

Return of Organization Exempt From Income Tax
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

2013

Department of the Treasury
Internal Revenue Service

Do not enter Social Security numbers on this form as it may be made public.

Information about Form 990 and its instructions is at www.irs.gov/form990

Open to Public Inspection

A For the 2013 calendar year, or tax year beginning and ending

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization KAKENYA CENTER FOR EXCELLENCE		D Employer identification number 26-3658409
	Doing Business As		E Telephone number 202-912-2903
	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	G Gross receipts \$ 349,826.
	2100 PENNSYLVANIA AVENUE, NW	525	
City or town, state or province, country, and ZIP or foreign postal code WASHINGTON, DC 20037		H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
F Name and address of principal officer: DR. KAKENYA NTAIYA SAME AS C ABOVE		H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No	
I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		H(c) Group exemption number ▶	
J Website: ▶ WWW.KAKENYASDREAM.ORG		L Year of formation: 2008 M State of legal domicile: DC	
K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶			

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: SEE SCHEDULE O		
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3 Number of voting members of the governing body (Part VI, line 1a)	3	12
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	11
	5 Total number of individuals employed in calendar year 2013 (Part V, line 2a)	5	2
	6 Total number of volunteers (estimate if necessary)	6	2
	7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.
	b Net unrelated business taxable income from Form 990-T, line 34	7b	0.
Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year 151,862.	Current Year 335,959.
	9 Program service revenue (Part VIII, line 2g)	0.	0.
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	0.	0.
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	0.	13,867.
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	151,862.	349,826.
	Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	0.
14 Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.
15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		99,185.	140,206.
16a Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.
b Total fundraising expenses (Part IX, column (D), line 25) ▶ 39,749.			
17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		55,460.	86,947.
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	154,645.	227,153.	
19 Revenue less expenses. Subtract line 18 from line 12	-2,783.	122,673.	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Current Year 298,569.	End of Year 422,124.
	21 Total liabilities (Part X, line 26)	0.	882.
	22 Net assets or fund balances. Subtract line 21 from line 20	298,569.	421,242.

Part II Signature Block

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

Sign Here	Signature of officer		Date
	DR. KAKENYA NTAIYA, PRESIDENT AND FOUNDER		
Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date
	KATHLEEN M. FLAHERTY		
	Firm's name ▶ MATTHEWS, CARTER & BOYCE	Firm's EIN ▶ 54-1487262	Check if self-employed <input type="checkbox"/>
	Firm's address ▶ 12500 FAIR LAKES CIRCLE, SUITE 260 FAIRFAX, VA 22033	Phone no. 703-218-3600	PTIN P00969957

May the IRS discuss this return with the preparer shown above? (see instructions) Yes No

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response or note to any line in this Part III [X]

1 Briefly describe the organization's mission: SEE SCHEDULE 0

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? [] Yes [X] No

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? [] Yes [X] No

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.

4a (Code:) (Expenses \$ 60,348. including grants of \$) (Revenue \$) STUDENT LIFE: KAKENYA CENTER FOR EXCELLENCE IS COMMITTED TO PROVIDING OUR STUDENTS WITH ALL THE RESOURCES THEY NEED TO EXCEL ACADEMICALLY, PHYSICALLY AND IN LIFE GENERALLY. WE PROVIDE THE GIRLS WITH ALL THEIR SCHOOL NEEDS, INCLUDING CLOTHING, NUTRITIOUS MEALS, AND UP-TO-DATE LEARNING MATERIALS. CLOTHING INCLUDES TWO COMPLETE UNIFORM SETS, ATHLETIC GEAR, AND SHOES. MEALS INCLUDE A WELL-BALANCED DIET THAT ALL GIRLS NEED TO GROW HEALTHILY, WITH FRUITS, VEGETABLES, MEAT, AND MILK. ACADEMICALLY, WE PROVIDE THE STUDENTS WITH WELL TRAINED TEACHERS, AFTER-SCHOOL AND WEEKEND ENRICHMENT PROGRAMS, TEXTBOOKS, AND ALL OTHER LEARNING MATERIALS NEEDED TO RUN THE SCHOOL EFFICIENTLY. THE DORMITORY ALLOWS GIRLS TO BOARD AT THE SCHOOL RATHER THAN FACE THE DAILY DANGERS OF WALKING LONG DISTANCES TO AND FROM THEIR HOMES.

4b (Code:) (Expenses \$ 56,482. including grants of \$) (Revenue \$) HEALTH AND LEADERSHIP TRAINING PROGRAM: KAKENYA CENTER FOR EXCELLENCE IS COMMITTED TO PROVIDING RESOURCES NOT ONLY TO ITS STUDENTS BUT TO GIRLS IN THE SURROUNDING COMMUNITY, AS WELL. THIS IS THE RATIONALE BEHIND OUR HEALTH AND LEADERSHIP TRAINING PROGRAM. THIS PROGRAM FOSTERS AN INCLUSIVE RELATIONSHIP BETWEEN KCE STUDENTS AND GIRLS IN THE REGION ATTENDING OTHER SCHOOLS. TWICE EACH YEAR KCE HOSTS WEEK-LONG CAMPS TO INCREASE GIRLS' KNOWLEDGE ABOUT HEALTH RELATED ISSUES SUCH AS FEMALE GENITAL MUTILATION AND EFFECTS OF EARLY MARRIAGE AND LEADERSHIP-RELATED SKILLS SUCH AS COMMUNICATION AND ASSERTIVENESS. GIRLS ARE ALSO TAUGHT ABOUT THEIR RIGHTS ACCORDING THE KENYAN LAW AND WHAT TO DO WHEN THOSE RIGHTS

4c (Code:) (Expenses \$ 55,685. including grants of \$) (Revenue \$) KCE'S NEWEST PROGRAM WAS DEVELOPED AS A WAY TO CONTINUE TO SUPPORT OUR GRADUATES AS THEY TRANSITION FROM PRIMARY EDUCATION AT OUR BOARDING SCHOOL TO SECONDARY EDUCATION AT SCHOOLS AROUND THE COUNTRY. THE NETWORK FOR EXCELLENCE PROGRAM PROVIDES ONGOING COMMUNICATION AMONG THE GIRLS AT DIFFERENT SCHOOLS AND WITH OUR KCE STAFF. IT INCLUDES TRAININGS AT OUR CAMPUS DURING ACADEMIC HOLIDAYS, MENTORSHIP, AND LEADERSHIP OPPORTUNITIES FOR HIGH SCHOOL KCE ALUMNAE. IT ALSO PROVIDES THE STUDENTS WITH THE FINANCIAL SUPPORT THEY NEED TO AFFORD THE FEES ASSOCIATED WITH SECONDARY SCHOOL.

