

Board of Directors

Meeting Agenda

Thursday, March 29, 2018
 NC Pre-K – 12:00 pm – 12:30 pm
 PFC Board – 12:30 pm – 2:00 pm
 Charles Morris Conference Room

Be the Driving Force to meet our roles and responsibilities as a non-profit Board by:

➤ Providing Oversight ➤ Ensuring Adequate Resources ➤ Establishing a Strategic Direction

- I. **Networking and Lunch [12:00]**
- II. **Determination of NC Pre-K Quorum & Call to Order [12:20]**
- III. **Adjourn NC Pre-K [12:30]**
- IV. **Determination of Board Quorum & Call to Order^A – C. Rey [12:30]**
 - A. Volunteer Forms
 - B. Board Donations
- V. **Approval of Minutes – C. Rey [12:35]**
 - A. November 30, 2017 – Closed Session
- VI. **Consent Agenda – Providing Oversight* (See Section XI.) [12:40]**
- VII. **Establishing a Strategic Direction for the Future [12:45]**
 - A. Board Development – J. Grafstrom
 - 1. Fiscal Year (FY) 18/19
 - a. Board Officer Nomination*

Position	Current Officers	Potential Nominees
Chair	Chris Rey	James Grafstrom
Vice Chair	James Grafstrom	
Secretary	Van Gunter	
Treasurer	Marcus Hedgepeth	Sandee Gronowski

b. Board Member Nomination^A

NCPC Suggested Roles – Government	Board Member	Potential Nominees
County Commissioner’s Office	Open	
Local Health Agency or Health Services Provider	Open	
Local Public Library	Open	
Municipal Government	Chris Rey	
NCPC Suggested Roles - Services	Board Member	Potential Nominees
Child Care Provider – Licensed Home	Open	
Military Child Care Rep	Open	
Child Care Resource & Referral (non-employee) or Another Child-Serving Agency Representative (NC Pre-K Mandated)	Deborah Sledge	

Other Non-Profit Human Service Agency	Robert Hines	
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- c. Executive Committee Nominations*
- d. Board/Committee Calendar*
- B. Smart Start Allocation FY 18-21 Recommendations* – M. Clark/L. Blanton
- C. Community Child Abuse Prevention Plan* – L. Blanton

VIII. Ensuring Adequate Resources & Engagement [1:10]

- A. Financials^Δ
 - 1. Financial Summary: February 2018 – Marcus Hedgepeth
- B. February Cash and In-Kind^Δ – A. Hall
- C. Advocacy Funding^Δ – M. Sonnenberg
- D. Form 990*^e – M. Lilly
- E. Assets Disposals* – M. Lilly
- F. Soirée Update^Δ – P. Melton /S. Moyer
- G. KidStuff, April 28-29, 2018, Dogwood Festival^Δ – S. Moyer
- H. Kidtopia, November 10, 2018, Crown Arena^Δ – S. Moyer

IX. President’s Report^Δ [1:30]

- A. North Carolina Partnership for Children (NCPC) Update / Legislative Update
- B. NC Justice Center, Pathways for Prosperity (P4P)
- C. Smart Start Conference, April 30 – May 3, 2018
- D. Dolly Parton Imagination Library (DPIL)
- E. Week of the Young Child, April 16-21, 2018

X. CLOSED SESSION – PERSONNEL ACTION* [1:40]

XI. Consent Agenda Items*/Items for Information^Δ

- A. *Minutes**
 - 1. *November 30, 2017 – Board Meeting*
 - 2. *January 25, 2018 – Board Meeting*
- B. *Human Resource Committee – (March 14, 2018) – H. Debnam, Chair*
 - 1. *Job Description*
 - a. *Fiscal Monitoring Coordinator*
 - 2. *Position Updates*
 - a. *Reinstating the Fiscal Monitoring Coordinator position (Effective March 29, 2018)*
 - b. *Dissolve the Early Education Coordinator-QE (Effective March 14, 2018)*
 - c. *Title Change and Direct Reports (Effective March 14, 2018)*
 - 3. *Direct Reports Change (Effective March 24, 2018)*
- C. *Finance Committee* – (Meeting March 20, 2018) – L. Childers, Acting Chair*
 - 1. *FY 17/18 Partnership Umbrella Budget (PUB)*
 - 2. *Budget Amendments/Revisions*
 - a. *Reach Out and Read*
 - b. *ABCD*
 - c. *Dolly Parton’s Imagination Library*
 - 3. *In-House Budget Amendments/Revisions*
 - a. *Smart Start Administration*
 - b. *Smart Start Child Care Resource and Referral (CCR&R)*
 - c. *Smart Start PFC Child Care Subsidy Non-TANF/CCDF*
 - 4. *Disposal of Asset – Autism Society of Cumberland County*
 - 5. *Assets Disposals (See Section VIII.E.)*

