 2	XIII Supplemental Information.						
	e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and						
2; Part	XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part	to pro	ovide any additional in	forma	tion.		
Pt V	, Line 4: BOARD-DESIGNATED OPERATING RESERVES						
Pt X	, Line 2: MANAGEMENT ANNUALLY REVIEWS ITS TAX POSI	OIT	NS AND HAS DETE	RMIN	IED		
THAT	THERE ARE NO MATERIAL UNCERTAIN TAX POSITIONS THA	T RI	EQUIRE RECOGNIT	ION	ON		
THE 1	FINANCIAL STATEMENTS.						
Pt X	I, Line 4b: AMOUNT CONSISTS OF INVESTMENT INTEREST	', CZ	APITAL GAINS, A	ND M	IISCELLANEOUS		
INCOME REPORTED SEPARATELY ON THE FINANCIAL STATEMENTS.							
Pt XII, Line 4b: INVESTMENT FEES NETTED AGAINST INVESTMENT REVENUE ON THE FINANCIAL							
STATEMENTS.							

Schedule D (For	m 990) 2018	Page 5
Part XIII	Supplemental Information (continued)	

# SCHEDULE F (Form 990)

#### **Statement of Activities Outside the United States**

OMB No. 1545-0047

2018

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16.
 ► Attach to Form 990.
 ► Go to www.irs.gov/Form990 for instructions and the latest information.

Name of the organization
KaBOOM!, INC.

Employer identification number
52-1970904

Par	General Information Form 990, Part IV, line		ies Outside	the United States. Con	nplete if the organization a	nswered "Yes" on
1	For grantmakers. Does the other assistance, the grante award the grants or assistance	es' eligibility	for the grant	ts or assistance, and the		⊠ Yes □ No
2	For grantmakers. Describe outside the United States.	in Part V the	e organization'	's procedures for monitorin	ng the use of its grants and	d other assistance
3	Activities per Region. (The fo	llowing Part	I, line 3 table o	can be duplicated if addition	nal space is needed.)	
	<b>(a)</b> Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in the region	(d) Activities conducted in the region (by type) (such as, fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in the region	(f) Total expenditures for and investments in the region
<b>(1)</b> 1	North America	0	0	CONTRACTED PROGRAM SERVICES	PLAYGROUND BUILDS	250,567.
(2)						
(3)						
(4)						
(5)						
(6)						
(7)						
(8)						
(9)						
(10)						
(11)						
(12)						
(13)						
(14)						
(15)						
(16)						
(17) 3a	Subtotal	0	0			250,567.
b	Total from continuation sheets to Part I		0			230,307.
С	Totals (add lines 3a and 3b)	0	0			250.567.

Schedule F (Form 990) 2018

Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part II Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed. (a) Name of (b) IRS code (c) Region (d) Purpose of (e) Amount of (f) Manner of (g) Amount of (h) Description (i) Method of section and EIN organization grant cash grant cash noncash of noncash assistance valuation (book, FMV, (if applicable) disbursement assistance appraisal, other) (1) (2) (3) (4) (5) (6) (7) (8) (9) (10)(11)(12)(13)(14)(15)(16)Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt 2 

Schedule F (Form 990) 2018

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16. Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	<b>(d)</b> Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of noncash assistance	(g) Description of noncash assistance	(h) Method of valuation (book, FMV, appraisal, other)
(1)							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							
(13)							
(14)							
(15)							
(16)							
(17)							
(18)							

Schedule F (Form 990) 2018 Page 4

Part	IV Foreign Forms		
1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	☐ Yes	X No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to separately file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; don't file with Form 990)	☐ Yes	⊠ No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect To Certain Foreign Corporations (see Instructions for Form 5471)	☐ Yes	⊠ No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)	☐ Yes	X No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships (see Instructions for Form 8865)	☐ Yes	⊠ No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713; don't file with Form 990)	☐ Yes	⊠ No

# Schedule F (Form 990) 2018 Page 5 Part V **Supplemental Information** Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information. See instructions. Pt I Line 2: DURING 2018, THERE WERE NO GRANTS AWARDED OUTSIDE OF THE UNITED KABOOM! HAS A SET OF RULES AND REQUIREMENTS REGARDING THE CRITERIA, AND APPROVAL PROCEDURES FOR THIS GRANT PROGRAM. THE GRANT APPLICATION RULES AND PROCESS DOES NOT VARY BASED ON WHETHER THE PROJECTS WERE OUTSIDE THE US. SEE GRANT MAKING PROCEDURES IN US.

# SCHEDULE I (Form 990)

Department of the Treasury

Internal Revenue Service

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

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

► Attach to Form 990.

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization **Employer identification number** KaBOOM!, INC. 52-1970904 **General Information on Grants and Assistance** Part I Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? X Yes No Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990. Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. (f) Method of valuation 1 (a) Name and address of organization (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(g) Description of (h) Purpose of grant (book, FMV, appraisal, other) or government (if applicable) grant cash assistance noncash assistance or assistance (1) WASHTENAW COUNTY PO BOX 0915 YPSILANTI MI 48197 38-6004984 74.000 501(C)(3)/GOVT 0.|N/AN/A **IMPROVEMENT** (2) CENTURY FORWARD 1420 WASHINGTON BLVD STE 480 DETROIT MI 48226 82-0821359 0.|N/A501(C)(3)/GOVT 72,000. N/A IMPROVEMENT (3) GIVE MERIT 10100 GRAND RIVER AVE DETROIT MI 48204 45-2907584 501(C)(3)/GOVT 71,000. 0. N/A N/A IMPROVEMENT (4) COMMON GROUND HEALTH 1150 UNIVERSITY AVE ROCHESTER NY 14607 16-1061456 501(C)(3)/GOVT 70,000. 0. N/A N/A IMPROVEMENT (5) CITY OF DALLAS 1500 MARILLA STREET 4EN DALLAS TX 75201 | 75-6000508 501(C)(3)/GOVT 69,000. 0. N/A N/A IMPROVEMENT (6) BUFFALO MUSEUM OF SCIENCE 1020 HUMBOLDT PARKWAY BUFFALO NY 14211 | 16-6000178 501(C)(3)/GOVT 67,000. 0.|N/AN/A **IMPROVEMENT** (7) NORTH VERNON ELEMENTARY 810 W. WALNUT STREET NORTH VERNON IN 47265 35-1082099 501(C)(3)/GOVT 66,000. 0. N/A N/A IMPROVEMENT (8) CITY OF ROMULUS 11111 WAYNE ROAD ROMULUS MI 48174 38-6006334 501(C)(3)/GOVT 66,000. 0. N/A N/A IMPROVEMENT (9) BEAUMONT HEALTH 26935 NORTHWESTERN HWY SOUTHFIELD MI 48033 36-4852171 501(C)(3)/GOVT 63,000. N/A N/A **IMPROVEMENT** (10) WILSON COMMENCEMENT PARK 251 JOSEPH AVE ROCHESTER NY 14605 22-2667299 63,000. 0.|N/A501(C)(3)/GOVT N/A **IMPROVEMENT** (11) WEST BUFFALO CHARTER SCHOOL 0.|N/A113 LAFAYETTE AVE BUFFALO NY 14213 36-4675452 501(C)(3)/GOVT 47,000. N/A IMPROVEMENT (12) See Statement 2,037,000. 0. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table . . . 160

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

Schedule I (Form 990) (2018)

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Enter total number of other organizations listed in the line 1 table . . . . . . . . . . . . . . .

Schedule I (Form 990) (2018)

Part III	Grants and Other Assistance to Do Part III can be duplicated if additional			organization answ	ered "Yes" on Form 990,	Part IV, line 22.
	(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
1						
2						
3						
4						
5						
6						
7						
Part IV	Supplemental Information. Provide	the information i	required in Part I. lir	e 2: Part III. columr	(b): and any other additi	ional information.
	ine 2: KABOOM!, INC. COLLABORA		•			
AND PL	AY-RELATED PRODUCTS THAT ARE	DESIGNED TO	ENCOURAGE ACTIV	/E AND BALANCED	PLAY, CREATIVITY,	IMAGINATION,
COMMUN	ICATION AND COLLABORATION. KA	BOOM!, GRANT	PROGRAMS PROVI	DE FUNDING, PL	ANNING AND TECHNICA	AL ASSISTANCE
AND/OR	PRODUCTS TO COMMUNITIES THAT	SEEK TO INC	REASE PLAY OPPO	ORTUNITIES FOR	KIDS. IN ADDITION	N, GRANTEES ARE
ABLE T	O ACCESS FREE KABOOM! ONLINE	TOOLS TO HEL	P GUIDE THEM TH	IROUGH THE PROC	ESS OF BUILDING OR	IMPROVING A
PLAYSP	ACE, DESIGNING AN INNOVATIVE	PLAYSPACE, AI	ND INTRODUCING	PLAY-RELATED P	RODUCTS TO PLAYTIM	E, RECESS OR
CLASSR	OOM INSTRUCTION. THE GRANT	PROGRAMS ARE	FUNDED BY THIF	RD PARTY FUNDIN	IG SOURCES AND GENER	RALLY ADMINISTERED
BY KAB	OOM!. THESE PROGRAMS PROVIDE	KABOOM! THE	OPPORTUNITY TO	WORK WITH GROU	PS THAT MAY BE INEI	LIGIBLE CANDIDATES
FOR A	STANDARD KABOOM! PLAYGROUND P.	ROJECT. THE	RE ARE THREE PE	RIMARY TYPES OF	' GRANT PROGRAMS: [	1) CONSTRUCTION
GRANTS	: FINANCIAL SUPPORT FUNDS APP.	ROXIMATELY 1	 5% - 50% OF THE	OVERALL COST	FOR A PROJECT AND I	PROVIDES THE

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Schedule I (Form 990) (2018)

Part III	Grants and Other Assistance to Do Part III can be duplicated if additiona			organization answ	ered "Yes" on Form 990,	Part IV, line 22.
	(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
1						
2						
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Part IV	Supplemental Information. Provide	the information i	required in Part I. lir	e 2: Part III. columr	(b): and any other additi	ional information.
	E WITH PLANNING SUPPORT AND T		•			
EXPAND:	ED PLAYGROUNDS, ARE INTENDED	TO ENGAGE, I	NVOLVE, AND UN	TE THE COMMUNI	TY. GRANTEES HAVE	REPORTED THAT
SUCH G	RANTS HAVE PROVEN TO CATALYZE	ADDITIONAL :	FUNDRAISING EFE	ORTS AND PROMO	TE COMMUNITY ENGAGE	EMENT. 2) CREATIVE
PLAY G	RANTS: INNOVATIVE PLAY AND PL	AY-RELATED P	RODUCTS, SUCH A	AS IMAGINATION	PLAYGROUND AND RIGA	AMAJIG, ARE DESIGNED
TO ENC	OURAGE CREATIVITY, IMAGINATIO	N, COMMUNICA	TION AND COLLAR	BORATION IN PLA	Y. GRANTEES ARE ABI	LE TO INCORPORATE
THESE :	PRODUCTS INTO EXISTING PROGRA	MS AND USE T	HEM FOR SPECIAI	LEVENTS IN THE	IR COMMUNITY. 3) PI	LAY EVERYWHERE:
FUNDI	NG IS PROVIDED TO CITIES AND	COMMUNITIES '	TO CREATE OPPOR	RTUNITIES FOR K	IDS TO LEAP, SCRAM	BLE, AND JUMP
THROUG	H PLAYFUL TRANSFORMATIONS IN	EVERY DAY SP	ACES IN THEIR (	COMMUNITIES (E.	G., AT GROCERY STOR	RES, IN EMPTY
LOTS,	ON SIDEWALKS, CROSSWALKS, AND	CLOSED STRE	ETS). KABOOM!	HAS A STANDARD	APPLICATION FORM I	FOR EACH GRANT
PROGRAI	M, WHICH IS ACCESSIBLE ON OUR	WEBSITE. PRO	OSPECTIVE GRANT	TEES SUBMIT GRA	NT APPLICATIONS ON	LINE. EACH APPLICATION

Schedule I (Form 990) (2018)

Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22.  Part III can be duplicated if additional space is needed.									
(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance				
1									
2									
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6									
7									
Part IV Supplemental Information. Provide	the information i	required in Part I, lir	ne 2; Part III, columi	n (b); and any other additi	onal information.				
IS INITIALLY REVIEWED BY A GRANT ADM	MINISTRATIVE	COORDINATOR TO	ENSURE ALL IN	FORMATION IS SUBMIT	TTED. THE SUBMITTED				
GRANT APPLICATIONS ARE REVIEWED AND	SCORED BY A	N INTERNAL GRAN	T REVIEW PANEL	CONSISTING OF 2-5	KABOOM! STAFF				
MEMBERS, INCLUDING A GRANT MANAGER.	SCORING IS	BASED ON DEFIN	IED SELECTION C	CRITERIA, WHICH IS (	CREATED BY KABOOM!				
AND FREQUENTLY IS APPROVED BY THE F	UNDING PARTN	ER. THE GRANT F	REVIEW PANEL'S	RECOMMENDATIONS ARE	E SUBMITTED TO				
THE FUNDING PARTNER FOR APPROVAL.	SELECTED GRA	NTEES ARE NOTIF	FIED OF THE AWA	ARD AND SENT A GRANT	r agreement.				
EACH GRANT AGREEMENT INCLUDES PERFO	RMANCE BENCHI	MARKS THAT THE	GRANTEE MUST A	ACKNOWLEDGE UPON ACC	CEPTANCE OF THE				
GRANT. THE GRANT MANAGER FOLLOWS UP	AS NEEDED W	ITH EACH GRANTE	EE REGARDING PR	OGRESS TOWARD COMPI	LETION OF EACH				
BENCHMARK. KABOOM! WILL NOT RELEASE	GRANT FUNDS	OR COORDINATE	DELIVERY OF CR	REATIVE PLAY PRODUCT	IS IF A GRANTEE				
HAS NOT EXECUTED A GRANT AGREEMENT, MET THE REQUIRED BENCHMARKS AND SUPPLIED THE APPROPRIATE DOCUMENTATION.									
WHEN A GRANTEE REQUESTS FULFILL	MENT OF THE	GRANT AWARD FOF	R ITS PROJECT,	THE GRANT MANAGER W	WILL ENSURE THAT				