4d Other program services (Describe in Schedule O.) (Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses 172,515.

Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i>	<input checked="" type="checkbox"/>	
2 Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> ?	<input checked="" type="checkbox"/>	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>		<input checked="" type="checkbox"/>
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? <i>If "Yes," complete Schedule C, Part II</i>		<input checked="" type="checkbox"/>
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? <i>If "Yes," complete Schedule C, Part III</i>		<input checked="" type="checkbox"/>
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? <i>If "Yes," complete Schedule D, Part I</i>		<input checked="" type="checkbox"/>
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 "Yes," complete Schedule D, Part II</i>		<input checked="" type="checkbox"/>
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>		<input checked="" type="checkbox"/>
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>		<input checked="" type="checkbox"/>
10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>		<input checked="" type="checkbox"/>
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI</i>	<input checked="" type="checkbox"/>	
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? <i>If "Yes," complete Schedule D, Part VII</i>		<input checked="" type="checkbox"/>
c 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? <i>If "Yes," complete Schedule D, Part VIII</i>		<input checked="" type="checkbox"/>
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? <i>If "Yes," complete Schedule D, Part IX</i>		<input checked="" type="checkbox"/>
e Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>		<input checked="" type="checkbox"/>
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>		<input checked="" type="checkbox"/>
12a Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i>		<input checked="" type="checkbox"/>
b Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional</i>		<input checked="" type="checkbox"/>
13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>	<input checked="" type="checkbox"/>	
14a Did the organization maintain an office, employees, or agents outside of the United States?	<input checked="" type="checkbox"/>	
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? <i>If "Yes," complete Schedule F, Parts I and IV</i>	<input checked="" type="checkbox"/>	
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? <i>If "Yes," complete Schedule F, Parts II and IV</i>		<input checked="" type="checkbox"/>
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>		<input checked="" type="checkbox"/>
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? <i>If "Yes," complete Schedule G, Part I</i>		<input checked="" type="checkbox"/>
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 "Yes," complete Schedule G, Part II</i>		<input checked="" type="checkbox"/>
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>		<input checked="" type="checkbox"/>
20a Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>		<input checked="" type="checkbox"/>
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		

Part IV Checklist of Required Schedules (continued)

	Yes	No
21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>		X
22 Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>		X
23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>		X
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? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>		X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
25a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>		X
b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>		X
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 so, complete Schedule L, Part II		X
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>		X
28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):		
a A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		X
b A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		X
c 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>		X
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>		X
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>		X
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>		X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>		X
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>		X
34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>		X
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?		X
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)? <i>If "Yes," complete Schedule R, Part V, line 2</i>		
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>		X
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>		X
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	X	

Note. All Form 990 filers are required to complete Schedule O

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

Main form area containing questions 1a through 14b with corresponding Yes/No columns and input fields.

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

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

Section A. Governing Body and Management

		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 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.		
	12		
b	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 any other officer, director, trustee, or key employee?		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person?		X
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?		X
6	Did the organization have members or stockholders?		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a	The governing body?	X	
b	Each committee with authority to act on behalf of the governing body?		X
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O		X

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?		X
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?		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	X	
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	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	X	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	X	
13	Did the organization have a written whistleblower policy?	X	
14	Did the organization have a written document retention and destruction policy?	X	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
a	The organization's CEO, Executive Director, or top management official	X	
b	Other officers or key employees of the organization	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 with a taxable entity during the year?		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?		

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed **NONE**

18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
 Own website Another's website Upon request Other (explain in Schedule O)

19 Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.

20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization: **THE ORGANIZATION - 202-912-2903**
2100 PENNSYLVANIA AVENUE, NW, NO. 525, WASHINGTON, DC 20037

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

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

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

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

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

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

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) KATHY BONK DIRECTOR	1.00	X					0.	0.	0.	
(2) SARAH CRAVEN DIRECTOR	2.00	X					0.	0.	0.	
(3) AMANDA DEEVER VICE CHAIR	2.00	X		X			0.	0.	0.	
(4) MARLENE JOHNSON DIRECTOR	1.00	X					0.	0.	0.	
(5) JUDITH FISKE MOAK DIRECTOR	2.00	X					0.	0.	0.	
(6) VICTORIA SANT DIRECTOR	1.00	X					0.	0.	0.	
(7) ANNETTE SCARPITTA DIRECTOR	1.00	X					0.	0.	0.	
(8) LEE CRANE WOOD CHAIR	3.00	X		X			0.	0.	0.	
(9) KAKENYA NTAIYA FOUNDER AND PRESIDENT	40.00	X		X			60,000.	0.	0.	
(10) A. LESTER BURKE DIRECTOR	1.00	X					0.	0.	0.	
(11) BETTY HUDSON DIRECTOR	2.00	X					0.	0.	0.	
(12) ELIZABETH A. TYSON DIRECTOR	2.00	X					0.	0.	0.	

Part VIII Statement of Revenue

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

			(A)	(B)	(C)	(D)	
			Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512 - 514	
Contributions, Gifts, Grants and Other Similar Amounts	1 a	Federated campaigns	36,721.				
	b	Membership dues					
	c	Fundraising events					
	d	Related organizations					
	e	Government grants (contributions)					
	f	All other contributions, gifts, grants, and similar amounts not included above	299,238.				
	g	Noncash contributions included in lines 1a-1f: \$					
	h	Total. Add lines 1a-1f		335,959.			
	Program Service Revenue	2 a	Business Code				
b							
c							
d							
e							
f		All other program service revenue					
g		Total. Add lines 2a-2f					
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts)					
	4	Income from investment of tax-exempt bond proceeds					
	5	Royalties					
	6 a	Gross rents	(i) Real				
			(ii) Personal				
			b	Less: rental expenses			
			c	Rental income or (loss)			
	d	Net rental income or (loss)					
	7 a	Gross amount from sales of assets other than inventory	(i) Securities				
			(ii) Other				
			b	Less: cost or other basis and sales expenses			
			c	Gain or (loss)			
	d	Net gain or (loss)					
	8 a	Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18	a				
			b	Less: direct expenses			
c			Net income or (loss) from fundraising events				
9 a	Gross income from gaming activities. See Part IV, line 19	a					
		b	Less: direct expenses				
		c	Net income or (loss) from gaming activities				
10 a	Gross sales of inventory, less returns and allowances	a					
		b	Less: cost of goods sold				
		c	Net income or (loss) from sales of inventory				
Miscellaneous Revenue		Business Code					
11 a	MISCELLANEOUS	900099	13,867.	13,867.			
b							
c							
d	All other revenue						
e	Total. Add lines 11a-11d		13,867.				
12	Total revenue. See instructions.		349,826.	13,867.	0.		