- D. *Committee Information (Non Action)*^Δ
 - 1. *Finance Committee (March 20, 2018)*
 - a. *Financial Reports: February 2018*^ε
 - i. *Smart Start*
 - ii. *NC Pre-Kindergarten*
 - iii. *DCDEE – Region 5*
 - iv. *All Funding Sources*
 - v. *Unrestricted State Revenues*
 - vi. *Cash and In-Kind Report (See Section VIII.B.)*

XII. Adjourn [2:00]

* Needs Action ^ΔInformation Only / Possible Conflict of Interest (Recusals)

^ε Electronic Copy (Hard copies are available upon request)

**Partnership for Children of Cumberland County, Inc. - FY 18/19 - 19/20 - 20/21 Proposed Smart Start Allocations
(Revised: March 2018)**

		Mar-18								
Activity	Contractor	FY 17/18 Smart Start Allocations 07/01/17	Increase/decrease in Proposal Request	Consolidation/ Separation of Activities	Re-Allocation of Funding for Family Support Svcs	P&E Cmte Revisions to Funding	Recommendations for FY 18/19 Smart Start Allocations	Totals and Percentages to Ensure Smart Start Legislative Mandates Are Met		
(1) EC&E Subsidy										
(2) Child Care Subsidy (TANF)	Partnership for Children	\$ 366,368					\$ 366,368			
(3) DSS Child Care Subsidy (TANF)	Dept. of Social Services	\$ 2,230,306					\$ 2,230,306			
(4) FTCC CC Scholarship (TANF)	Fayetteville Tech.	\$ 207,260	\$ 100,000			\$ (100,000)	\$ 207,260		(\$ 2,803,934, 45% required)	
(5)								\$ 2,803,934	45%	
(6) Child Care Subsidy/Admin.	Partnership for Children	\$ 35,450				\$ (300)	\$ 35,150			
(7) DSS CC Subsidy Support/Admin.	Dept. of Social Services	\$ 178,424				\$ (18,617)	\$ 159,807			
(8) FTCC CC Scholarship/Admin.	Fayetteville Tech.	\$ 11,550	\$ 24,500			\$ (24,600)	\$ 11,450			
(9)								\$ 206,407	3%	
(10) Child Care Subsidy (Non-TANF)	Partnership for Children	\$ 60,000				\$ (500)	\$ 59,500			
(11) Spainhour/Child Play	Easter Seals UCP	\$ 91,716				\$ -	\$ 91,716			
(12)								\$ 151,216	2%	
(13)								\$ 3,161,557	50%	
(14) EC&E Quality										
(15) Child Care Resource and Referral	Partnership for Children	\$ 793,797		\$ 651,245		\$ (12,250)	\$ 1,432,792			
(16) Kindermusik	Kerri Hurley	\$ 57,709	\$ 7,848			\$ (8,348)	\$ 57,209			
(17) Professional Dev. Career Center	Partnership for Children	\$ 268,453		\$ (268,453)			\$ -			
(18) Quality Enhancement Grants	Partnership for Children	\$ 188,317		\$ (188,317)			\$ -			
(19) High Quality Maintenance	Partnership for Children	\$ 251,275		\$ (251,275)			\$ -			
(20) WAGES	Child Care Svcs. Assoc	\$ 374,680	\$ 75,320			\$ (78,446)	\$ 371,554			
(21)								\$ 1,861,555	30%	
(22)								\$ 5,023,112	80%	
(23)									70% required/80% target	
(24) Health/Family Support										
(25) Autism O&R Service	Autism Society of CC	\$ 45,000					\$ 45,000			
(26) All Children Excel	Partnership for Children	\$ -	\$ 19,800	\$ 160,985	\$ 18,040	\$ (18,040)	\$ 180,785			
(27) Family Support Services (FSS)	Partnership for Children	\$ -		\$ 56,800	\$ (56,800)		\$ -			
(28) Child Passenger Safety Car Seats	Partnership for Children				\$ 15,000	\$ (10,000)	\$ 5,000			
(29) Literacy - Previously Unallocated		\$ 49,750	\$ (49,750)				\$ -			
(30) Family Connect	Partnership for Children	\$ -	\$ 110,000			\$ (10,000)	\$ 100,000			
(31) Dolly Parton Imagination Library	United Way of Cumberland Cty.	\$ 6,000	\$ (6,000)				\$ -			
(32) Reach Out & Read (ROR)	4C (Carolina Collaborative Community Care)	\$ 32,300	\$ 559			\$ (16,359)	\$ 16,500			
(33) ABCD	4C (Carolina Collaborative Community Care)	\$ 65,000	\$ 28,502			\$ (1,264)	\$ 92,238			
(34)								\$ 439,523	7%	
(35) System Support										
(36) Information Tech Service Center	Partnership for Children	\$ -					\$ -			
(37) PFC Family Resource Center	Partnership for Children	\$ 300,227	\$ (5,740)	\$ (160,985)		\$ (3,358)	\$ 130,144			
(38) Community Engage. & Dev.	Partnership for Children	\$ 190,083	\$ 51,022			\$ (30,219)	\$ 210,886			
(39) Planning, Monitoring & Evaluation	Partnership for Children	\$ 329,671		\$ 145,554			\$ 475,225			
(40) Prog Coord - Monitoring & Support	Partnership for Children	\$ 145,554		\$ (145,554)			\$ -			
(41)								\$ 816,255	13%	
(42)								\$ 1,255,778	20%	
(43)									20% target	
(44)		\$ 6,278,890					\$ 6,278,890	\$ 6,278,890	100%	
(45) Requests (Over)/Under Allocation			\$ 356,061	\$ -	\$ (23,760)	\$ (332,301)	\$ -	\$ -		
(46)		\$ 6,278,890					\$ 6,278,890			
(47) Administration	Partnership for Children	\$ 319,799					\$ 319,799	\$ 319,799	5%	
(48)		\$ 6,598,689					\$ 6,598,689	\$ 6,598,689		