Schedule I (Form 990) (2018)

Part III	Grants and Other Assistance to Do Part III can be duplicated if additional			e organization answ	vered "Yes" on Form 990,	Part IV, line 22.
	(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
1						
2						
3						
_4						
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7						
Part IV	Supplemental Information. Provide	the information i	required in Part I, lir	ne 2; Part III, colum	n (b); and any other addit	onal information.
ALL OF	THE DOCUMENTATION REQUIRED FO	OR KABOOM! TO	O INITIATE RELE	ASE OF SUCH GR	ANT AWARD HAS BEEN	SUBMITTED.
ONC	THE GRANT MANAGER CONFIRMS	THAT REQUIRE	D BENCHMARKS HA	AVE BEEN MET AN	ND REQUIRED DOCUMEN	FATION HAS BEEN
RECEIV	ED, THE GRANT MANAGER WILL PR	EPARE A CHEC	K REQUEST, WHIC	CH MUST BE APPE	ROVED BY THE CFO PR	IOR TO PAYMENT.
WHEN	THE GRANT IS FOR PLAY PRODUCT	S, THE PLAY	PRODUCT WILL NO	OT BE SHIPPED (	JNTIL ALL REQUIRED	DOCUMENTATION
HAS BE	EN RECEIVED. GRANTS SERVE TH	E FOLLOWING '	TYPES OF ORGANI	ZATIONS: oCHI	ILD SERVING NON-PRO	FIT ORGANIZATIONS
oNEIG	HBORHOOD ASSOCIATIONS ONATIV	E AMERICAN T	RIBAL ORGANIZAT	CIONS OSCHOOLS	G OR PTO/PTAS OMUN	ICIPALITIES
OOTHER	COMMUNITY BASED ORGANIZATION	S oHOUSING	AUTHORITIES CF	RITERIA FOR A M	KABOOM! GRANTEE INC	LUDES: ONEED
(FOR A	PLAYSPACE OR AN IMPROVED PLA	YSPACE) oIM	PACT THAT THE E	PLAYSPACE WILL	HAVE IN THE COMMUN	ITY oCOMMUNITIES
THAT H	AVE A HIGH NEED oCAPACITY TO	ENGAGE THE C	OMMUNITY oCAPA	ACITY TO GENERA	ATE MATCHING FUNDS	oCAPACITY TO
IMPACT	THE LARGEST NUMBER OF KIDS	ODEMONSTRATE	D ENTHUSIASM FO	R PROJECT AND	COMMITMENT TO FULF	ILL REQUIREMENTS.

REV 11/06/18 PRO Schedule I (Form 990) (2018)

KaBOOM!, INC. 52-1970904

## Schedule I: Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Name and address of organization or government	EIN	IRC Section (if applicable)	Amount of cash grant	Amount of non-cash assistance	Method of valuation (book, FMV, appraisal, other)	Description of noncash assistance	Purpose of grant or assistance
CITY OF OLEAN 101 EAST STATE STREET, OLEAN, NY 14760	166002550	501(C)(3)/GOVT	46,000.	0.	N/A	N/A	IMPROVEMENT
BRR ALLIANCE, INC. 1902 NIAGARA STREET, BUFFALO, NY 14207	452481780	501(C)(3)/GOVT	44,000.	0.	N/A	N/A	IMPROVEMENT
CITY OF PORT HURON 100 MCMORRAN BLVD, PORT HURON, MI 48060	386004727	501(C)(3)/GOVT	40,000.	0.	N/A	N/A	IMPROVEMENT
COMMUNITY ACTION NETWORK PO BOX 130076, ANN ARBOR, MI 48113	382792610	501(C)(3)/GOVT	36,000.	0.	N/A	N/A	IMPROVEMENT
THE MIAMI FOUNDATION 40 NW 3RD STREET STE 305, MIAMI, FL 33128	630350357	501(C)(3)/GOVT	35,000.	0.	N/A	N/A	IMPROVEMENT
PARK PRIDE ATLANTA, INC. 233 PEACHTREE STREET STE 1600, ATLANTA, GA 30303	581883895	501(C)(3)/GOVT	35,000.	0.	N/A	N/A	IMPROVEMENT
FOCUS ON RENEWAL 420 CHARITIES AVE, MC KEES ROCKS, PA 15136	237181440	501(C)(3)/GOVT	34,000.	0.	N/A	N/A	IMPROVEMENT
CITY OF JAMESTOWN PARKS & REC 200 EAST THIRD STREET, JAMESTOWN, NY 14701	166002545	501(C)(3)/GOVT	33,000.	0.	N/A	N/A	IMPROVEMENT
PITTSBURGH LEARNING COMMONS 1256 FRANKLIN AVE, WILKINSBURG, PA 15221	814468419	501(C)(3)/GOVT	30,000.	0.	N/A	N/A	IMPROVEMENT
SENECA-BABCOCK COMMUNITY ASSN, INC. 1168 SENECA STREET, BUFFALO, NY 14210	237367697	501(C)(3)/GOVT	30,000.	0.	N/A	N/A	IMPROVEMENT
GROUNDED STRATEGIES 6587 HAMILTON AVE #1, PITTSBURGH, PA 15206	352309836	501(C)(3)/GOVT	30,000.	0.	N/A	N/A	IMPROVEMENT
PORT HURON HOUSING COMMISSION 905 7TH STREET, PORT HURON, MI 48060	382937929	501(C)(3)/GOVT	27,000.	0.	N/A	N/A	IMPROVEMENT
HOUSTON COMMUNITY TOOLBANK 1215 GAZIN, HOUSTON, TX 77020	461152387	501(C)(3)/GOVT	25,274.	0.	N/A	N/A	IMPROVEMENT
LYNDONVILLE CENTRAL SCHOOL 25 HOUSEL AVE, LYNDONVILLE, NY 14098	166002148	501(C)(3)/GOVT	25,000.	0.	N/A	N/A	IMPROVEMENT
DETROIT RIVERFRONT CONSERVANCY 600 REMAISSANCE CENTER STE 1720, DETROIT, MI 48243	300125283	501(C)(3)/GOVT	25,000.	0.	N/A	N/A	IMPROVEMENT
CITY OF ATLANTA MAYOR'S OFC. OF CULTURAL AFFAIRS 233 PEACHTREE STREET STE 1600, ATLANTA, GA 30303	586000511	501(C)(3)/GOVT	25,000.	0.	N/A	N/A	IMPROVEMENT
BUILDING COMMUNITY WORKSHOP 416 S. ERVAY STREET, DALLAS, TX 75201	262132264	501(C)(3)/GOVT	25,000.	0.	N/A	N/A	IMPROVEMENT
TRANSMIT RECEIVE LABS 205 ROBERTS STREET, HOUSTON, TX 77003	465563614	501(C)(3)/GOVT	25,000.	0.	N/A	N/A	IMPROVEMENT