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the United States. See Part IV, line 21				
2 Grants and other assistance to individuals in the United States. See Part IV, line 22				
3 Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	60,000.	51,300.	5,700.	3,000.
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	62,893.	37,918.		24,975.
7 Other salaries and wages				
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9 Other employee benefits				
10 Payroll taxes	17,313.	14,802.	1,645.	866.
11 Fees for services (non-employees):				
a Management				
b Legal				
c Accounting				
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch O.)	9,437.	1,015.	397.	8,025.
12 Advertising and promotion				
13 Office expenses	937.	574.	64.	299.
14 Information technology				
15 Royalties				
16 Occupancy	52.	42.	5.	5.
17 Travel	5,250.	4,200.	525.	525.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	2,980.	2,308.	284.	388.
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	12,163.	9,731.	1,216.	1,216.
23 Insurance				
24 Other expenses. Itemize expenses not covered 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.)				
a STUDENT EXPENSES	17,828.	17,828.		
b CAMP AND OTHER PROGRAM	15,852.	15,852.		
c OTHER SCHOOL EXPENSES	15,055.	15,055.		
d MISCELLANEOUS	5,503.		5,053.	450.
e All other expenses	1,890.	1,890.		
25 Total functional expenses. Add lines 1 through 24e	227,153.	172,515.	14,889.	39,749.
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.				

Check here if following SOP 98-2 (ASC 958-720)

Part X Balance Sheet

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

		(A) Beginning of year		(B) End of year	
Assets	1 Cash - non-interest-bearing	146,734.	1	246,938.	
	2 Savings and temporary cash investments		2		
	3 Pledges and grants receivable, net		3		
	4 Accounts receivable, net	1,354.	4	1,354.	
	5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5		
	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 and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instr). Complete Part II of Sch L		6		
	7 Notes and loans receivable, net		7		
	8 Inventories for sale or use		8		
	9 Prepaid expenses and deferred charges	1,003.	9	0.	
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 176,952.			
	b Less: accumulated depreciation	10b 13,805.	149,478.	10c	163,147.
	11 Investments - publicly traded securities		11		
	12 Investments - other securities. See Part IV, line 11		12		
	13 Investments - program-related. See Part IV, line 11		13		
	14 Intangible assets		14		
	15 Other assets. See Part IV, line 11		15	10,685.	
16 Total assets. Add lines 1 through 15 (must equal line 34)		298,569.	16	422,124.	
Liabilities	17 Accounts payable and accrued expenses	0.	17	882.	
	18 Grants payable		18		
	19 Deferred revenue		19		
	20 Tax-exempt bond liabilities		20		
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21		
	22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22		
	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 third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D		25		
	26 Total liabilities. Add lines 17 through 25		0.	26	882.
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.				
	27 Unrestricted net assets	298,569.	27	421,242.	
	28 Temporarily restricted net assets		28		
	29 Permanently restricted net assets		29		
	Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.				
	30 Capital stock or trust principal, or current funds		30		
	31 Paid-in or capital surplus, or land, building, or equipment fund		31		
	32 Retained earnings, endowment, accumulated income, or other funds		32		
	33 Total net assets or fund balances	298,569.	33	421,242.	
34 Total liabilities and net assets/fund balances	298,569.	34	422,124.		

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	349,826.
2	Total expenses (must equal Part IX, column (A), line 25)	2	227,153.
3	Revenue less expenses. Subtract line 2 from line 1	3	122,673.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	298,569.
5	Net unrealized gains (losses) on investments	5	
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	421,242.

Part XII Financial Statements and Reporting

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

		Yes	No
1	Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ 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? 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: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		X
2b	Were the organization's financial statements audited by an independent accountant? 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: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		X
2c	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 Schedule O.		
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		X
3b	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		

Form 990 (2013)

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

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

▶ Attach to Form 990 or Form 990-EZ.

▶ Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2013

Open to Public Inspection

Name of the organization **KAKENYA CENTER FOR EXCELLENCE** Employer identification number **26-3658409**

Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.)

- 1 A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**
- 2 A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E.)
- 3 A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**
- 4 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: _____
- 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II.)
- 6 A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**
- 7 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.)
- 8 A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
- 9 An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2).** (Complete Part III.)
- 10 An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).**
- 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See **section 509(a)(3).** Check the box that describes the type of supporting organization and complete lines 11e through 11h.
 - a Type I
 - b Type II
 - c Type III - Functionally integrated
 - d Type III - Non-functionally integrated
- e By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2).
- f If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box
- g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

	Yes	No
(i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?		
(ii) A family member of a person described in (i) above?		
(iii) A 35% controlled entity of a person described in (i) or (ii) above?		
- h Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	(iv) Is the organization in col. (i) listed in your governing document?		(v) Did you notify the organization in col. (i) of your support?		(vi) Is the organization in col. (i) organized in the U.S.?		(vii) Amount of monetary support
			Yes	No	Yes	No	Yes	No	
Total									

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
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.						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(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 IV.)						
11 Total support. Add lines 7 through 10						
12 Gross receipts from related activities, etc. (see instructions)					12	
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here						<input type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2013 (line 6, column (f) divided by line 11, column (f))	14	%
15 Public support percentage from 2012 Schedule A, Part II, line 14	15	%
16a 33 1/3% support test - 2013. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
b 33 1/3% support test - 2012. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
17a 10% -facts-and-circumstances test - 2013. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
b 10% -facts-and-circumstances test - 2012. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions		<input type="checkbox"/>

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or 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 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
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 IV.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						

14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here**

Section C. Computation of Public Support Percentage

15 Public support percentage for 2013 (line 8, column (f) divided by line 13, column (f))	15	%
16 Public support percentage from 2012 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2013 (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from 2012 Schedule A, Part III, line 17	18	%

19a 33 1/3% support tests - 2013. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

b 33 1/3% support tests - 2012. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

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

▶ Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990

OMB No. 1545-0047

2013

Open to Public Inspection

Name of the organization

KAKENYA CENTER FOR EXCELLENCE

Employer identification number

26-3658409

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate contributions to (during year)		
3 Aggregate grants from (during year)		
4 Aggregate value at end of year		
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?		<input type="checkbox"/> Yes <input type="checkbox"/> No
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?		<input type="checkbox"/> Yes <input type="checkbox"/> No

Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply).

Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area

Protection of natural habitat Preservation of a certified historic structure

Preservation of open space

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

	Held at the End of the Tax Year
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included in (a)	2c
d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ _____

4 Number of states where property subject to conservation easement is located ▶ _____

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?

Yes No

6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year ▶ _____

7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ \$ _____

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?

Yes No

9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items.

b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:

(i) Revenues included in Form 990, Part VIII, line 1

▶ \$ _____

(ii) Assets included in Form 990, Part X

▶ \$ _____

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:

a Revenues included in Form 990, Part VIII, line 1

▶ \$ _____

b Assets included in Form 990, Part X

▶ \$ _____

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (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):
- a Public exhibition
 - b Scholarly research
 - c Preservation for future generations
 - d Loan or exchange programs
 - e Other _____

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No

b If "Yes," explain the arrangement in Part XIII and complete the following table:

	Amount
c Beginning balance	1c
d Additions during the year	1d
e Distributions during the year	1e
f Ending balance	1f

2a Did the organization include an amount on Form 990, Part X, line 21? Yes No

b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII

Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance					
b Contributions					
c 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					

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

- a Board designated or quasi-endowment _____ %
- b Permanent endowment _____ %
- c Temporarily restricted endowment _____ %

The percentages in lines 2a, 2b, and 2c should equal 100%.

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

- (i) unrelated organizations
- (ii) related organizations

	Yes	No
3a(i)		
3a(ii)		
3b		

b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?

4 Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment.

Complete if the organization answered "Yes" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings		132,278.	4,955.	127,323.
c Leasehold improvements				
d Equipment		39,123.	7,824.	31,299.
e Other		5,551.	1,026.	4,525.
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).)				163,147.

Part VII Investments - Other Securities.

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

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) ▶		

Part VIII Investments - Program Related.

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

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

Part IX Other Assets.

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

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.) ▶	

Part X Other Liabilities.

Complete if the organization answered "Yes" to Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶	

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

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.

Complete if the organization answered "Yes" to Form 990, Part IV, line 12a.

Table with 5 main rows and sub-rows (a-e) for adjustments. Columns include line numbers and descriptions. Includes a large 'COPY' watermark.

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Complete if the organization answered "Yes" to Form 990, Part IV, line 12a.

Table with 5 main rows and sub-rows (a-e) for adjustments. Columns include line numbers and descriptions. Includes a large 'COPY' watermark.

Part XIII Supplemental Information.

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

Multiple horizontal lines provided for entering supplemental information.

SCHEDULE E
(Form 990 or 990-EZ)

Schools

OMB No. 1545-0047

2013

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

▶ **Complete if the organization answered "Yes" to Form 990, Part IV, line 13, or Form 990-EZ, Part VI, line 48.**

▶ **Attach to Form 990 or Form 990-EZ.**

▶ **Information about Schedule E (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990**

Name of the organization

KAKENYA CENTER FOR EXCELLENCE

Employer identification number

26-3658409

Part I

1 Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?

	YES	NO
1	X	

2 Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?

2	X	
----------	---	--

3 Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe. If "No," please explain.

3		X
----------	--	---

If you need more space, use Part II

AS THE SCHOOL IS LOCATED IN A REMOTE AREA, THERE ARE NO LOCAL MEDIA OUTLETS SUCH AS NEWSPAPER OR RADIO BROADCAST. POLICIES ARE SPREAD BY WORD OF MOUTH.

4 Does the organization maintain the following?

a Records indicating the racial composition of the student body, faculty, and administrative staff?

4a	X	
-----------	---	--

b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?

4b		X
-----------	--	---

c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?

4c	X	
-----------	---	--

d Copies of all material used by the organization or on its behalf to solicit contributions?

4d	X	
-----------	---	--

If you answered "No" to any of the above, please explain. If you need more space, use Part II.

KCE FINANCIALLY ASSISTS MANY OF THE GIRLS WHOSE PARENTS CANNOT AFFORD THE SCHOOL FEES.

5 Does the organization discriminate by race in any way with respect to:

a Students' rights or privileges?

5a		X
-----------	--	---

b Admissions policies?

5b		X
-----------	--	---

c Employment of faculty or administrative staff?

5c		X
-----------	--	---

d Scholarships or other financial assistance?

5d		X
-----------	--	---

e Educational policies?

5e		X
-----------	--	---

f Use of facilities?

5f		X
-----------	--	---

g Athletic programs?

5g		X
-----------	--	---

h Other extracurricular activities?

5h		X
-----------	--	---

If you answered "Yes" to any of the above, please explain. If you need more space, use Part II.

6a Does the organization receive any financial aid or assistance from a governmental agency?

6a		X
-----------	--	---

b Has the organization's right to such aid ever been revoked or suspended?

6b		X
-----------	--	---

If you answered "Yes" to either line 6a or line 6b, explain on Part II.

7 Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If "No," explain on Part II

7	X	
----------	---	--

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

Schedule E (Form 990 or 990-EZ) (2013)

**SCHEDULE F
(Form 990)**

Department of the Treasury
Internal Revenue Service

Statement of Activities Outside the United States

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16.

▶ Attach to Form 990. ▶ See separate instructions.

▶ Information about Schedule F (Form 990) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2013

Open to Public Inspection

Name of the organization: **KAKENYA CENTER FOR EXCELLENCE**
Employer identification number: **26-3658409**

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

1 For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes No

2 For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States.

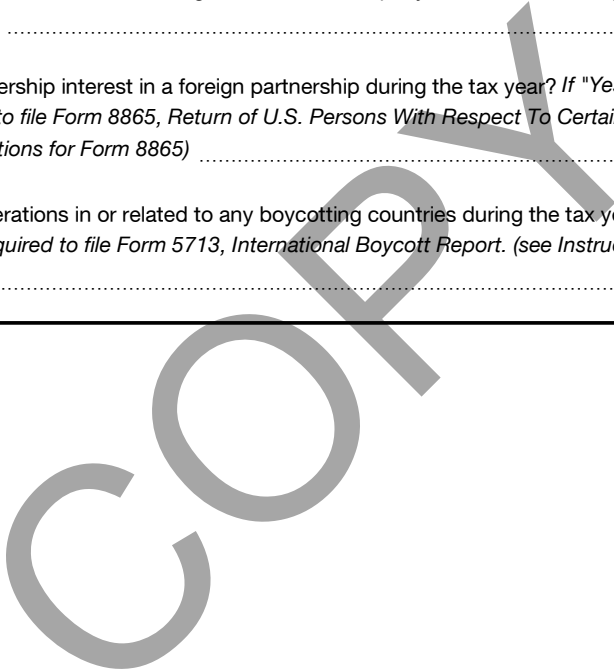
3 Activities per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.)

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e.g., 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 region	(f) Total expenditures for and investments in region
SUB-SAHARAN AFRICA	1	9	PROGRAM SERVICES	TRAINING FOR THE GIRLS	213,491.
3 a Sub-total	1	9			213,491.
b Total from continuation sheets to Part I	0	0			0.
c Totals (add lines 3a and 3b)	1	9			213,491.