KaBOOM!, INC. 52-1970904

## Schedule I: Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

1870 RICHONDS, BOSTOR, TX 77842   NUMBER PRINTED STUDY TOWN   B10736704   501(0)(3)(3077   24,000.   0. N/A	WESTCHASE DISTRICT	760479226	501(C)(3)/GOVT	25,000.	0.	N/A	N/A	IMPROVEMENT
DE DEX 997, ALBER PARK, MI 48:01 ADVANCING MACCOME 17 NEW MAR FORM, MI CORE, MI 48:3 17 NEW MAR FORM, MI CORE, MI 48:3 18 NEW MAR FORM, MI AND CORE, MI 48:3 18 NEW MAR FORM, MI AND CORE, MI 48:3 18 NEW MAR FORM, MI AND MI MAR MARKET MI MI MARKET MARK	10370 RICHMOND, HOUSTON, TX 77042							
ADVANCING MACCING   MACCING   MACING MACCING   MACING MA		810736704	501(C)(3)/GOVT	24,000.	0.	N/A	N/A	IMPROVEMENT
SEMEN SERIES   MORT CREEKS   MEST	PO BOX 997, ALLEN PARK, MI 48101							
INDIAN MERITH PARTMENSITIES, INC.   453332540   501(C)(3)/GOVT   23,000.   0. N/A		462344176	501(C)(3)/GOVT	23,000.	0.	N/A	N/A	IMPROVEMENT
SIN BLID CREATE NO STAND, NUMBER 100, 100 THE ADDRESS OF THE NUMBER 100, 100 THE ADDRESS OF THE NUMBER 100, 100 THE ADDRESS OF THE ADDRESS	25 NORTH MAIN STREET, MOUNT CLEMENS, MI 48043							
15 No. 200 STREET ST. 401. LUKE, 79 13317   HOUSTOON PUBLIC LIBRARY   746001164   501(C)(3)/6007   23,000.   0. N/A	-	453332540	501(C)(3)/GOVT	23,000.	0.	N/A	N/A	IMPROVEMENT
SOUNCEMENT STRITT, MOUSTOW, TX 77074   S11424233   S01C1(3)/GOVT   23,000.	425 NE 22ND STREET STE 401, MIAMI, FL 33137			·				
CONNECTICUT COMMUNITY   811424233   501(0)(3)/60VT   23,000.   0. N/A   N/A   IMPROVEMENT   6700 ELLARE ROLD, BUSING, TX 17074   53.230 SIERT, PITSBURG PARKS COMSERVANCY   232882145   501(0)(3)/60VT   22,000.   0. N/A   N/A   IMPROVEMENT   55.230 SIERT, PITSBURG PARKS COMSERVANCY   232882145   501(0)(3)/60VT   22,000.   0. N/A   N/A   IMPROVEMENT   1801 SN 13 AVIA, MANT, FL 33145   TRYING TOGETHER   256089906   501(0)(3)/60VT   21,000.   0. N/A   N/A   IMPROVEMENT   1804 SIERT, RELIVILLE, NY 14994   261186988   501(0)(3)/60VT   21,000.   0. N/A   N/A   IMPROVEMENT   1804 SIERT, RELIVILLE, NY 14994   1804 SIERT, RELIVERANCE, RE	HOUSTON PUBLIC LIBRARY	746001164	501(C)(3)/GOVT	23,000.	0.	N/A	N/A	IMPROVEMENT
F100 ENLANCE FORD, MODESTER, 151303   151303	500 MCKINNEY STREET, HOUSTON, TX 77002							
### PITTSBURGH PARKS CONSERVANCY   S. 189 SYEAT, PITTSBURGH, PARKS CONSERVANCY   S. 189 SYEAT, PITTSBURGH, PARKS CONSERVANCY   S. 189 SYEAT, PITTSBURGH, PARKS   TOURS   S. 189 SYEAT, PARKS   S. 189 SYEAT,	CONNECTICUT COMMUNITY	811424233	501(C)(3)/GOVT	23,000.	0.	N/A	N/A	IMPROVEMENT
## S. 280 STREET, PITSEREER, PA 15003  MIAMI RIVER FUND, INC.  \$508067648	6700 BELLAIRE ROAD, HOUSTON, TX 77074							
## 15 S. 280 STREET, PITTSERRE, 74 1500:  MIAMI RIVER FUND, INC. 1801 SN 13 AVE, MIAMI, FL 33145  TRYING TOGETHER 2506 809906 501(C)(3)/GOVT 21,000. 0. N/A N/A IMPROVEMENT  1804 SUBAN STREET, PITTSERRE, 81 1517  ART FOR RURAL AMERICA 130 KAN 13 AVE, MIAMIL, N 14034  CITIZENS FOR A BETTER CASSADMAA 55 LAKEVIEN AVE, CASSADMAA, N 14718  CITIZENS FOR A BETTER CASSADMAA 55 LAKEVIEN AVE, CASSADMAA, N 14718  COLTY OF ROCHESTER, N 14613  SOCCER IN THE STREETS 1018 GUAD ES 154, ALBARIA, GA 30312  MIAMI CHILDREN'S MUSEUM 750 ROCHESTER, N 14513  SOCCER IN THE STREETS 1018 GUAD ES 154, ALBARIA, GA 30312  MIAMI CHILDREN'S MUSEUM 750 ROCHESTER, N 1517  AND ROCHESTER CASSADMAA 1018 GUAD ES 155  SOCCER IN THE STREETS 1018 GUAD ES 155  SOCCER IN THE STREETS 1018 GUAD ES 155  SOLIC)(3)/GOVT 20,000. 0. N/A  MIAMI CHILDREN'S MUSEUM 750 ROCHESTER, N 1517  AND ROCHESTER, N 1517  SOCCER IN THE STREETS 581874451  SOLIC)(3)/GOVT 20,000. 0. N/A  MIAMI CHILDREN'S MUSEUM 750 ROCHESTER, N 1517  AND ROCHESTER, N 1517  SOLIC IN THE STREETS 581874451  SOLIC)(3)/GOVT 20,000. 0. N/A  MIAMI CHILDREN'S MUSEUM 750 ROCHESTER, N 1517  AND ROCHESTER, N 1517  SOLIC IN THE STREETS 581874451  SOLIC)(3)/GOVT 20,000. 0. N/A  MIAMI CHILDREN'S MUSEUM 750 ROCHESTER, N 1517  AND ROCHESTER, N 1517  AND ROCHESTER, N 1517  SOLIC IN THE STREETS 581874451  SOLIC IN THE STREETS  SOLIC IN THE STRE	PITTSBURGH PARKS CONSERVANCY	232882145	501(C)(3)/GOVT	22,000.	0.	N/A	N/A	IMPROVEMENT
1801 SW 13 AVE, MIAMI, FL 33145   TRYING TOGETHER   256089906   501(C)(3)/GOVT   21,000.	45 S. 23RD STREET, PITTSBURGH, PA 15203			·				
TRYING TOGETHER   15217   256089906   501(C)(3)/GOVT   21,000.   0. N/A	MIAMI RIVER FUND, INC.	650867648	501(C)(3)/GOVT	22,000.	0.	N/A	N/A	IMPROVEMENT
SOURCE STREET, PITSSURGE, PA 15217   ART FOR RURAL AMERICA   261186988   501(C)(3)/GOVT   21,000.   0. N/A   N/A   IMPROVEMENT	1801 SW 13 AVE, MIAMI, FL 33145							
ART FOR RURAL AMERICA 130 MAIN STREET, WELLSVILLE, NY 14894 CITIZENS FOR A BETTER CASSADAGA 130 MAIN STREET, WELLSVILLE, NY 14894 CITIZENS FOR A BETTER CASSADAGA 130 MAIN STREET, WELLSVILLE, NY 14894 CITIZENS FOR A BETTER CASSADAGA 130 ELVO DEWEY AVE, CASSADAGA, NY 14718  SOCCHESTER 166002551 501(C)(3)/GOVT 20,000.  0. N/A N/A IMPROVEMENT  500CCER IN THE STREETS 130 BLVD NE STE 4, ATLANTA, GA 30312 MIAMI CHILLDREN'S MUSEUM 592396999 501(C)(3)/GOVT 20,000.  0. N/A N/A IMPROVEMENT  900 MACARTEUR CUSSERX, NIMMI, FL 33112 XSIAN AMERICANS ADVANCING JUSTICE AL 16040 UNITY BUYE UNITE, NORGOS, GA 30071 CITI OF MIAMIN MENEY OF CIVIL PROMORDING SOCCHESTER 15040 UNITY BUYE UNITE, NORGOS, GA 30071 CITI OF MIAMIN MENEY OF CIVIL PROMORDING SOCCHESTER 15040 UNITY BUYE UNITE, NORGOS, GA 30071 CITI OF MIAMIN MENEY OF CIVIL PROMORDING SOCCHESTER 15040 UNITY BUYE UNITE, NORGOS, GA 30071 CITI OF MIAMIN MENEY OF CIVIL PROMORDING MAINS 55 TRINITY AVE SE, ATLANTA, GA 30303  EARTH LEARNING 1121 NN 3RD AVE, MIAMI, FL 33136  CURRENT INITIATIVES 262833911 501(C)(3)/GOVT 20,000.  0. N/A N/A IMPROVEMENT 19046 BEDUE B DOWN SUND \$160, TAMPA, FL 33447 YOUNG AT ART MUSEUM 592832971 501(C)(3)/GOVT 20,000.  0. N/A N/A IMPROVEMENT 1751 SN 121 AVE STE 1, DAVIE, FL 33325 TRINITY BASIN PREPARATORY, INC. 311614490 501(C)(3)/GOVT 20,000.  0. N/A N/A IMPROVEMENT 1751 SN 121 AVE STE 1, DAVIE, FL 33325 TRINITY BASIN PREPARATORY, INC. 311614490 501(C)(3)/GOVT 20,000.  0. N/A N/A IMPROVEMENT		256089906	501(C)(3)/GOVT	21,000.	0.	N/A	N/A	IMPROVEMENT
130 MAIN STREET, WELLSVILLE, NY 14894   CITILERNS FOR A BETTER CASSADAGA   S12478988   501(C)(3)/GOVT   21,000.	5604 SOLWAY STREET, PITTSBURGH, PA 15217							
CITIZENS FOR A BETTER CASSADAGA   S12478988   501(C)(3)/GOVT   21,000.   0. N/A   N/A   IMPROVEMENT	ART FOR RURAL AMERICA	261186988	501(C)(3)/GOVT	21,000.	0.	N/A	N/A	IMPROVEMENT
STAREVIEW AVE, CASSADAGA, NY 14718   CITY OF ROCHESTER   166002551   501(C)(3)/GOVT   20,000.   0. N/A   N/A   IMPROVEMENT	130 MAIN STREET, WELLSVILLE, NY 14894							
STAKEVIEW AVE, CASSADAGA, NY 14718   CITY OF ROCHESTER   166002551   501(C)(3)/GOVT   20,000.   0. N/A   N/A   IMPROVEMENT	CITIZENS FOR A BETTER CASSADAGA	812478988	501(C)(3)/GOVT	21,000.	0.	N/A	N/A	IMPROVEMENT
### SOCCER IN THE STREETS   581874451   501(C)(3)/GOVT   20,000.   0. N/A   N/A   IMPROVEMENT	55 LAKEVIEW AVE, CASSADAGA, NY 14718			·				
SOCCER IN THE STREETS   581874451   501(C)(3)/GOVT   20,000.   0. N/A   N/A   IMPROVEMENT	CITY OF ROCHESTER	166002551	501(C)(3)/GOVT	20,000.	0.	N/A	N/A	IMPROVEMENT
130 BLVD NE STE 4, ATLANTA, GA 30312	400 DEWEY AVE, ROCHESTER, NY 14613							
130 BLVD NE STE 4, ATLANTA, GA 30312	SOCCER IN THE STREETS	581874451	501(C)(3)/GOVT	20,000.	0.	N/A	N/A	IMPROVEMENT
980 MACARTHUR CAUSEWAY, MIAMI, FL 33132  ASIAN AMERICANS ADVANCING JUSTICE AL 6040 UNITY DRIVE UNIT E, NORCROSS, GA 30071  CITY OF ATLANTA MADE'S OPC OF INDURANT AFFAIRS 55 TRINITY AVE SE, ATLANTA, GA 30303  EARTH LEARNING 1121 NW 3RD AVE, MIAMI, FL 33136  CURRENT INITIATIVES 19046 BRUCE B DOWNS BLVD #160, TAMPA, FL 33647  YOUNG AT ART MUSEUM 751 SW 121 AVE STE 1, DAVIE, FL 33325  TRINITY BASIN PREPARATORY, INC. 311614490 501(C)(3)/GOVT 20,000.  0. N/A N/A IMPROVEMENT 0. N/A N/A IMPROVEMENT 0. N/A IMPROVEMENT 0. N/A IMPROVEMENT 0. N/A IMPROVEMENT 0. N/A IMPROVEMENT	130 BLVD NE STE 4, ATLANTA, GA 30312	1		·				
980 MACARTHUR CAUSEWAY, MIAMI, FL 33132  ASIAN AMERICANS ADVANCING JUSTICE AL 6040 UNITY DRIVE UNIT E, NORCROSS, GA 30071  CITY OF ATLANTA MADE'S OPC OF INDURANT AFFAIRS 55 TRINITY AVE SE, ATLANTA, GA 30303  EARTH LEARNING 1121 NW 3RD AVE, MIAMI, FL 33136  CURRENT INITIATIVES 19046 BRUCE B DOWNS BLVD #160, TAMPA, FL 33647  YOUNG AT ART MUSEUM 751 SW 121 AVE STE 1, DAVIE, FL 33325  TRINITY BASIN PREPARATORY, INC. 311614490 501(C)(3)/GOVT 20,000.  0. N/A N/A IMPROVEMENT 0. N/A N/A IMPROVEMENT 0. N/A IMPROVEMENT 0. N/A IMPROVEMENT 0. N/A IMPROVEMENT 0. N/A IMPROVEMENT	MIAMI CHILDREN'S MUSEUM	592396999	501(C)(3)/GOVT	20,000.	0.	N/A	N/A	IMPROVEMENT
6040 UNITY DRIVE UNIT E, NORCROSS, GA 30071  CITY OF ATLANTA MAYOR'S OFC OF IMMUGRANT AFFAIRS  55 TRINITY AVE SE, ATLANTA, GA 30303  EARTH LEARNING  1121 NW 3RD AVE, MIAMI, FL 33136  CURRENT INITIATIVES  CURRENT INITIATIVES  262833911  501(C)(3)/GOVT  20,000.  0. N/A  N/A  IMPROVEMENT  0. N/A  IMPROVEMENT  0. N/A  IMPROVEMENT  19046 BRUCE B DOWNS BLVD #160, TAMPA, FL 33647  YOUNG AT ART MUSEUM  751 SW 121 AVE STE 1, DAVIE, FL 33325  TRINITY BASIN PREPARATORY, INC.  311614490  501(C)(3)/GOVT  20,000.  0. N/A  N/A  IMPROVEMENT  0. N/A  N/A  IMPROVEMENT		1						
6040 UNITY DRIVE UNIT E, NORCROSS, GA 30071  CITY OF ATLANTA MAYOR'S OFC OF INNIGRANT AFFAIRS  55 TRINITY AVE SE, ATLANTA, GA 30303  EARTH LEARNING  1121 NW 3RD AVE, MIAMI, FL 33136  CURRENT INITIATIVES  CURRENT INITIATIVES  262833911  501(C)(3)/GOVT  20,000.  0. N/A  N/A  IMPROVEMENT  0. N/A  IMPROVEMENT  0. N/A  IMPROVEMENT  19046 BRUCE B DOWNS BLVD #160, TAMPA, FL 33647  YOUNG AT ART MUSEUM  751 SW 121 AVE STE 1, DAVIE, FL 33325  TRINITY BASIN PREPARATORY, INC.  311614490  501(C)(3)/GOVT  20,000.  0. N/A  N/A  IMPROVEMENT  0. N/A  IMPROVEMENT	ASIAN AMERICANS ADVANCING JUSTICE AL	272577567	501(C)(3)/GOVT	20,000.	0.	N/A	N/A	IMPROVEMENT
55 TRINITY AVE SE, ATLANTA, GA 30303   S00000311   S01(C)(3)/GOVT   20,000.   0. N/A   N/A   IMPROVEMENT	6040 UNITY DRIVE UNIT E, NORCROSS, GA 30071					,	17, 22	
EARTH LEARNING 1121 NW 3RD AVE, MIAMI, FL 33136  CURRENT INITIATIVES 19046 BRUCE B DOWNS BLVD #160, TAMPA, FL 33647  YOUNG AT ART MUSEUM 751 SW 121 AVE STE 1, DAVIE, FL 33325  TRINITY BASIN PREPARATORY, INC. 311614490  501(C)(3)/GOVT  20,000.  0. N/A  N/A  IMPROVEMENT  0. N/A  N/A  IMPROVEMENT  0. N/A  N/A  IMPROVEMENT  0. N/A  IMPROVEMENT  0. N/A  IMPROVEMENT		586000511	501(C)(3)/GOVT	20,000.	0.	N/A	N/A	IMPROVEMENT
TRINITY BASIN PREPARATORY, INC.   33136								
CURRENT INITIATIVES 19046 BRUCE B DOWNS BLVD #160, TAMPA, FL 33647  YOUNG AT ART MUSEUM 751 SW 121 AVE STE 1, DAVIE, FL 33325  TRINITY BASIN PREPARATORY, INC. 311614490 501(C)(3)/GOVT 20,000. 0. N/A N/A IMPROVEMENT		571170959	501(C)(3)/GOVT	20,000.	0.	N/A	N/A	IMPROVEMENT
19046 BRUCE B DOWNS BLVD #160, TAMPA, FL 33647  YOUNG AT ART MUSEUM 751 SW 121 AVE STE 1, DAVIE, FL 33325  TRINITY BASIN PREPARATORY, INC. 311614490 501(C)(3)/GOVT 20,000. 0. N/A N/A IMPROVEMENT	1121 NW 3RD AVE, MIAMI, FL 33136							
YOUNG AT ART MUSEUM 592832971 501(C)(3)/GOVT 20,000. 0. N/A N/A IMPROVEMENT  TRINITY BASIN PREPARATORY, INC. 311614490 501(C)(3)/GOVT 20,000. 0. N/A N/A IMPROVEMENT	CURRENT INITIATIVES	262833911	501(C)(3)/GOVT	20,000.	0.	N/A	N/A	IMPROVEMENT
751 SW 121 AVE STE 1, DAVIE, FL 33325  TRINITY BASIN PREPARATORY, INC. 311614490 501(C)(3)/GOVT 20,000. 0. N/A N/A IMPROVEMENT	19046 BRUCE B DOWNS BLVD #160, TAMPA, FL 33647							
751 SW 121 AVE STE 1, DAVIE, FL 33325  TRINITY BASIN PREPARATORY, INC. 311614490 501(C)(3)/GOVT 20,000. 0. N/A N/A IMPROVEMENT	YOUNG AT ART MUSEUM	592832971	501(C)(3)/GOVT	20,000.	0.	N/A	N/A	IMPROVEMENT
TRINITY BASIN PREPARATORY, INC. 311614490 501(C)(3)/GOVT 20,000. 0. N/A N/A IMPROVEMENT	751 SW 121 AVE STE 1, DAVIE, FL 33325	1		·				
400 S. ZANG BLVD STE 700, DALLAS, TX 75208		311614490	501(C)(3)/GOVT	20,000.	0.	N/A	N/A	IMPROVEMENT
	400 S. ZANG BLVD STE 700, DALLAS, TX 75208	1		, , , , , ,	٠,	,	, -	

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# Schedule I: Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