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 No
- 2 Did the organization have an interest in a foreign trust during the tax year? *If "Yes," the organization may be required to 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)* 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 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 file Form 5713, International Boycott Report. (see Instructions for Form 5713)* Yes No

Schedule F (Form 990) 2013



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.

Multiple horizontal lines for data entry, with a large diagonal 'COPY' watermark across the center.

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990

OMB No. 1545-0047

2013

Open to Public
Inspection

Name of the organization

KAKENYA CENTER FOR EXCELLENCE

Employer identification number

26-3658409

FORM 990, PART I, LINE 1: ORGANIZATIONS MISSION

KAKENYA CENTER FOR EXCELLENCE (KCE) IS AN ALL GIRLS

PRIMARY BOARDING SCHOOL LOCATED IN THE MAASAI VILLAGE OF ENOOSAEN,

KENYA. KCE SEEKS TO EMPOWER AND MOTIVATE YOUNG GIRLS THROUGH EDUCATION

TO BECOME AGENTS OF CHANGE AND TO BREAK THE CYCLE OF DESTRUCTIVE

CULTURAL PRACTICES IN KENYA, SUCH AS FEMALE GENITAL MUTILATION AND

EARLY FORCED MARRIAGE. WE BELIEVE IN IMPACTING ONE GIRL AT A TIME, ONE

COMMUNITY AT A TIME, UNTIL ALL GIRLS IN AFRICA HAVE THE OPPORTUNITY

THEY NEED TO LEARN AND THRIVE AS INDIVIDUALS AND ACHIEVE THEIR FULL

POTENTIAL.

AS IN MOST VILLAGES IN KENYA, WOMEN AND GIRLS IN ENOOSAEN REMAIN

SEVERELY MARGINALIZED BY CULTURAL TRADITIONS. GIRLS IN THE MAASAI

COMMUNITY REGULARLY STOP GOING TO SCHOOL AND ARE MARRIED OFF AT

ADOLESCENCE AFTER UNDERGOING FEMALE GENITAL MUTILATION (FGM), A PAINFUL

AND DANGEROUS PRACTICE THAT IS CONSIDERED A RITE OF PASSAGE TO

ADULTHOOD. WHILE THIS VIOLENT PRACTICE IS ON A DECLINE, YOUNG TEEN

PREGNANCY IS ON A DEVASTATING INCLINE. ONLY ONE IN FIVE MAASAI GIRLS

WHO ATTEND PRIMARY SCHOOL WILL FINISH, SINCE EARLY MARRIAGE, PREGNANCY,

HIV/AIDS, CARING FOR FAMILY MEMBERS AND BEING RESPONSIBLE FOR MANY

CHORES AT HOME RESULT IN HIGH DROPOUT RATES. OTHER SIGNIFICANT

BARRIERS INCLUDE A LACK OF CLEAN AND PRIVATE SANITATION FACILITIES AND

NO ACCESS TO SANITARY PADS DURING MENSTRUATION. IF NO ACTION IS TAKEN

FOR GIRLS GROWING UP IN THESE CONDITIONS, THEIR FUTURES HOLD LITTLE

HOPE.

Name of the organization KAKENYA CENTER FOR EXCELLENCE	Employer identification number 26-3658409
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WHEN GIRLS ARE NOT EDUCATED, THE CYCLE OF MARGINALIZATION CONTINUES FROM ONE GENERATION TO THE NEXT, WITH MEN AND TRIBAL ELDERS DICTATING A GIRL'S PRESENT AND FUTURE WITHOUT CONSIDERING HER SOCIAL, FINANCIAL, PHYSICAL, OR EMOTIONAL WELL-BEING. KCE OPENS UP EDUCATIONAL OPPORTUNITIES FOR VILLAGE DAUGHTERS, AND REVERSES THE AGE-OLD PATTERN OF GIRLS MATURING IN THE SAME STUNTING ENVIRONMENT. AROUND THE GLOBE, DATA CLEARLY INDICATES THAT INVESTING IN A GIRL'S EDUCATION CREATES PROFOUND POSITIVE OUTCOMES THAT AFFECT NOT ONLY THE GIRL HERSELF, BUT HER FAMILY AND COMMUNITY, AS WELL. ACCORDING TO THE WORLD BANK, "GIRLS' EDUCATION YIELDS SOME OF THE HIGHEST RETURNS OF ALL DEVELOPMENT INVESTMENTS, YIELDING BOTH PRIVATE AND SOCIAL BENEFITS THAT ACCRUE TO INDIVIDUALS, FAMILIES, AND SOCIETY AT LARGE." WHEN YOU EDUCATE A YOUNG GIRL, YOU LOWER FERTILITY AND INFANT MORTALITY RATES, DECREASE THE PREVALENCE OF HIV/AIDS, INCREASE WOMEN'S EARNINGS (WHICH ARE THEN RE-INVESTED BACK INTO THE FAMILY), AND IMPROVE NUTRITION AND HEALTH.

KCE WAS FOUNDED BY DR. KAKENYA NTAIYA, A NATIVE OF ENOOSAEN WHO KNOWS FIRSTHAND WHAT A DIFFERENCE EDUCATION CAN MAKE IN A GIRL'S LIFE. ENGAGED AT AGE FIVE, DR. NTAIYA WAS TO BE MARRIED AS SOON AS SHE UNDERWENT FGM, AN EVENT THAT WOULD MARK THE END OF HER EDUCATION AND THE BEGINNING OF PREPARATIONS FOR MARRIAGE. BUT DR. NTAIYA HAD A DIFFERENT PLAN. FIRST, SHE NEGOTIATED WITH HER FATHER THAT SHE WOULD UNDERGO FGM ONLY IF SHE WOULD BE ALLOWED TO FINISH SECONDARY SCHOOL. HE AGREED. A FEW YEARS LATER, SHE NEGOTIATED WITH HER VILLAGE ELDERS TO ATTEND COLLEGE ON A SCHOLARSHIP IN THE UNITED STATES, SOMETHING NO GIRL FROM ENOOSAEN HAD EVER DONE. SHE PROMISED TO USE HER EDUCATION TO BENEFIT HER COMMUNITY, AND THE ENTIRE VILLAGE COLLECTED MONEY TO PAY FOR HER JOURNEY. THIS PROMISE LED HER TO A VISION OF FOREVER CHANGING

Name of the organization

KAKENYA CENTER FOR EXCELLENCE

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THE TRADITIONAL TRAJECTORY FOR MAASAI GIRLS. KAKENYA CENTER FOR EXCELLENCE IS DR. NTAIYA'S WAY OF USING HER EDUCATION TO BENEFIT ENOOSAEN BY GIVING VILLAGE GIRLS A PATHWAY TOWARD EXCELLENCE AND LEADERSHIP, AND IT IS A POWERFUL EXAMPLE OF HOW GIRLS GIVE BACK TO THEIR COMMUNITIES WHEN THEY HAVE OPPORTUNITIES AND EDUCATION.

THE SCHOOL OPENED IN MAY 2009. THE FIRST STANDARD FOUR CLASS OF 32 STUDENTS WAS SELECTED FROM A GROUP OF 100 GIRLS WHO HAD BEEN CONTACTED BY COMMUNITY MEMBERS AND CAME TO THE ENROLLMENT INTERVIEW. THESE GIRLS HAVE NOW GRADUATED FROM THE PROGRAM AND ARE ATTENDING HIGH SCHOOLS AROUND THE COUNTRY. SINCE 2009, ANOTHER 138 GIRLS HAVE BEEN ENROLLED IN STANDARDS FOUR THROUGH EIGHT AND THE SCHOOL IS NOW AT FULL CAPACITY. THE GIRLS ALL RESIDE AT THE SCHOOL AS BOARDERS.

TO ACHIEVE ITS MISSION AND TO REACH ITS GOAL, KCE HAS PARTNERED WITH OTHER ORGANIZATIONS WITH SIMILAR OBJECTIVES AND TARGETS, INCLUDING NIKE FOUNDATION, GLOBAL FUND FOR CHILDREN, SUMMIT FOUNDATION, WALLACE GLOBAL FUND, DINING FOR WOMEN, AND WOMEN IN THE WORLD FOUNDATION, AMONG OTHERS. KCE HAS ALSO PARTNERED WITH INDIVIDUALS WHO HAVE SUPPORTED THE CONSTRUCTION OF THE SCHOOL, PROVIDED LEARNING SUPPLIES, AND ASSISTED WITH STUDENT NEEDS BY PROVIDING PERSONAL FUNDS.

THE SCHOOL'S FOUNDER IS FIRMLY COMMITTED TO ENDING DESTRUCTIVE CULTURAL PRACTICES, AND THERE IS GROWING SUPPORT WITHIN THE COMMUNITY FOR THIS NEW WAY OF THINKING. FOR KCE GIRLS, SKILLS, EDUCATION AND SELF-AWARENESS HAVE REPLACED FGM, EARLY MARRIAGE, AND EARLY PREGNANCY. THEY NOW LIVE A LIFE FILLED WITH POSSIBILITIES, HOPE, AND EXCITEMENT ABOUT WHAT THEY CAN ACHIEVE. THE SCHOOL DEMONSTRATES THAT THERE IS A

Name of the organization KAKENYA CENTER FOR EXCELLENCE	Employer identification number 26-3658409
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VIABLE ALTERNATIVE TO WHAT HAS BEEN PRACTICED IN THE PAST THAT IS NOT ONLY TRANSFORMATIVE FOR THE GIRLS, BUT GIVES THE VILLAGE AND THE NATION THE BENEFIT OF DEDICATED, EDUCATED AND GRATEFUL YOUNG WOMEN WHO, LIKE DR. NTAIYA, WILL STRIVE TO MAKE A DIFFERENCE.

FORM 990, PART III, LINE 1:

KAKENYA CENTER FOR EXCELLENCE (KCE) IS AN ALL GIRLS PRIMARY BOARDING SCHOOL LOCATED IN THE MAASAI VILLAGE OF ENOOSAEN, KENYA. KCE SEEKS TO EMPOWER AND MOTIVATE YOUNG GIRLS THROUGH EDUCATION TO BECOME AGENTS OF CHANGE AND TO BREAK THE CYCLE OF DESTRUCTIVE CULTURAL PRACTICES IN KENYA, SUCH AS FEMALE GENITAL MUTILATION AND EARLY FORCED MARRIAGE. WE BELIEVE IN IMPACTING ONE GIRL AT A TIME, ONE COMMUNITY AT A TIME, UNTIL ALL GIRLS IN AFRICA HAVE THE OPPORTUNITY THEY NEED TO LEARN AND THRIVE AS INDIVIDUALS AND ACHIEVE THEIR FULL POTENTIAL.

AS IN MOST VILLAGES IN KENYA, WOMEN AND GIRLS IN ENOOSAEN REMAIN SEVERELY MARGINALIZED BY CULTURAL TRADITIONS. GIRLS IN THE MAASAI COMMUNITY REGULARLY STOP GOING TO SCHOOL AND ARE MARRIED OFF AT ADOLESCENCE AFTER UNDERGOING FEMALE GENITAL MUTILATION (FGM), A PAINFUL AND DANGEROUS PRACTICE THAT IS CONSIDERED A RITE OF PASSAGE TO ADULTHOOD. WHILE THIS VIOLENT PRACTICE IS ON A DECLINE, YOUNG TEEN PREGNANCY IS ON A DEVASTATING INCLINE. ONLY ONE IN FIVE MAASAI GIRLS WHO ATTEND PRIMARY SCHOOL WILL FINISH, SINCE EARLY MARRIAGE, PREGNANCY, HIV/AIDS, CARING FOR FAMILY MEMBERS AND BEING RESPONSIBLE FOR MANY CHORES AT HOME RESULT IN HIGH DROPOUT RATES. OTHER SIGNIFICANT BARRIERS INCLUDE A LACK OF CLEAN AND PRIVATE SANITATION FACILITIES AND NO ACCESS TO SANITARY PADS DURING MENSTRUATION. IF NO ACTION IS TAKEN

Name of the organization KAKENYA CENTER FOR EXCELLENCE	Employer identification number 26-3658409
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FOR GIRLS GROWING UP IN THESE CONDITIONS, THEIR FUTURES HOLD LITTLE HOPE.