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FRESH ARTS	300223932	501(C)(3)/GOVT	20,000.	0.	N/A	N/A	IMPROVEMENT
1502 SAWYER STREET #103, HOUSTON, TX 77007							
OPEN ARCHITECTURE HOUSTON	813494544	501(C)(3)/GOVT	20,000.	0.	N/A	N/A	IMPROVEMENT
4039 WYNE STREET, HOUSTON, TX 77017							
CITY OF MIAMI	596000375	501(C)(3)/GOVT	20,000.	0.	N/A	N/A	IMPROVEMENT
444 SW 2ND AVE 5TH FL, MIAMI, FL 33130							
ADAIR PARK TODAY, INC.	581294029	501(C)(3)/GOVT	18,000.	0.	N/A	N/A	IMPROVEMENT
PO BOX 4378, ATLANTA, GA 30310							
GARFIELD JUBILEE ASSOCIATION, INC.	251466052	501(C)(3)/GOVT	17,000.	0.	N/A	N/A	IMPROVEMENT
5323 PENN AVE, PITTSBURGH, PA 15224							
HARRIS COUNTY PUBLIC HEALTH	760454514	501(C)(3)/GOVT	17,000.	0.	N/A	N/A	IMPROVEMENT
5815 ANTIONE DRIVE STE A, HOUSTON, TX 77091							
GLASSPORT COMMUNITY OUTREACH	821121652	501(C)(3)/GOVT	16,000.	0.	N/A	N/A	IMPROVEMENT
526 MONOGAHELA AVE 1ST FL, GLASSPORT, PA 15045							
COMMUNITY FARMERS MARKET, INC.	275262520	501(C)(3)/GOVT	16,000.	0.	N/A	N/A	IMPROVEMENT
659 AUBURN AVE NE STE G25, ATLANTA, GA 30312							
WHARTON HIGH SCHOOL	746002564	501(C)(3)/GOVT	15,750.	0.	N/A	N/A	IMPROVEMENT
1 TIGER AVE, WHARTON, TX 77488							
CYPRESS TRAILS UNITED METHODIST CHURCH	760084655	501(C)(3)/GOVT	15,750.	0.	N/A	N/A	IMPROVEMENT
22801 ALDINE WESTFIELD RD, SPRING, TX 77373							
MON VALLEY ALLIANCE FDN	251154706	501(C)(3)/GOVT	15,000.	0.	N/A	N/A	IMPROVEMENT
PO BOX 145, CHARLEROI, PA 15022							
PITTSBURGH FULTON PTA	832170164	501(C)(3)/GOVT	15,000.	0.	N/A	N/A	IMPROVEMENT
5799 HAMPTON STREET, PITTSBURGH, PA 15206							
WONDERROOT	562482941	501(C)(3)/GOVT	15,000.	0.	N/A	N/A	IMPROVEMENT
PO BOX 89018, ATLANTA, GA 30312							
THE PARKS FDN OF MIAMI-DADE	200924393	501(C)(3)/GOVT	15,000.	0.	N/A	N/A	IMPROVEMENT
275 NW 2ND STREET 5TH FL, MIAMI, FL 33128					,	,	
TEXAS TREE FOUNDATION	751886520	501(C)(3)/GOVT	15,000.	0.	N/A	N/A	IMPROVEMENT
2906 SWISS AVE, DALLAS, TX 75204							
BEHIND EVERY DOOR MINISTRIES, INC.	271805416	501(C)(3)/GOVT	15,000.	0.	N/A	N/A	IMPROVEMENT
2824 SWISS AVE, DALLAS, TX 75204		( ) ( ) ( ) ( )	,		,	,	
DETROIT PUBLIC SCHOOLS FOUNDATION	300135450	501(C)(3)/GOVT	14,320.	0.	N/A	N/A	RIGAMAJIGS
3011 W. GRAND BLVD, DETROIT, MI 48202		, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	, , ,			'	
WHITMORE LAKE PUBLIC SCHOOLS	386004080	501(C)(3)/GOVT	14,000.	0.	N/A	N/A	IMPROVEMENT
8845 MAIN STREET, WHITMORE LAKE, MI 48189							
KILGORE ISD	756001907	501(C)(3)/GOVT	14,000.	0.	N/A	N/A	IMPROVEMENT
301 N. KILGORE STREET, KILGORE, TX 75662							
			i e		1		
RUDOLPH MATAS SCHOOL PTO	726000592	501(C)(3)/GOVT	14,000.	0.	N/A	N/A	IMPROVEMENT

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TAYLORS ELEMENTARY PTA 809 REID SCHOOL ROAD, TAYLORS, SC 29687	570662019	501(C)(3)/GOVT	14,000.	0.	N/A	N/A	IMPROVEMENT
PRESCOTT ELEMENTARY 405 N. WASHINGTON AVE, SCRANTON, PA 18504	246001221	501(C)(3)/GOVT	14,000.	0.	N/A	N/A	IMPROVEMENT
CITY OF HAPEVILLE 3468 NORTH FULTON AVE, ATLANTA, GA 30354	586000589	501(C)(3)/GOVT	13,000.	0.	N/A	N/A	IMPROVEMENT
TAFT INDEPENDENT SCHOOL DISTRICT 400 COLLEGE STREET, TAFT, TX 78390	746002353	501(C)(3)/GOVT	12,232.	0.	N/A	N/A	RIGAMAJIG
EAST END FOUNDATION 3211 HARRISBURG BLVD, HOUSTON, TX 77003	463670357	501(C)(3)/GOVT	10,000.	0.	N/A	N/A	IMPROVEMENT
ALDINE ISD 2520 W. THORNE BLVD, HOUSTON, TX 77073	746001110	501(C)(3)/GOVT	10,000.	0.	N/A	N/A	IMPROVEMENT
BOARD OF EDUCATION OF CHICAGO 42 WEST MADISON, CHICAGO, IL 60602	366005821	501(C)(3)/GOVT	8,104.	0.	N/A	N/A	RIGAMAJIG
GREATER CARBONDALE YMCA 82 NORTH MAIN STREET, CARBONDALE, PA 18407	240795515	501(C)(3)/GOVT	8,000.	0.	N/A	N/A	IMPROVEMENT
WOONSOCKET EDUCATION DEPT 108 HIGH STREET, WOONSOCKET, RI 02895	050494840	501(C)(3)/GOVT	8,000.	0.	N/A	N/A	IMPROVEMENT
OUR SAVIOR SCHOOL 455 E. STATE STREET, JACKSONVILLE, IL 62650	370662517	501(C)(3)/GOVT	8,000.	0.	N/A	N/A	IMPROVEMENT
VILLAGE OF DEFERIET PO BOX 206, DEFERIET, NY 13628	156012297	501(C)(3)/GOVT	8,000.	0.	N/A	N/A	IMPROVEMENT
CITY OF ANTHONY 820 HIGHWAY 478, ANTHONY, NM 88021	800611389	501(C)(3)/GOVT	8,000.	0.	N/A	N/A	IMPROVEMENT
LIVERPOOL CENTRAL SCHOOL DISTRICT 192 BLACKBERRY ROAD, LIVERPOOL, NY 13090	156002530	501(C)(3)/GOVT	8,000.	0.	N/A	N/A	IMPROVEMENT
CLAY COUNTY SCHOOLS 285 CHURCH STREET, CLAY, WV 25043	556000311	501(C)(3)/GOVT	8,000.	0.	N/A	N/A	IMPROVEMENT
PA SCHOOL FOR THE DEAF 100 W SCHOOL HOUSE LN, PHILADELPHIA, PA 19144	231581227	501(C)(3)/GOVT	8,000.	0.	N/A	N/A	IMPROVEMENT
LA CASA DE ESPERANZA, INC. 410 ARCADIAN AVE, WAUKESHA, WI 53186	391144446	501(C)(3)/GOVT	8,000.	0.	N/A	N/A	IMPROVEMENT
PO BOX 334, RONAN, MT 59864	810515029	501(C)(3)/GOVT	8,000.	0.	N/A	N/A	IMPROVEMENT
BUNCOMBE GRADE SCHOOL PO BOX 40, BUNCOMBE, IL 62912	376003525	501(C)(3)/GOVT	8,000.	0.	N/A	N/A	IMPROVEMENT
TOWN OF FRIES PO BOX 452, FRIES, VA 24330	546001297	501(C)(3)/GOVT	8,000.	0.	N/A	N/A	IMPROVEMENT
JEWISH COMMUNITY CTR OF GREATER COLUMBUS 1125 COLLEGE AVE, COLUMBUS, OH 43209	314379496	501(C)(3)/GOVT	8,000.	0.	N/A	N/A	IMPROVEMENT

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SANTA FE RECOVERY CENTER 5312 JAGUAR DRIVE, SANTA FE, NM 87507	850216976	501(C)(3)/GOVT	8,000.	0.	N/A	N/A	IMPROVEMENT
PROVIDENCE SERVING PEOPLE, INC. 458 MADISON AVE STE 102, AKRON, OH 44320	823629408	501(C)(3)/GOVT	8,000.	0.	N/A	N/A	IMPROVEMENT
CALVARY CHAPEL OF BOISE, INC. 123 AUTO DRIVE, BOISE, ID 83709	820373010	501(C)(3)/GOVT	8,000.	0.	N/A	N/A	IMPROVEMENT
ST FRANCIS OF ASSISI ELEMENTARY 2500 K STREET, SACRAMENTO, CA 95816	454330879	501(C)(3)/GOVT	8,000.	0.	N/A	N/A	IMPROVEMENT
SETON CATHOLIC SCHOOL 117 E 4TH STREET, OTTUMWA, IA 52501	421063075	501(C)(3)/GOVT	8,000.	0.	N/A	N/A	IMPROVEMENT
HOWARD GARDNER CHARTER 647 E STREET, CHULA VISTA, CA 91910	273911300	501(C)(3)/GOVT	8,000.	0.	N/A	N/A	IMPROVEMENT
ALLENDALE ASSOCIATION 600 W GRAND AVE, LAKE VILLA, IL 60046	362177140	501(C)(3)/GOVT	8,000.	0.	N/A	N/A	IMPROVEMENT
PRESERVATION OF AFFORDABLE HOUSING 40 COURT STREET STE 700, BOSTON, MA 02108	311616634	501(C)(3)/GOVT	8,000.	0.	N/A	N/A	IMPROVEMENT
ILLINOIS ABILITY SPORTS 329 N PEARL STREET, HAVANA, IL 62644	452616368	501(C)(3)/GOVT	8,000.	0.	N/A	N/A	IMPROVEMENT
CHILDREN'S ODYSSEY DEVELOPMENT PRESCHOOL 19 LIBBY STREET, PORTLAND, ME 04103	010475374	501(C)(3)/GOVT	8,000.	0.	N/A	N/A	IMPROVEMENT
CITY OF OTTOWA PO BOX 60, OTTAWA, KS 66067	486037972	501(C)(3)/GOVT	8,000.	0.	N/A	N/A	IMPROVEMENT
WHITEFIELD PUBLIC SCHOOL PO BOX 178, WHITEFIELD, OK 74472	731256986	501(C)(3)/GOVT	8,000.	0.	N/A	N/A	IMPROVEMENT
SODUS ELEMENTARY SCHOOL 6264 STATE ROUTE 88, SODUS, NY 14551	156002377	501(C)(3)/GOVT	8,000.	0.	N/A	N/A	IMPROVEMENT
INDIAN VALLEY COMMUNITY SERVICES DISTRICT PO BOX 899, GREENVILLE, CA 95947	942690091	501(C)(3)/GOVT	8,000.	0.	N/A	N/A	IMPROVEMENT
REFUGEE & SUPPORT SERVICES OF EMMAUS, INC. 715 MORRIS STREET, ALBANY, NY 12208	274089744	501(C)(3)/GOVT	8,000.		N/A	N/A	IMPROVEMENT
FAUBORG ST JOHN NEIGHBORHOOD ASSN, INC. PO BOX 19101, NEW ORLEANS, LA 70179	742633439	501(C)(3)/GOVT	8,000.		N/A	N/A	IMPROVEMENT
TAWAS AREA SCHOOLS 211 S PLANK ROAD, TAWAS CITY, MI 48763	386018192	501(C)(3)/GOVT	8,000.		N/A	N/A	IMPROVEMENT
THE SOUTH SIDE COMMUNITY COALITION 2101 WEST HOLMES ROAD, LANSING, MI 48910	522377012	501(C)(3)/GOVT	8,000.		N/A	N/A	IMPROVEMENT
CITY OF BOLIVAR 211 N WASHINGTON STREET, BOLIVAR, TN 38008	626000248	501(C)(3)/GOVT	8,000.	0.	N/A	N/A	IMPROVEMENT
BOYS & GIRLS CLUB OF DE DOVER UNIT 669 S UNION STREET, WILMINGTON, DE 19805	510068712	501(C)(3)/GOVT	8,000.	0.	N/A	N/A	IMPROVEMENT