WHEN GIRLS ARE NOT EDUCATED, THE CYCLE OF MARGINALIZATION CONTINUES FROM ONE GENERATION TO THE NEXT, WITH MEN AND TRIBAL ELDERS DICTATING A GIRL'S PRESENT AND FUTURE WITHOUT CONSIDERING HER SOCIAL, FINANCIAL, PHYSICAL, OR EMOTIONAL WELL-BEING. KCE OPENS UP EDUCATIONAL OPPORTUNITIES FOR VILLAGE DAUGHTERS, AND REVERSES THE AGE-OLD PATTERN OF GIRLS MATURING IN THE SAME STUNTING ENVIRONMENT. AROUND THE GLOBE, DATA CLEARLY INDICATES THAT INVESTING IN A GIRL'S EDUCATION CREATES PROFOUND POSITIVE OUTCOMES THAT AFFECT NOT ONLY THE GIRL HERSELF, BUT HER FAMILY AND COMMUNITY, AS WELL. ACCORDING TO THE WORLD BANK, "GIRLS' EDUCATION YIELDS SOME OF THE HIGHEST RETURNS OF ALL DEVELOPMENT INVESTMENTS, YIELDING BOTH PRIVATE AND SOCIAL BENEFITS THAT ACCRUE TO INDIVIDUALS, FAMILIES, AND SOCIETY AT LARGE." WHEN YOU EDUCATE A YOUNG GIRL, YOU LOWER FERTILITY AND INFANT MORTALITY RATES, DECREASE THE PREVALENCE OF HIV/AIDS, INCREASE WOMEN'S EARNINGS (WHICH ARE THEN RE-INVESTED BACK INTO THE FAMILY), AND IMPROVE NUTRITION AND HEALTH.

KCE WAS FOUNDED BY DR. KAKENYA NTAIYA, A NATIVE OF ENOOSAEN WHO KNOWS FIRSTHAND WHAT A DIFFERENCE EDUCATION CAN MAKE IN A GIRL'S LIFE. ENGAGED AT AGE FIVE, DR. NTAIYA WAS TO BE MARRIED AS SOON AS SHE UNDERWENT FGM, AN EVENT THAT WOULD MARK THE END OF HER EDUCATION AND THE BEGINNING OF PREPARATIONS FOR MARRIAGE. BUT DR. NTAIYA HAD A DIFFERENT PLAN. FIRST, SHE NEGOTIATED WITH HER FATHER THAT SHE WOULD UNDERGO FGM ONLY IF SHE WOULD BE ALLOWED TO FINISH SECONDARY SCHOOL. HE AGREED. A FEW YEARS LATER, SHE NEGOTIATED WITH HER VILLAGE ELDERS TO ATTEND COLLEGE ON A SCHOLARSHIP IN THE UNITED STATES, SOMETHING NO

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---	--

GIRL FROM ENOOSAEN HAD EVER DONE. SHE PROMISED TO USE HER EDUCATION TO BENEFIT HER COMMUNITY, AND THE ENTIRE VILLAGE COLLECTED MONEY TO PAY FOR HER JOURNEY. THIS PROMISE LED HER TO A VISION OF FOREVER CHANGING THE TRADITIONAL TRAJECTORY FOR MAASAI GIRLS. KAKENYA CENTER FOR EXCELLENCE IS DR. NTAIYA'S WAY OF USING HER EDUCATION TO BENEFIT ENOOSAEN BY GIVING VILLAGE GIRLS A PATHWAY TOWARD EXCELLENCE AND LEADERSHIP, AND IT IS A POWERFUL EXAMPLE OF HOW GIRLS GIVE BACK TO THEIR COMMUNITIES WHEN THEY HAVE OPPORTUNITIES AND EDUCATION.

THE SCHOOL OPENED IN MAY 2009. THE FIRST STANDARD FOUR CLASS OF 32 STUDENTS WAS SELECTED FROM A GROUP OF 100 GIRLS WHO HAD BEEN CONTACTED BY COMMUNITY MEMBERS AND CAME TO THE ENROLLMENT INTERVIEW. THESE GIRLS HAVE NOW GRADUATED FROM THE PROGRAM AND ARE ATTENDING HIGH SCHOOLS AROUND THE COUNTRY. SINCE 2009, ANOTHER 138 GIRLS HAVE BEEN ENROLLED IN STANDARDS FOUR THROUGH EIGHT AND THE SCHOOL IS NOW AT FULL CAPACITY. THE GIRLS ALL RESIDE AT THE SCHOOL AS BOARDERS.

TO ACHIEVE ITS MISSION AND TO REACH ITS GOAL, KCE HAS PARTNERED WITH OTHER ORGANIZATIONS WITH SIMILAR OBJECTIVES AND TARGETS, INCLUDING NIKE FOUNDATION, GLOBAL FUND FOR CHILDREN, SUMMIT FOUNDATION, WALLACE GLOBAL FUND, DINING FOR WOMEN, AND WOMEN IN THE WORLD FOUNDATION, AMONG OTHERS. KCE HAS ALSO PARTNERED WITH INDIVIDUALS WHO HAVE SUPPORTED THE CONSTRUCTION OF THE SCHOOL, PROVIDED LEARNING SUPPLIES, AND ASSISTED WITH STUDENT NEEDS BY PROVIDING PERSONAL FUNDS.

THE SCHOOL'S FOUNDER IS FIRMLY COMMITTED TO ENDING DESTRUCTIVE CULTURAL PRACTICES, AND THERE IS GROWING SUPPORT WITHIN THE COMMUNITY FOR THIS NEW WAY OF THINKING. FOR KCE GIRLS, SKILLS, EDUCATION AND

Name of the organization

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SELF-AWARENESS HAVE REPLACED FGM, EARLY MARRIAGE, AND EARLY PREGNANCY. THEY NOW LIVE A LIFE FILLED WITH POSSIBILITIES, HOPE, AND EXCITEMENT ABOUT WHAT THEY CAN ACHIEVE. THE SCHOOL DEMONSTRATES THAT THERE IS A VIABLE ALTERNATIVE TO WHAT HAS BEEN PRACTICED IN THE PAST THAT IS NOT ONLY TRANSFORMATIVE FOR THE GIRLS, BUT GIVES THE VILLAGE AND THE NATION THE BENEFIT OF DEDICATED, EDUCATED AND GRATEFUL YOUNG WOMEN WHO, LIKE DR. NTAIYA, WILL STRIVE TO MAKE A DIFFERENCE.

FORM 990, PART III, LINE 4B, PROGRAM SERVICE ACCOMPLISHMENTS:

ARE VIOLATED. THE GIRLS WHO COME TO OUR CAMPS ALSO HAVE ACCESS TO THE FUN AND INSPIRING EDUCATIONAL RESOURCES AVAILABLE THROUGH KCE PROGRAMS. GIRLS ARE CHALLENGED TO DREAM BIG, AND THROUGH OUR MOTIVATIONAL SPEAKERS THEY ARE GIVEN AN OPPORTUNITY TO ASK QUESTIONS RELATING TO THEIR VARIOUS DREAMS AND GOALS. THE PROGRAM HAS REACHED OVER 400 GIRLS AND CONTINUES TO EMPOWER AND MOTIVATE YOUNG GIRLS IN ALL OF THE COMMUNITY TO ACHIEVE THEIR FULL POTENTIAL.