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MARTIN LUTHER KING JR COMMUNITY CENTER TRUST 300 MARTIN LUTHER KING STREET, MUSKAGEE, OK 74461	731600003	501(C)(3)/GOVT	8,000.	0.	N/A	N/A	IMPROVEMENT
OTTUMWA COMMUITY SCHOOL DISTRICT 1112 N VAN BUREN, OTTUMWA, IA 52501	426037985	501(C)(3)/GOVT	8,000.	0.	N/A	N/A	IMPROVEMENT
MOSS POINT SCHOOL DISTRICT 4924 CHURCH STREET, MOSS POINT, MS 39563	640618618	501(C)(3)/GOVT	8,000.	0.	N/A	N/A	IMPROVEMENT
MCKENNA FARMS THERAPY SERVICES 3044 DUE WEST ROAD, DALLAS, GA 30157	582591506	501(C)(3)/GOVT	8,000.	0.	N/A	N/A	IMPROVEMENT
PERSHING COUNTY PO BOX E, LOVELOCK, NV 89419	886000131	501(C)(3)/GOVT	8,000.	0.	N/A	N/A	IMPROVEMENT
, ,	431021551	501(C)(3)/GOVT	8,000.	0.	N/A	N/A	IMPROVEMENT
BOYS AND GIRLS CLUB OF CORVALLIS 1112 NW CIRCLE BLVD, CORVALLIS, OR 97330	237153987	501(C)(3)/GOVT	8,000.	0.	N/A	N/A	IMPROVEMENT
NORTHLAND EARLY EDUCATION CENTER 8630 N OAK TRAFFICWAY, KANSAS CITY, MO 64155	431217498	501(C)(3)/GOVT	8,000.	0.	N/A	N/A	IMPROVEMENT
8203 SE 7TH AVE STE 100, PORTLAND, OR 97202	930474800	501(C)(3)/GOVT	7,733.	0.	N/A	N/A	IMAGINATION PLAYGROUND PRODUCT
ALBERTINA KERR CENTERS FOUNDATION 424 NE 22ND AVE, PORTLAND, OR 97232	931297104	501(C)(3)/GOVT	7,733.	0.	N/A	N/A	IMAGINATION PLAYGROUND PRODUCT
ANOVA EDUCATION AND BEHAVIOR CONSULTATION, INC. 200 CONCOURSE BLVD, SANTA ROSA, CA 95403	943370998	501(C)(3)/GOVT	7,648.	0.	N/A	N/A	IMAGINATION PLAYGROUND PRODUCT
ZUNI YOUTH ENRICHMENT PROJECT PO BOX 447, ZUNI, NM 87327	263259987	501(C)(3)/GOVT	7,631.	0.	N/A	N/A	IMAGINATION PLAYGROUND PRODUCT
ALBURQUERQUE PUBLIC SCHOOLS 2611 EUBANK NE, ALBUQUERQUE, NM 87112	856000101	501(C)(3)/GOVT	7,591.	0.	N/A	N/A	IMAGINATION PLAYGROUND PRODUCT
OCEANSIDE UNIFIED SCHOOL DISTRICT 2111 MISSION AVE, OCEANSIDE, CA 92058	952681075	501(C)(3)/GOVT	7,495.	0.	N/A	N/A	IMAGINATION PLAYGROUND PRODUCT
OCIA A PETERS K-3 ELEMENTARY SCHOOL 13262 NEWHOPE STREET, GARDEN GROVE, CA 92843	952378800	501(C)(3)/GOVT	7,495.	0.	N/A	N/A	IMAGINATION PLAYGROUND PRODUCT
SOUTH DADE FAMILY CENTER YMCA 9355 SW 134TH STREET, MIAMI, FL 33176	590624464	501(C)(3)/GOVT	7,393.	0.	N/A	N/A	IMAGINATION PLAYGROUND PRODUCT
EVOLUTION INSTITUTE, INC. 4309 N 34TH STREET, TAMPA, FL 33610	273353656	501(C)(3)/GOVT	7,393.	0.	N/A	N/A	IMAGINATION PLAYGROUND PRODUCT
THE FLORIDA CENTER FOR EARLY CHILDHOOD, INC. 4620 17TH STREET, SARASOTA, FL 34235	591947024	501(C)(3)/GOVT	7,393.	0.	N/A	N/A	IMAGINATION PLAYGROUND PRODUCT
1111 PAMELA STREET, LEESBURG, FL 34748	591146765	501(C)(3)/GOVT	7,393.	0.	N/A	N/A	IMAGINATION PLAYGROUND PRODUCT
EPISCOPAL CHILDREN'S SERVICES, INC. EUSTIS 550 E MCDONALD AVE, EUSTIS, FL 32726	591146765	501(C)(3)/GOVT	7,393.	0.	N/A	N/A	IMAGINATION PLAYGROUND PRODUCT
FLORIDA INSTITUTE FOR COMMUNITY STUDIES PO BOX 16745, TAMPA, FL 33687	593712006	501(C)(3)/GOVT	7,393.	0.	N/A	N/A	IMAGINATION PLAYGROUND PRODUCT

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THE RESOURCE ROOM CHILD CARE AND LEARNING CENTER 3050 NW 183RD STREET, MIAMI GARDENS, FL 33056	651110424	501(C)(3)/GOVT	7,393.	0.	N/A	N/A	IMAGINATION PLAYGROUND PRODUCT
FIELD CLUB ELEMENTARY 3512 WALNUT STREET, OMAHA, NE 68105	476002629	501(C)(3)/GOVT	7,393.	0.	N/A	N/A	IMAGINATION PLAYGROUND PRODUCT
CITY OF AURORA BECK PRESCHOOL 800 TELLURIDE STREET, AURORA, CO 80011	846000564	501(C)(3)/GOVT	7,368.	0.	N/A	N/A	IMAGINATION PLAYGROUND PRODUCT
AMERICAN DIABETES ASSN, INC. 7670 WOODWAY DRIVE STE 230, HOUSTON, TX 77063	131623888	501(C)(3)/GOVT	7,349.	0.	N/A	N/A	IMAGINATION PLAYGROUND PRODUCT
FORT SAM HOUSTON ELEMENTARY SCHOOL 4351 NURSERY ROAD, JBSA FT SAM HOUSTON, TX 78234	746003621	501(C)(3)/GOVT	7,274.	0.	N/A	N/A	IMAGINATION PLAYGROUND PRODUCT
BARRIO COMPREHENSIVE FAMILY HEALTHCARE CTR 2810 DACY LANE, KYLE, TX 78640	741724391	501(C)(3)/GOVT	7,274.	0.	N/A	N/A	IMAGINATION PLAYGROUND PRODUCT
ROMA ISD 258 n fm 649, rio grande city, TX 78582	746002011	501(C)(3)/GOVT	7,274.	0.	N/A	N/A	IMAGINATION PLAYGROUND PRODUCT
AUSTIN ACHIEVE PUBLIC SCHOOLS 5908 MANOR ROAD, AUSTIN, TX 78723	273700807	501(C)(3)/GOVT	7,274.	0.	N/A	N/A	IMAGINATION PLAYGROUND PRODUCT
DOGAN ELEMENTARY SCHOOL 4202 LIBERTY ROAD, HOUSTON, TX 77026	174600125	501(C)(3)/GOVT	7,274.	0.	N/A	N/A	IMAGINATION PLAYGROUND PRODUCT
ASSN FOR THE ADVANCEMENT OF MEXICAN-AMERICANS, INC. 6001 GULF FREEWAY, HOUSTON, TX 77023	741696961	501(C)(3)/GOVT	7,274.	0.	N/A	N/A	IMAGINATION PLAYGROUND PRODUCT
TEJANO CTR FOR COMMUNITY CONCERNS, INC. 2950 BROADWAY STREET, HOUSTON, TX 77017	760377101	501(C)(3)/GOVT	7,274.	0.	N/A	N/A	IMAGINATION PLAYGROUND PRODUCT
VIDOR ISD 120 E BOLIVAR, VIDOR, TX 77662	746002456	501(C)(3)/GOVT	7,274.	0.	N/A	N/A	IMAGINATION PLAYGROUND PRODUCT
JEREMIAH PROGRAM AUSTIN 1200 PAUL TERESA STREET, AUSTIN, TX 78702	411801834	501(C)(3)/GOVT	7,274.	0.	N/A	N/A	IMAGINATION PLAYGROUND PRODUCT
FRIENDLY HOUSE 1221 N MYRTLE, DAVENPORT, IA 52804	420733466	501(C)(3)/GOVT	7,266.	0.	N/A	N/A	IMAGINATION PLAYGROUND PRODUCT
BOTS AND GIRLS CLUB OF AUSTIN AND TRAVIS COUNTY, INC. 5407 N IH 35 STE 400, AUSTIN, TX 78723	746087356	501(C)(3)/GOVT	7,194.	0.	N/A	N/A	IMAGINATION PLAYGROUND PRODUCT
SCHOOL FOR ARTS-INFUSED LEARNING 4575 BLANCHARD WOODS, EVANS, GA 30809	465045525	501(C)(3)/GOVT	7,070.	0.	N/A	N/A	IMAGINATION PLAYGROUND PRODUCT
TABERNACLE ELEMENTARY SCHOOL 141 NEW ROAD, TABERNACLE, NJ 08088	216000330	501(C)(3)/GOVT	7,053.	0.	N/A	N/A	IMAGINATION PLAYGROUND PRODUCT
METRO COMMUNITY DEVELOPMENT CORP 877 EAST DELAVAN AVE, BUFFALO, NY 14215	043611860	501(C)(3)/GOVT	7,014.	0.	N/A	N/A	IMAGINATION PLAYGROUND PRODUCT
PHILADELPHIA FREEDOM VALLEY YMCA 5120 CHESTNUT STREET, PHILADELPHIA, PA 19139	231243965	501(C)(3)/GOVT	6,934.	0.	N/A	N/A	IMAGINATION PLAYGROUND PRODUCT
CITY OF SYRACUSE 412 SPENCER STREET, SYRACUSE, NY 13204	156000416	501(C)(3)/GOVT	6,934.	0.	N/A	N/A	IMAGINATION PLAYGROUND PRODUCT
	-1	1			L .		

KaBOOM!, INC. 52-1970904

## Schedule I: Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Part II: Grants and Other Assistance to Domestic Organizations and Domestic Governments **Continuation Statement** 

CANTALICIAN CTR FOR LEARNING 2049 GEORGE URBAN BLVD, DEPEW, NY 14043	161185276	501(C)(3)/GOVT	6,934.	0.	N/A	N/A	IMAGINATION PLAYGROUND PRODUCT
COLONIAL SCHOOL DISTRICT 230 FLOURTOWN ROAD, PLYMOUTH MEETING, PA 19462	291667962	501(C)(3)/GOVT	6,934.	0.	N/A	N/A	IMAGINATION PLAYGROUND PRODUCT
MONTGOMERY COUNTY - THE COMMONS 215 LEGION STREET, CLARKSVILLE, TN 37040	626000764	501(C)(3)/GOVT	6,827.	0.	N/A	N/A	IMAGINATION PLAYGROUND PRODUCT
YMCA OF SOUTHEASTERN NC PO BOX 3467, WILMINGTON, NC 28406		501(C)(3)/GOVT	6,781.	0.	N/A	N/A	IMAGINATION PLAYGROUND PRODUCT
GIRLS INCORPORATED OF NH 63 MARKET STREET, MANCHESTER, NH 03101	237416090	501(C)(3)/GOVT	6,756.	0.	N/A	N/A	IMAGINATION PLAYGROUND PRODUCT
WILLIAM WOOD ELEMENTARY SCHOOL 183 WOODHI SCHOOL ROAD, INEZ, TX 77968	749002453	501(C)(3)/GOVT	6,244.	0.	N/A	N/A	IMAGINATION PLAYGROUND PRODUCT
ARANSAS COUNTY ISD 502 MESQUITE STREET, FULTON, TX 78358	746002971	501(C)(3)/GOVT	6,244.	0.	N/A	N/A	IMAGINATION PLAYGROUND PRODUCT
BRAZORIA COUNTY ASSN FOR CITIZENS WITH HANDICAPS 120 E HOSPITAL DRIVE, ANGLETON, TX 77515	237441833	501(C)(3)/GOVT	6,244.	0.	N/A	N/A	IMAGINATION PLAYGROUND PRODUCT
REFUGIO ISD 601 CROCKETT, REFUGIO, TX 78377	746021871	501(C)(3)/GOVT	6,244.	0.	N/A	N/A	IMAGINATION PLAYGROUND PRODUCT
BOYS AND GIRLS CLUB OF VICTORIA 202 HOPKINS STREET, VICTORIA, TX 77902	746104461	501(C)(3)/GOVT	6,244.	0.	N/A	N/A	IMAGINATION PLAYGROUND PRODUCT
			2,037,000.	0.			·

#### **SCHEDULE J** (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

**Compensation Information** 

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

Compelete if the organization answered "Yes" on Form 990, Part IV, line 23.

Attach to Form 990.

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

OMB No. 1545-0047

2018

Open to Public Inspection

Employer identification number

KaBC	OOM!, INC. 52	2-1970904			
Part	Questions Regarding Compensation				
				Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a personal space of the section A, line 1a. Complete Part III to provide any relevant information regarding the				
	☐ First-class or charter travel ☐ Housing allowance or residence for pe	ersonal use			
	☐ Travel for companions ☐ Payments for business use of personal	al residence			
	☐ Tax indemnification and gross-up payments ☐ Health or social club dues or initiation				
	☐ Discretionary spending account ☐ Personal services (such as maid, chau	ıffeur, chef)			
b	If any of the boxes on line 1a are checked, did the organization follow a written policy required	garding payment			
	or reimbursement or provision of all of the expenses described above? If "No," com				
	explain		1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses	incurred by all			
_	directors, trustees, and officers, including the CEO/Executive Director, regarding the items				
	1a?		2		
3	Indicate which, if any, of the following the filing organization used to establish the compensation	tion of the			
	organization's CEO/Executive Director. Check all that apply. Do not check any boxes for met				
	related organization to establish compensation of the CEO/Executive Director, but explain in	Part III.			
	▼ Compensation committee				
	☒ Independent compensation consultant ☒ Compensation survey or study				
	☐ Form 990 of other organizations ☐ Approval by the board or compensation	on committee			
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to organization or a related organization:	o the filing			
а	Receive a severance payment or change-of-control payment?		4a		×
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?		4b		×
С	Participate in, or receive payment from, an equity-based compensation arrangement?		4c		×
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each ite	m in Part III.			
_	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5–9.				
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accru compensation contingent on the revenues of:	e any			
а	The organization?		5a		×
b	Any related organization?		5b		×
	If "Yes" on line 5a or 5b, describe in Part III.				
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accru compensation contingent on the net earnings of:	e any			
а	The organization?		6a		×
b	Any related organization?		6b		×
	If "Yes" on line 6a or 6b, describe in Part III.				
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provi	de any nonfixed			
'	payments not described on lines 5 and 6? If "Yes," describe in Part III		7		×
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that	at was subject			
	to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If				
	in Part III		8		×
		ļ			
9	If "Yes" on line 8 did the organization also follow the rebuttable presumption procedu	ire described in			

Regulations section 53.4958-6(c)?

9

Schedule J (Form 990) 2018

#### Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that aren't listed on Form 990, Part VII.

Note: The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

THOSE THE SERIE OF CONTRIBUTE (E)(I) (III) TO	1 000		f W-2 and/or 1099-MIS		(C) Retirement and		, , , ,		
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	applicable column (D) and (E) amounts for that individ  (D) Nontaxable benefits  (E) Total of columns (B) (F) Compensatiin column (B) repeas deferred on person 990  25,325. 380,567.  0. 0. 0.  19,913. 315,539.  0. 0. 0.  21,196. 244,158.  0. 0. 0.  19,056. 223,936.  0. 0. 3,423. 222,632.  0. 0. 32,004. 212,606.  0. 21,366. 208,947.  0. 0. 0.  20,180. 197,771.  0. 0.	in column (B) reported as deferred on prior	
JAMES SIEGAL	(i)	283,671.	54,089.	0.	17,482.	25,325.	380,567.	0.	
1 CEO	(ii)	0.	0.	0.	0.	0.	0.	0.	
BRUCE M. BOWMAN	(i)	245,552.	35,000.	0.	15,074.	19,913.	315,539.	0.	
2 PRESIDENT, PLAY PRODUCTS INITIATIVE	(ii)	0.	0.	0.	0.	0.	0.	0.	
GEORGE T. MEGAS	(i)	178,528.	33,185.	0.	11,249.	21,196.	244,158.	0.	
3 CFO	(ii)	0.	0.	0.	0.	0.	0.	0.	
ROXANNE RUCKER	(i)	160,066.	35,000.	0.	9,814.	19,056.	223,936.	0.	
4 VP, COMMUNITY IMPACT	(ii)	0.	0.	0.	0.	0.	0.	0.	
LYSA RATLIFF	(i)	179,305.	29,000.	0.	10,904.	3,423.	222,632.	0.	
<b>5</b> VP, PARTNERSHIP DEVELOPMENT	(ii)	0.	0.	0.	0.	0.	0.	0.	
AMY LEVNER	(i)	142,227.	29,000.	0.	9,375.	32,004.	212,606.	0.	
6 VP, COMMUNICATIONS & MARKETING	(ii)	0.	0.	0.	0.	0.	0.	0.	
CARLYNE CARDICHON	(i)	149,266.	29,000.	0.	9,315.	21,366.	208,947.	0.	
7 VP, FINANCE	(ii)	0.	0.	0.	0.	0.	0.	0.	
CARRIE LEOVY	(i)	142,256.	26,512.	0.	8,823.	20,180.	197,771.	0.	
8 SENIOR STRATEGIST	(ii)	0.	0.	0.	0.	0.	0.	0.	
	(i)								
9	(ii)								
	(i)								
10	(ii)								
	(i)								
11	(ii)								
	(i)								
12	(ii)								
	(i)								
13	(ii)								
	(i)								
14	(ii)								
	(i)								
15	(ii)								
	(i)								
16	(ii)								

Schedule J (Form 990) 2018

Part III	Supplemental I	nformation
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Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

Other: KABOOM!, INC. MAINTAINS A WRITTEN EXECUTIVE TRAVEL POLICY, WHICH APPLIES TO EACH OF ITS OFFICERS.
THE POLICY, WHICH IS ADMINISTERED BY THE FINANCE COMMITTEE AND APPROVED BY THE BOARD, COVERS AIR AND TRAIN
TRAVEL, ACCOMMODATIONS, CAR RENTALS AND LOCAL TRANSPORTATION AS WELL AS MEALS AND OTHER TRAVEL EXPENSES. THE
POLICY REQUIRES ECONOMY OR BUSINESS CLASS TRAVEL FOR SUBSTANTIALLY ALL AIR TRAVEL. UNDER KABOOM!'S EXECUTIVE
EXPENSE REVIEW PROCESS, THE TRAVEL AND OTHER EXPENSES FOR THE CEO INITIALLY ARE REVIEWED AND APPROVED BY THE
CFO, WHO REPORTS ON THESE EXPENSES IN DETAIL AND WITH APPROPRIATE ANALYSIS QUARTERLY TO THE CHAIR OF THE FINANCE
COMMITTEE, WHO ALSO REVIEWS AND APPROVES THESE EXPENSES. THE CHAIR OF THE FINANCE COMMITTEE REPORTS TO THE
BOARD ON THE RESULTS OF SUCH REVIEW. AS PART OF THE ANNUAL AUDIT PROCESS THE INDEPENDENT AUDITORS INCLUDE
IN THEIR EXAMINATION A REVIEW OF THE COMPANY'S COMPLIANCE WITH THIS POLICY AND CONDUCT SAMPLE TESTING AND REVIEW
OF THE EXPENSE RECEIPTS AND DOCUMENTATION FOR THE CEO.
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REV 11/05/18 PRO Schedule J (Form 990) 2018

#### SCHEDULE O (Form 990 or 990-EZ)

#### Supplemental Information to Form 990 or 990-EZ

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

OMB No. 1545-0047

Open to Public Inspection

**Employer identification number** 

Department of the Treasury
Internal Revenue Service

Name of the organization

► Attach to Form 990 or 990-EZ.

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

52-1970904 KaBOOM!, INC Other: PART III, LINE 1: FOR MORE THAN 20 YEARS, KABOOM! HAS BEEN WORKING TO CREATE SAFE, COMMUNITY-BUILT PLAYSPACES, DRIVE INNOVATION IN PLAYSPACE DESIGN FOR KIDS OF ALL AGES AND HELP ENSURE EQUITABLE ACCESS TO PLAY FOR KIDS AND FAMILIES IN EVERY COMMUNITY. KABOOM! WORKS WITH CITIES AND PARTNERS FROM ALL SECTORS TO MAKE IT AS EASY AS POSSIBLE FOR KIDS, ESPECIALLY THOSE WITH THE GREATEST NEED, TO PLAY, SO THAT THEY CAN LEARN, EXPLORE, GROW AND JUST BE KIDS. KABOOM! BELIEVES THAT PLAY IS THE BUSINESS OF CHILDHOOD AND IS ESSENTIAL TO PHYSICAL, COGNITIVE, CREATIVE, SOCIAL AND EMOTIONAL DEVELOPMENT; IT'S HOW KIDS BUILD STRONG MUSCLES AND HEALTHY BODIES; IT'S HOW THEY LEARN PROBLEM-SOLVING, CONFLICT RESOLUTION AND CREATIVITY; AND IT'S HOW THEY MAKE FRIENDS AND BUILD STRONG BONDS WITH ADULTS. YET, MANY KIDS, ESPECIALLY KIDS OF COLOR IN UNDER-RESOURCED COMMUNITIES, ARE NOT GETTING EQUITABLE OPPORTUNITIES TO PLAY. WE ARE NOW FOCUSING ON IMPACTING THE COMMUNITIES, AS WELL AS THE MUNICIPAL SYSTEMS AFFECTED BY DISINVESTMENT TO ADDRESS THE IMPORTANCE OF CREATING AND EQUITABLY EXPANDING OPPORTUNITIES FOR PLAY TO MAKE IT AS EASY AS POSSIBLE FOR ALL KIDS TO LEARN, EXPLORE, GROW AND KABOOM! BELIEVES COMMUNITIES CAN ADDRESS MANY URGENT PROBLEMS JUST BE KIDS. BY BRINGING PEOPLE TOGETHER TO ENSURE THAT ALL KIDS HAVE THE ACCESS AND OPPORTUNITY KABOOM! ADDRESSES THESE ISSUES BY: (I) FACILITATING THE CREATION OF SAFE, COMMUNITY-BUILT PLAYSPACES; (II) DRIVING INNOVATION IN PLAYSPACE DESIGN (III) HELPING CITIES MAKE PLAY THE EASY CHOICE FOR FOR ALL AGES OF KIDS; AND KIDS AND FAMILIES. ACHIEVING SCALE, EQUITY AND EASE OF PLAY OPPORTUNITIES FOR ALL KIDS REQUIRES WIDESPREAD CHANGE IN BOTH INDIVIDUAL BEHAVIORS (KIDS ACTUALLY PLAY MORE) AND SOCIETAL NORMS (SOCIETY REINFORCES THE EXPECTATION THAT KIDS NEED GREAT, SAFE PLACES TO PLAY). KABOOM! BELIEVES THERE IS, AND IS SEEKING TO SEIZE, AN OPPORTUNITY TO CATALYZE THESE SHIFTS BY INFLUENCING KEY AUDIENCES TO PROTECT

Page 2 Schedule O (Form 990 or 990-EZ) (2018) Name of the organization **Employer identification number** KaBOOM!, INC. 52-1970904 AND PROMOTE PLAY EVERYWHERE. KABOOM! BELIEVES THAT WHEN KIDS PLAY, WE ALL WIN. THE WELL-BEING OF OUR COMMUNITIES STARTS WITH THE WELL-BEING OF OUR KIDS - AND PLAY IS CRITICAL TO THEIR ABILITY TO SUCCEED. Other: PART III, LINE 4A: FACILITATING THE CREATION OF COMMUNITY-BUILT PLAYSPACES: KABOOM! COORDINATES ALL-VOLUNTEER, DONE-IN-A-DAY PLAYGROUND BUILDS THAT SEEK TO UNITE COMMUNITIES AROUND A COMMON CAUSE: THE HEALTH AND WELL-BEING OF THEIR KIDS. KABOOM!'S MODEL ENCOURAGES COMMUNITIES TO COME TOGETHER TO BUILD A PLAYGROUND AND TO STAY TOGETHER TO USE AND TAKE CARE OF IT, SO THAT THE SPACE THEY CREATE BECOMES A VALUED KID- AND FAMILY-FRIENDLY GATHERING PLACE, AND THE COMMUNITY FEELS INCREASED OWNERSHIP AND PRIDE IN THEIR NEIGHBORHOOD. IN 2018, KABOOM! CREATED 266 PLAYSPACES, WHICH SERVE AN ESTIMATED 629,000 KIDS. THESE PROJECTS ENGAGED APPROXIMATELY 29,400 VOLUNTEERS IN NEARLY EVERY U.S. STATE, THE DISTRICT OF COLUMBIA, CANADA AND MEXICO. CONTINUING THE RECOVERY EFFORTS FOLLOWING HURRICANE HARVEY, KABOOM! PARTNERED WITH THE REBUILD TEXAS FUND TO LEAD 10 COMMUNITY-DESIGNED PLAYGROUND PROJECTS, AND AWARD 13 CREATIVE PLAY PRODUCTS - IMAGINATION PLAYGROUND AND RIGAMJIG - TO ORGANIZATIONS ACROSS 41 COUNTIES IN SOUTHEAST TEXAS, PROVIDING NEW OPPORTUNITIES TO PLAY FOR MORE THAN 87,500 KIDS OVER THE NEXT GENERATION. THE UNIQUE MODEL PAIRS FUNDING PARTNERS WITH UNDER-RESOURCED COMMUNITIES WHO COME TOGETHER TO BUILD PLAYGROUNDS - IN JUST ONE DAY. KABOOM! BELIEVES ITS COMMUNITY-BUILT PLAYGROUNDS RESULT IN KIDS FEELING VALUED AND GENERATE A TANGIBLE, ACHIEVABLE WIN FOR COMMUNITIES THAT ARE TYPICALLY AREAS WITH SIGNIFICANT NEED. Other: PART III, LINE 4B: DRIVING INNOVATION IN PLAYSPACE DESIGN: KABOOM! ENABLES COMMUNITIES TO DESIGN, BUILD, USE AND MAINTAIN GREAT PLAYSPACES. KABOOM! BELIEVES THIS PROCESS RESULTS IN AN INCREASED SENSE OF COMMUNITY OWNERSHIP OF THEIR NEIGHBORHOOD AND INCREASED SKILLS, CONFIDENCE AND COURAGE TO DO EVEN MORE FOR ITS KIDS. IN 2018, KABOOM! LAUNCHED NEW OFFERINGS THAT ADDRESS THE GROWING NEED FOR NEW AND DIVERSE PLAY OPTIONS FOR OLDER KIDS. AS KIDS GROW UP, MANY EXPERIENCE CHALLENGES

Page 2 Schedule O (Form 990 or 990-EZ) (2018) Name of the organization **Employer identification number** KaBOOM!, INC. 52-1970904 THAT MAKE IT DIFFICULT TO GATHER, GET MENTAL AND PHYSICAL ACTIVITY AND JUST BE KIDS. KABOOM! SPORTS COURTS AND ADVENTURE COURSES ARE HELPING TO FILL THAT GAP FOR OLDER KIDS BY PROVIDING SPECIAL PLACES TO PLAY WHERE THEY FEEL THEY BELONG, AND CAN ENJOY BEING ACTIVE WITH PEERS AND ENGAGE WITH THEIR COMMUNITY IN A MEANINGFUL WAY. SPORTS COURTS TRANSFORM AN OPEN CONCRETE AREA INTO A VIBRANT SPACE FOR KIDS TO PLAY A RANGE OF SPORTS AND ACTIVITIES, FROM BASKETBALL TO SOCCER TO FOUR SQUARE. ADVENTURE COURSES OFFER AN OBSTACLE COURSE-TYPE OF RECREATION THAT ALLOW KIDS TO CHALLENGE THEMSELVES THROUGHOUT THE COURSE AND ENJOY FRIENDLY COMPETITION WITH THEIR PEERS. IN ADDITION TO FACILITATING THE CREATION OF COMMUNITY-INSPIRED, STATE-OF-THE-ART PLAYGROUNDS, KABOOM! INNOVATES TO BRING PLAY INTO PLACES WHERE A PLAYGROUND MAY NOT BE POSSIBLE. THROUGH CREATIVE PLAY PRODUCTS - IMAGINATION PLAYGROUND AND RIGAMAJIG - KABOOM! PROVIDES MOBILE PLAYGROUNDS THAT CAN BE MOVED FROM SITE TO SITE, BOTH INDOORS AND OUTDOORS. KABOOM! BELIEVES THESE MOBILE PLAYGROUNDS CAN IGNITE THE IMAGINATIONS AND CREATIVITY OF ALL KIDS. IMAGINATION PLAYGROUND IN A CART IS AN INNOVATIVE DESIGN IN PLAY EQUIPMENT THAT ENCOURAGES CREATIVITY, COMMUNICATION AND COLLABORATION IN PLAY. RIGAMAJIG IS A LARGE-SCALE BUILDING KIT DESIGNED FOR HAND-ON FREE PLAY AND LEARNING. IN 2018, KABOOM! PROVIDED 71 CREATIVE PLAY PRODUCTS TO LOCAL COMMUNITY ORGANIZATIONS, WHICH SERVED AN ESTIMATED 123,141 KIDS. III. HELPING CITIES MAKE PLAY THE EASY CHOICE FOR KIDS AND FAMILIES: KABOOM! IS THE ONLY NATIONAL ORGANIZATION FOCUSED ON CREATING PLAYSPACES - PLAYGROUNDS, MOBILE PLAYGROUNDS, PLAY EVERYWHERE IN EVERYDAY SPACES - PRIMARILY IN UNDER-RESOURCED COMMUNITIES. CITIES TURN TO KABOOM! FOR ADVICE, ASSISTANCE, IMPLEMENTATION AND THOUGHT LEADERSHIP TO TRANSFORM THEIR BUILT ENVIRONMENT - FROM PARKS, SCHOOLS AND PUBLIC HOUSING TO SIDEWALKS, BUS STOPS AND VACANT LOTS - IN WAYS THAT MAKE IT AS EASY AS POSSIBLE FOR ALL KIDS TO PLAY. THE PLAY EVERYWHERE CHALLENGE CONTINUES TO TRANSFORM EVERYDAY SPACES INTO PLACES THAT MAKE PLAY EASY AND ACCESSIBLE TO KIDS AND FAMILIES. LAST YEAR, KABOOM! PARTNERED WITH THE RALPH C. WILSON JR.