FORM 990, PART VI, SECTION A, LINE 8B:

THERE ARE NO COMMITTEES THAT HAVE THE AUTHORITY TO ACT ON BEHALF OF THE GOVERNING BODY.

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

THE FEDERAL FORM 990 WAS PREPARED IN A DRAFT FORMAT. THIS DRAFT FORMAT WAS PRESENTED AT A MEETING OF THE BOARD OF DIRECTORS. AT THIS MEETING THE DRAFT FORM 990 WAS REVIEWED IN DEPTH BY THE MEMBERS OF THE BOARD OF DIRECTORS. QUESTIONS ON THE RETURN WERE DISCUSSED AT THIS TIME.

THE MEMBERS OF THE BOARD OF DIRECTORS THEN HAD ADDITIONAL TIME AFTER THAT

Name of the organization

KAKENYA CENTER FOR EXCELLENCE

Employer identification number

26-3658409

MEETING TO REVIEW THE DRAFT FORM 990 AND TO SUGGEST CHANGES. AFTER ALL THE INPUT FROM THE MEMBERS OF THE BOARD OF DIRECTORS THE FORM 990 WAS FINALIZED WITH THE INTERNAL REVENUE SERVICE.

FORM 990, PART VI, SECTION B, LINE 12C:

DURING 2011 KCE ADOPTED A CONFLICT OF INTEREST POLICY. THIS POLICY WAS REVIEWED AND SIGNED BY ALL MEMBERS OF THE BOARD OF DIRECTORS. THIS POLICY WILL BE REVIEWED AND SIGNED ON AN ANNUAL BASIS BY ALL OF THE MEMBERS OF THE BOARD OF DIRECTORS.

FORM 990, PART VI, SECTION B, LINE 15:

COMPENSATION OF THE FOUNDER AND ANY OTHER MEMBERS OF MANAGEMENT IS DETERMINED BY THE BOARD OF DIRECTORS BASED UPON THE ACTIVITIES TO BE PERFORMED DURING THE YEAR UNDER REVIEW.

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

KCE WILL PROVIDE COPIES OF ITS FEDERAL FORM 990 TO THE GENERAL PUBLIC UPON REQUEST. THE FEDERAL FORM 990 IS ALSO AVAILABLE TO THE GENERAL PUBLIC ON GUIDESTAR.

CONTRIBUTED SERVICES

DURING THE YEAR KCE RECEIVED CONTRIBUTIONS FROM VARIOUS BOARD MEMBERS, VOLUNTEERS, AND OTHERS THAT ARE NOT REFLECTED IN THIS 990. IN ADDITION, KCE RECEIVED OFFICE SPACE FROM THE SUMMIT FOUNDATION, ACCOUNTING SERVICES AND OTHER PROFESSIONAL SERVICES PRO BONO.

2013 DEPRECIATION AND AMORTIZATION REPORT

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Asset No.	Description	Date Acquired	Method	Life	Conv	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	* Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
1	BUILDING IMPROVEMENTS-BEGINNING	05/01/09	SL	39.00	MM	16	5,384.				5,384.			138.	138.
2	BUILDING IMPROVEMENTS-ONE MILLION LIGHTS	03/11/13	SL	39.00		16	15,000.				15,000.			321.	321.
3	BUILDING DORMITORY	05/01/09	SL	39.00	MM	16	78,761.				78,761.	1,641.		2,020.	3,661.
4	BUILDING DORMITORY-IMPROVEMENT	02/01/13	SL	39.00		16	7,183.				7,183.			169.	169.
5	BUILDING SCHOOL/4 CLASSROOMS	05/01/09	SL	39.00	MM	16	20,700.				20,700.			531.	531.
6	SCHOOL GATE	05/01/09	SL	39.00	MM	16	1,400.				1,400.			36.	36.
7	TEMPORARY KITCHEN AND STORAGE	05/01/09	SL	39.00	MM	16	1,600.				1,600.			41.	41.
8	TEMPORARY TEACHER'S HOUSE	05/01/09	SL	39.00	MM	16	1,000.				1,000.			26.	26.
9	GENERATOR	05/01/09	SL	39.00	MM	16	1,250.				1,250.			32.	32.
10	COMPUTERS-SCHOOL	05/01/09	SL	5.00		16	34,942.				34,942.			6,988.	6,988.
11	COMPUTER	05/01/09	SL	5.00		16	4,181.				4,181.			836.	836.
12	BEDS-BEGINNING BALANCE	05/01/09	SL	5.00		16	1,020.				1,020.			204.	204.
13	BEDS-DORMITORY CHAIRS AND BEDS	02/01/13	SL	5.00		16	3,651.				3,651.			669.	669.
14	OFFICE DESKS AND CHAIRS	05/01/09	SL	7.00		16	400.				400.			57.	57.
15	METAL CUPBOARD	05/01/09	SL	5.00		16	480.				480.			96.	96.
	* TOTAL 990 PAGE 10 DEPR						176,952.				176,952.	1,641.		12,164.	13,805.

• If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** and check this box **X**

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

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

Part II Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no copies needed).

Enter filer's identifying number, see instructions

Type or print File by the due date for filing your return. See instructions.	Name of exempt organization or other filer, see instructions. KAKENYA CENTER FOR EXCELLENCE	Employer identification number (EIN) or 26-3658409
	Number, street, and room or suite no. If a P.O. box, see instructions. 2100 PENNSYLVANIA AVENUE, NW, NO. 525	Social security number (SSN)
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. WASHINGTON, DC 20037	

Enter the Return code for the return that this application is for (file a separate application for each return)

Application Is For	Return Code	Application Is For	Return Code
Form 990 or Form 990-EZ	01		
Form 990-BL	02	Form 1041-A	08
Form 4720 (individual)	03	Form 4720 (other than individual)	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

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

THE ORGANIZATION - 2100 PENNSYLVANIA AVENUE, NW, NO. 525

• The books are in the care of - **WASHINGTON, DC 20037**

Telephone No. **202-912-2903** Fax No.

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

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

4 I request an additional 3-month extension of time until **NOVEMBER 15, 2014**.

5 For calendar year **2013**, or other tax year beginning , and ending .

6 If the tax year entered in line 5 is for less than 12 months, check reason: Initial return Final return
 Change in accounting period

7 State in detail why you need the extension
ADDITIONAL TIME IS NEEDED TO FILE A COMPLETE AND ACCURATE RETURN

8a If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	8a	\$	0.
b If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868.	8b	\$	0.
c Balance due. Subtract line 8b from line 8a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	8c	\$	0.

Signature and Verification must be completed for Part II only.

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

Signature Title **PRESIDENT AND FOUNDER** Date