Page 2 Schedule O (Form 990 or 990-EZ) (2018) Name of the organization **Employer identification number** KaBOOM!, INC. 52-1970904 FOUNDATION ON THE BUILT TO PLAY INITIATIVE TO AWARD 23 PLAY EVERYWHERE CHALLENGE GRANTEES A TOTAL OF \$1 MILLION ACROSS WESTERN NEW YORK AND SOUTHEAST MICHIGAN TO CREATE LASTING, SCALABLE DESIGN INSTALLATIONS THAT WILL PROVIDE MORE OPPORTUNITIES TO PLAY FOR THE KIDS WHO NEED IT MOST. KABOOM! ALSO RELEASED THE PLAY EVERYWHERE PLAYBOOK, A GROUNDBREAKING, COMPREHENSIVE GUIDEBOOK FOR HELPING CITIES AND COMMUNITIES IMPROVE KIDS' LIVES THROUGH IMPLEMENTING PLAY EVERYWHERE PROJECTS. THE PLAYBOOK COMPILES BEST PRACTICES AND LESSONS LEARNED TO MAKE IT EASIER FOR COMMUNITIES TO CHAMPION, DESIGN AND BUILD KID FRIENDLY COMMUNITIES. IN 2018, KABOOM! FOCUSED ON FORGING PUBLIC-PRIVATE PARTNERSHIPS TO HELP ADDRESS THE SOCIOECONOMIC AND RACIAL INEQUITIES IN COMMUNITIES THAT DISPROPORTIONATELY IMPACT KIDS OF COLOR, LIMITING THEIR PLAY OPPORTUNITIES. IN THE CODY ROUGE NEIGHBORHOOD IN DETROIT, KABOOM! BROUGHT TOGETHER THE CITY OF DETROIT, THE RALPH C. WILSON JR. FOUNDATION, SKILLMAN FOUNDATION, GENERAL MOTORS, QUICKEN LOANS, DTE ENERGY, THE CODY ROUGE COMMUNITY ACTION ALLIANCE AND CODY ROUGE RESIDENTS TO CREATE A GREAT KID-DESIGNED, COMMUNITY-BUILT PLAYSPACE IN STEIN PARK. IN CHICAGO LAST YEAR, KABOOM!, ALONG WITH CHICAGO CRED (CREATING REAL ECONOMIC DESTINY), THE CHICAGO WHITE SOX AND THE CHICAGO PARKS DISTRICT WORKED TOGETHER TO PUT KIDS FIRST IN THE PULLMAN COMMUNITY AFTER ONE MAN, SHERMAN SCULLARK, WAS FED UP WITH THE GUN VIOLENCE AND LED A PEACE TRUCE BETWEEN NEIGHBORHOOD RIVALS TO CREATE A SAFER COMMUNITY. AFTER NEGOTIATING THE TRUCE, SHERMAN WAS ASKED WHAT THEY WANTED MOST IN THEIR COMMUNITY, AND HE SAID A PLAYGROUND, A SAFE PLACE FOR KIDS TO PLAY. PLAY CAN REDUCE THE EFFECTS OF STRESS THAT MANY KIDS ARE CHALLENGED BY AS A RESULT OF NEIGHBORHOOD TRAUMA. FOCUSING ON COMMUNITIES LIKE THE PULLMAN NEIGHBORHOOD IN CHICAGO HELPS TO PROVIDE SAFE PLACES TO PLAY FOR ALL KIDS AND ENCOURAGE COMMUNITY ENGAGEMENT. KABOOM! CONTINUED ITS WORK IN THOUGHT LEADERSHIP AROUND TOPICS SUCH AS DEVELOPING FAMILY-FRIENDLY CITIES, EQUITABLE COMMUNITIES AND DRIVING THE NATIONAL CONVERSATION AROUND PLAY. CEO JAMES SIEGAL PRESENTED TO KEY AUDIENCES AT CONFERENCES SUCH AS NACTO AND

Page 2 Schedule O (Form 990 or 990-EZ) (2018) Name of the organization **Employer identification number** KaBOOM!, INC. 52-1970904 ASPEN INSTITUTE'S PRESIDENTS' ROUNDTABLE. NATIONAL MEDIA OUTLETS, SUCH AS CNN.COM, CNN HLN, EBONY.COM, THE CHICAGO TRIBUNE AND OTHERS ALSO COVERED KABOOM!, ITS WORK AROUND DISASTER RECOVERY AND SUPPORT FOR CITIES TO MAKE PLAY THE EASY CHOICE FOR KIDS AND FAMILIES. KABOOM! ALSO PROVIDES ONLINE ACCESS TO ITS PLAYGROUND PLANNING MATERIALS FOR ANY NEIGHBORHOOD INTERESTED IN BUILDING A GREAT PLACE TO PLAY FOR LOCAL KIDS. WITH EASILY ACCESSIBLE MATERIALS THAT ANY COMMUNITY CAN ACCESS, KABOOM! ENCOURAGES A DO-IT-YOURSELF APPROACH WHILE STAFF CAN PROVIDE GUIDANCE IN THE PLANNING PROCESS. AS A RESULT, KABOOM!-INFLUENCED PLAYGROUNDS HAVE EXTENDED REACH - PROVIDING CITIES WITH EVEN MORE ACCESS. Pt VI, Line 11b: THE FORM 990 IS PREPARED BY THE ORGANIZATION'S INDEPENDENT AUDITORS AND IS REVIEWED BY THE MANAGEMENT TEAM, LEGAL COUNSEL, AND AUDIT COMMITTEE. THE FORM 990 IS APPROVED BY THE AUDIT COMMITTEE. ONCE APPROVED BY THE AUDIT COMMITTEE THE FORM 990 IS SENT TO THE BOARD OF DIRECTORS FOR REVIEW AND COMMENT AND IS APPROVED BY THE BOARD OF DIRECTORS BEFORE FILING. Pt VI, Line 12c: KABOOM!, INC. MAINTAINS A CONFLICT OF INTEREST POLICY, WHICH APPLIES TO EACH DIRECTOR AND OFFICER OF KABOOM!, THAT SEEKS TO PROTECT THE INTERESTS OF KABOOM! WHEN IT CONTEMPLATES ENTERING INTO A TRANSACTION OR ARRANGEMENT THAT MIGHT BENEFIT THE PRIVATE INTEREST OF AN OFFICER OR DIRECTOR OF KABOOM!. THE POLICY IS INTENDED TO SUPPLEMENT APPLICABLE STATE AND FEDERAL LAWS GOVERNING CONFLICTS OF INTEREST APPLICABLE TO NON-PROFIT AND CHARITABLE ORGANIZATIONS AND TO AID DIRECTORS AND OFFICERS OF KABOOM! IN PERFORMING THE DUTIES IMPOSED UPON THEM BY APPLICABLE LAW WITH RESPECT TO THEIR MANAGEMENT RESPONSIBILITIES AND FIDUCIARY OBLIGATIONS TO KABOOM!. THE CONFLICT OF INTEREST POLICY REQUIRES ANY DIRECTOR OR OFFICER, WHO HAS A DIRECT OR INDIRECT FINANCIAL INTEREST (DEFINED AS A GREATER THAN 5% OWNERSHIP INTEREST IN, OR COMPENSATION ARRANGEMENT WITH) OR AFFILIATE RELATIONSHIP WITH ANY PERSON OR ENTITY THAT IS INVOLVED IN AN ACTUAL

Page 2 Schedule O (Form 990 or 990-EZ) (2018) Name of the organization **Employer identification number** KaBOOM!, INC. 52-1970904 OR POTENTIAL TRANSACTION WITH KABOOM!, TO DISCLOSE THE EXISTENCE OF SUCH FINANCIAL INTEREST OR AFFILIATE RELATIONSHIP TO THE CHAIRPERSON OF THE BOARD OF DIRECTORS AND THE CHAIRPERSON OF THE GOVERNANCE AND NOMINATING COMMITTEE. IN ADDITION TO THE GENERAL DUTY TO DISCLOSE ACTUAL OR POTENTIAL CONFLICTS OF INTEREST, THE POLICY REQUIRES EACH DIRECTOR AND OFFICER TO COMPLETE AN ANNUAL DISCLOSURE STATEMENT THAT, AMONG OTHER THINGS, DISCLOSES ANY SUCH FINANCIAL INTEREST OR AFFILIATE RELATIONSHIP. FOLLOWING DISCLOSURE OF SUCH FINANCIAL INTEREST OR AFFILIATE RELATIONSHIP, THE POLICY PROVIDES FOR THE MATTER TO BE REFERRED TO THE BOARD OR THE GOVERNANCE AND NOMINATING COMMITTEE, WHICH THEN DETERMINES WHETHER SUCH INTEREST OR RELATIONSHIP CREATES A CONFLICT OF INTEREST IN RESPECT OF SUCH DIRECTOR OR OFFICER AND, IF SO, SUCH DIRECTOR OR OFFICER MAY PROVIDE INFORMATION OR INTERPRETATION WITH RESPECT TO SUCH MATTER BUT SHALL OTHERWISE REFRAIN FROM PARTICIPATING IN CONSIDERATION OF THE MATTER. Pt VI, Line 15a: KABOOM!, INC. MAINTAINS AN EXECUTIVE COMPENSATION POLICY WITH THE OBJECTIVE OF PROVIDING A REASONABLE AND COMPETITIVE EXECUTIVE TOTAL COMPENSATION OPPORTUNITY CONSISTENT WITH MARKET-BASED COMPENSATION PRACTICES FOR INDIVIDUALS POSSESSING THE EXPERIENCE AND SKILLS NEEDED TO MANAGE AND IMPROVE THE OVERALL PERFORMANCE OF THE ORGANIZATION. THE KABOOM! EXECUTIVE COMPENSATION PROGRAM IS DESIGNED TO, AMONG OTHER THINGS: 1) ENCOURAGE THE ATTRACTION AND RETENTION OF HIGH-CALIBER EXECUTIVES; 2) PROVIDE A COMPETITIVE TOTAL COMPENSATION PACKAGE, INCLUDING BENEFITS; 3) STRONGLY SUPPORT A PERFORMANCE DRIVEN CULTURE THROUGH THE USE OF INCENTIVES FOR KEY EMPLOYEES; 4) REINFORCE THE GOALS OF THE ORGANIZATION BY SUPPORTING TEAMWORK AND COLLABORATION; 5) ENSURE THAT PAY IS PERCEIVED TO BE FAIR AND EQUITABLE; 6) BE FLEXIBLE TO REWARD INDIVIDUAL ACCOMPLISHMENTS AS WELL AS ORGANIZATIONAL SUCCESS; AND 7) BALANCE THE NEED TO BE COMPETITIVE WITHIN THE LIMITS OF AVAILABLE FINANCIAL RESOURCES. THE KABOOM! EXECUTIVE COMPENSATION

Page 2 Schedule O (Form 990 or 990-EZ) (2018) Name of the organization **Employer identification number** KaBOOM!, INC. 52-1970904 PROGRAM IS ADMINISTERED BY THE EXECUTIVE COMMITTEE OF THE BOARD. THE EXECUTIVE COMMITTEE IS RESPONSIBLE FOR ESTABLISHING AND MAINTAINING A COMPETITIVE COMPENSATION PROGRAM FOR ALL SENIOR EXECUTIVES OF THE ORGANIZATION. TO EVALUATE AND BENCHMARK THE ORGANIZATION'S EXECUTIVE COMPENSATION PROGRAM AGAINST THE COMPETITIVE MARKET AN INDEPENDENT CONSULTING FIRM CONDUCTS A BI-ANNUAL REVIEW INTENDED TO ENSURE THAT THE COMPENSATION PROGRAM FALLS WITHIN A REASONABLE RANGE OF COMPETITIVE PRACTICES FOR COMPARABLE POSITIONS AMONG SIMILARLY SITUATED ORGANIZATIONS. THE FINDINGS ARE REVIEWED BY THE BOARD, WHICH MEETS AS NEEDED TO REVIEW THE COMPENSATION PROGRAM AND MAKE ANY CHANGES, AS APPROPRIATE. THE EXECUTIVE COMMITTEE REVIEWS ANNUALLY AND SUBMITS FOR BOARD APPROVAL ITS RECOMMENDATIONS REGARDING THE BASE SALARY ADJUSTMENTS AND ANNUAL INCENTIVE PAYMENTS, AS WELL AS OBJECTIVES AND GOALS FOR THE UPCOMING YEAR'S ANNUAL PERFORMANCE APPRAISAL AND INCENTIVE PLAN FOR THE CEO. THE CEO DETERMINES THE COMPENSATION AND INCENTIVE AWARDS FOR THE OTHER EXECUTIVE OFFICERS. AFTER THE COMPLETION OF THE ANNUAL AUDIT, THE EXECUTIVE COMMITTEE REVIEWS, APPROVES AND REPORTS TO THE BOARD ITS ASSESSMENT OF THE CEO'S ACTUAL PERFORMANCE MEASURED AGAINST BOARD APPROVED GOALS AND OBJECTIVES. AT SUCH TIME THE FINANCE COMMITTEE ALSO REVIEWS AND RECOMMENDS AND SUBMITS FOR BOARD APPROVAL THE INCENTIVE PAYMENTS FOR ALL OTHER OFFICERS AND STAFF AS MEASURED AGAINST THE BOARD-APPROVED IN ADDITION, THE BOARD HAS ADOPTED AN EXECUTIVE COMPENSATION CLAWBACK POLICY, PURSUANT TO WHICH KABOOM!, SUBJECT TO THE FULL AND FINAL AUTHORITY OF THE BOARD TO MAKE ALL DETERMINATIONS REQUIRED THEREUNDER, SHALL SEEK REIMBURSEMENT OF PERFORMANCE-BASED AND/OR DISCRETIONARY COMPENSATION PAID TO AN EXECUTIVE OFFICER OF KABOOM! IF THE BOARD DETERMINES THAT THE AMOUNT OF ANY SUCH PERFORMANCE-BASED AND/OR DISCRETIONARY COMPENSATION ACTUALLY PAID OR AWARDED TO A CURRENT OR FORMER EXECUTIVE OFFICER DURING THE ONE-YEAR PERIOD PRECEDING THE DATE ON WHICH KABOOM! IS REQUIRED TO PREPARE SUCH RESTATEMENT WOULD HAVE BEEN A LOWER AMOUNT HAD IT BEEN CALCULATED BASED ON SUCH RESTATED FINANCIAL STATEMENTS OR SUCH EXECUTIVE

Schedule O (Form 990 or 990-EZ) (2018) Page 2 Name of the organization **Employer identification number** KaBOOM!, INC. 52-1970904 OFFICER ENGAGED IN FRAUD OR INTENTIONAL MISCONDUCT THAT CONTRIBUTED TO THE NEED FOR SUCH RESTATEMENT OR RESULTED IN ERRONEOUS CALCULATIONS OF PERFORMANCE-BASED AND/OR DISCRETIONARY COMPENSATION. Pt VI, Line 15b: SEE LINE 15A NARRATIVE ABOVE. Pt VI, Line 19: KaBOOM!, INC. INCLUDES ON ITS WEBSITE COPIES OF ITS AUDITED FINANCIAL STATEMENTS AND ITS FORM 990 FOR THE PAST FIVE YEARS. THE CONFLICT OF INTEREST POLICY IS AVAILABLE UPON REQUEST. Other: IN 2009, KABOOM!, INC. AND PLAYGROUND INITIATIVE, INC., A 501(C)(3) ORGANIZATION AFFILIATED WITH ROCKWELL ARCHITECTURE, PLANNING AND DESIGN, P.C., FORMED IMAGINATION PLAYGROUND, LLC AS A JOINT VENTURE FOCUSED ON THE DESIGN, DEVELOPMENT, PRODUCTION, MANUFACTURING, MARKETING, DISTRIBUTION, SALE AND INSTALLATION OF PLAY SPACES AND RELATED PLAY EQUIPMENT ASSOCIATED WITH THE IMAGINATION PLAYGROUND CONCEPT, WHICH WAS CONCEIVED AND DESIGNED BY ARCHITECT DAVID ROCKWELL TO ENCOURAGE CHILD-DIRECTED, IN 2018, MHSCO HOLDINGS, LLC, AN AFFILIATE OF THE M.H. STALLMAN COMPANY, A MANUFACTURER OF CERTAIN IMAGINATION PLAYGROUND PLAY EQUIPMENT, ACQUIRED ALL OF THE INTERESTS IN IMAGINATION PLAYGROUND, LLC OWNED BY AN AFFILIATE OF MR. ROCKWELL. ACCORDINGLY, MHSCO HOLDINGS, LLC IS THE SUCCESSOR TO SUCH AFFILIATE OF MR. ROCKWELL IN THE JOINT VENTURE WITH KABOOM!. THE JOINT VENTURE IS MANAGED BY A SEPARATE BOARD CONSISTING OF THE CHIEF EXECUTIVE OFFICER OF THE JOINT VENTURE AND TWO DESIGNEES APPOINTED BY EACH OF KABOOM! AND MHSCO HOLDINGS, LLC. IN ADDITION, THE JOINT VENTURE IS A VENDOR TO KABOOM!, WHICH FROM TIME TO TIME MAY PURCHASE IMAGINATION PLAYGROUND PRODUCTS FROM THE JOINT VENTURE ON BEHALF OF CERTAIN COMMUNITIES THAT MAY RECEIVE SUCH PRODUCTS IN CONNECTION WITH KABOOM!-LED PLAYGROUND BUILDS OR KABOOM!-ADMINISTERED GRANT PROGRAMS.

Schedule O (Form 990 or 990-EZ) (2018) Page 2 Name of the organization Employer identification number KaBOOM!, INC. 52-1970904 Other: PART I LINE 16B AND PART III LINES 4A AND 4B: KABOOM!, INC. INCURS BUSINESS DEVELOPMENT COSTS RELATED TO CONTRACTED SERVICE REVENUE AS WELL AS TO GRANTS AND CONTRIBUTIONS RECEIVED. THE DEVELOPMENT COSTS RELATED TO CONTRACT SERVICES PERTAINING TO FACILITATING THE CREATION OF COMMUNITY BUILT PLAY SPACES UNDER UNDER LINE 4A OF PART III WERE \$1,105,065. THE DEVELOPMENT COSTS PERTAINING TO DRIVING INNOVATION IN PLAY SPACE DESIGN AND HELPING CITIES MAKE PLAY THE EASY CHOICE FOR KIDS AND FAMILIES UNDER LINE 4B OF PART III WERE \$77,708. THE DEVELOPMENT COSTS PERTAINING TO FUNDRAISING FOR GRANTS AND CONTRIBUTIONS UNDER LINE 16B OF PART I PERTAINING TO THE REVENUES REPORTED ON LINE 8 OF PART I - CONTRIBUTIONS AND GRANTS WERE \$1,025,230. Pt VI, Section C, Line 17: State: AR State: CA State: FL State: GA State: HI State: IL State: KS State: KY State: MD State: MA State: MI State: MN State: MS State: NV State: NH

Schedule O (Form 990 or 990-EZ) (2018)	Page <b>2</b>
Name of the organization	Employer identification number
KaBOOM!, INC.	52-1970904
State: NJ	
State: NM	
State: NY	
State: NC	
State: OR	
State: PA	
State: RI	
State: SC	
State: TN	
State: UT	
State: VA	
State: WV	
State: WI	
Pt IX, Line 24e:	
Description: DUES & SUBSCRIPTIONS	
Total: \$103,335	
Program services: \$58,741	
Management and general: \$32,314	
Fundraising: \$12,280	
Description: EQUIPMENT RENTAL AND REPAIRS	
Total: \$25,567	
Program services: \$17,917	
Management and general: \$6,242	
Fundraising: \$1,408	
Description: BAD DEBT EXPENSE	
Total: \$50,000	
Program services: \$0	

Schedule O (Form 990 or 990-EZ) (2018)	Page <b>2</b>
Name of the organization	Employer identification number
KaBOOM!, INC.	52-1970904
·	<u> </u>
Management and general: \$0	
Fundraising: \$50,000	

#### SCHEDULE R (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

**Related Organizations and Unrelated Partnerships** 

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

► Attach to Form 990.

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

OMB No. 1545-0047

2018

Open to Public Inspection

**Employer identification number** 

KaBOOM!, INC.						52-19	970904	
Part I Identification of Disregarded Entities.	Complete if the o	rganization	answered "Yes	s" on Form 990, Pa	art IV, line 33.			
(a) Name, address, and EIN (if applicable) of disregarded	entity	Prim	(b) (c) Primary activity Legal domicile (state or foreign country)		(d) Total income	(e) End-of-year assets	(f) Direct cor enti	ntrolling
(1) KaBOOM! PLAY INITIATIVES, LLC 46-51 4301 CONN. AVE. NW ML-1 WASHINGTON DC	PLAY PRODUCTS		DE	425,700.	2,261,611.	KABOOM!	, INC.	
(2)		-						
(3)		-						
(4)		-						
(5)								
(6)								
Part II Identification of Related Tax-Exempt one or more related tax-exempt organization	Organizations. Cations during the	omplete if tax year.	he organizatior	n answered "Yes"	on Form 990, Pa	art IV, line 34, be	cause it h	nad
(a) Name, address, and EIN of related organization		<b>(b)</b> ary activity	(c) Legal domicile (st or foreign countr	(d) ate Exempt Code section	(e)	tus Direct controlli	(g)	
<u>(1)</u>							Yes	No
(2)								
(3)								
(4)								
(5)								
(6)								

Schedule R (Form 990) 2018

Par	t III Identification of because it had on	<b>Related Organiz</b> le or more relate	z <b>ations Taxabl</b> e d organizations	e as a Partner treated as a pa	<b>ship.</b> C artnersl	omplete if nip during	the organ the tax ye	ization ans ar.	swered	d "Ye	es" o	n Form 990	, Part	IV, lin	e 34,	
	(a) Name, address, and EIN of related organization	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	incon un excli ta	(e) dominant ne (related, related, uded from x under s 512—514)	(f) Share of tota income	(g) Share of e year as:	nd-of-	(r Dispropo alloca	ortionate	(i) Code V-UE amount in box of Schedule K (Form 1065)	20 ma	(j) eneral or anaging artner?	r Perc	(k) centage nership
(4)					-					Yes	No		Ye	s No	)	
(2)																
(3)																
(4)																
(5)																
(6)																
(7)																
Par	Identification of line 34, because it	⊥ <b>Related Organiz</b> t had one or mor	zations Taxable re related organ	□ e as a Corpora izations treated	ation o	r <b>Trust.</b> Co corporation	omplete if	 the organiz luring the t	zation ax vea	ans ar.	were	d "Yes" on	Form 9	990, F	Part I	٧,
	(a) Name, address, and EIN of relate		(b) Primary activity	y Legal do	(c) Legal domicile (state or foreign country)		olling (C corp, S corp, or trust)		( Share	(f) Share of total			(h) Percent owners		(i) Section 512(b)( controlled entity?	
/4\														,	Yes	No
(2)																
(3)																
(4)																
(5)																
(6)																

Schedule R (Form 990) 2018

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

Not	e: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.				Y	es l	No
1	During the tax year, did the organization engage in any of the following transactions with one or more	e related organi	izations listed in Parts	II–IV?			
а	Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity			[	1a		
b	Gift, grant, or capital contribution to related organization(s)				1b		
С	Gift, grant, or capital contribution from related organization(s)				1c		
d	Loans or loan guarantees to or for related organization(s)				1d		
е				_	1e		
	3						
f	Dividends from related organization(s)				1f		
g	Sale of assets to related organization(s)				1g		
h	Purchase of assets from related organization(s)			_	1h		
i	Exchange of assets with related organization(s)			<u> </u>	1i		
i	Lease of facilities, equipment, or other assets to related organization(s)				1i		
,	Location of Identificor, equipment, or enter according to related organization (6)				•,		
k	Lease of facilities, equipment, or other assets from related organization(s)				1k		
ı	Performance of services or membership or fundraising solicitations for related organization(s)			<del>-</del>	11		
ı m	Performance of services or membership or fundraising solicitations by related organization(s)				1m		
	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)				1n		
n				_	10		
0	Sharing of paid employees with related organization(s)				10		
_	Daimburgament noid to related executation(a) for expanses				4		
p	Reimbursement paid to related organization(s) for expenses			_	1p	-	
q	Reimbursement paid by related organization(s) for expenses				1q		
_	Other transfer of each or present to related execution(a)				4		
S	Other transfer of cash or property to related organization(s)				1r		
					1s	l I -I -	
2	If the answer to any of the above is "Yes," see the instructions for information on who must complete	,		•	1 thres	noias	<b>3.</b>
		(b) Fransaction Type (a-s)	(c) Amount involved	(d) Method of determining a	amount	involve	:d
(1)							
(2)							
(3)							
(4)							
(5)							
(6)							

Schedule R (Form 990) 2018

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

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

(a) Name, address, and EIN of entity	(b) Primary activity Primary activity (cc) Legal domicile (state or foreign country)	Legal domicile (state or foreign	gn income (related, unrelated, excluded from tax under	ed 501(c)(3) organizations?		total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
		sections 512-514	Yes	No	Yes			No	1	Yes	No		
(1)													
2)													
3)													
4)													
5)													
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Schedule R (Form 990) 2018 Page **5** 

Part VII  Supplemental Information. Provide additional information for responses to questions on Schedule R. See instructions.
PART 1: KABOOM! PLAY INITIATIVES, LLC ("KPI"), A WHOLLY OWNED SUBSIDIARY OF
KABOOM!, INC., IS A DELAWARE LIMITED LIABILITY COMPANY THAT WAS FORMED IN 2013
TO PURSUE CERTAIN PLAY INITIATIVES IN FURTHERANCE OF KABOOM!'S MISSION. AMONG
OTHER THINGS, KPI UNDERTAKES ACTIVITIES DESIGNED TO CONNECT SELLERS AND BUYERS
OF INNOVATIVE PLAY OR PLAY-RELATED PRODUCTS. WHILE KPI DOES NOT OWN OR SELL
SUCH PRODUCTS, IT DOES PROVIDE CERTAIN PAYMENT PROCESSING SERVICES AND MANAGES
ORDER FULFILLMENT FOR SUCH PRODUCTS (AMONG OTHER ANCILLARY SERVICES PROVIDED
BY KPI IN CONNECTION WITH SUCH ACTIVITIES). SELLERS COMPLETING SALES IN CONNECTION
WITH SUCH ACTIVITIES CONTRIBUTE TO KPI A PORTION OF THE SALES PRICE PAID FOR
EACH PRODUCT AS AN DONATION WITHOUT RESTRICTION TO SUPPORT KABOOM!'S MISSION.