THE INFORMATION BELOW IS AN INTEGRAL COMPONENT TO THIS DOCUMENT.

Four CCR&R activities (#17, 18, 19 & 15) to be consolidated under the CCR&R activity (15). Subsidy-related activities to remain separate. Family Support Services (#27) - specific components to be set up separately from CCR&R. (F)

PFC Resource Center separated into two separate components/activities.

Unallocated funds remaining from CC Public Library. A portion of the funds went to DPIL, ROR and ABCD. The remainder of \$49,750 was allocated on a one-time basis to other activities in FY 17/18.

New activity proposal for FY 18/19.

Planning, & Evaluation and Program Monitoring will be housed under one activity.

**Planning and Evaluation Committee Recommendations
Meeting of March 13, 2018**

ACTION

A. Allocation Overview

1. From August to October, P&E discussed year-end evaluation findings, refined planning assumptions and priorities and addressed the changes to the plan for the next three-year cycle. The Board approved 2018-2021 Strategic Plan in October.
2. Two pre-proposal conferences for prospective bidders on the 2018-2021 Smart Start Application Request for Proposals were held on October 12 and November 9.
3. Grants were due December 11. During the proposal development period, on-site, telephone, and email technical assistance was provided. The Smart Start Grant request:
 - a. SS Service Allocation Dollars - \$6,278,890
 - b. SS Grant Request - \$6,634,953
 - c. Over \$356,063
4. P&E invited other community volunteers to the Allocation Process. 24 community members stepped up with 75% participating in the allocation process for the first time. 20% of participants were Board members.
5. Three meetings, each 3 hours in length, were held. (1/9, 2/13, 3/13) totaling 369 volunteer hours valuing \$8,383.68.

B. Allocation Rubric Scores*

All applications were evaluated by an independent committee of community member using the Smart Start Allocation Rubric. The rubric assessed **the level of alignment to PFC Strategic Plan**. The matrix below shows the level of alignment to PFC Strategic Goals and Objectives for each applicant.

100% – 85% - indicates <u>strong</u> alignment to Strategic Plan, should be recommended for funding	84% – 60% - indicates <u>moderate</u> alignment to Strategic Plan, should be consider for funding	59% or lower – indicates <u>weak</u> alignment to Strategic Plan, should not be considered funding unless documentation that a special population is being negatively impacting
<ol style="list-style-type: none"> 1. Planning, Monitoring & Evaluation – 97% 2. Child Care Resource and Referral (CCR&R) – 94% 3. Community Engagement & Development – 94% 4. Family Connect*– 91% 5. Assuring Better Child Health and Development (ABCD) – 88% 6. DSS Child Care Subsidy (TANF) – 88% 7. Spainhour-Subsidized Child Care – 85% 8. WAGE\$ - 85% 	<ol style="list-style-type: none"> 1. Parents for Higher Education Subsidy (TANF) – 79% 2. Family Resource Center (FRC) – 79% 3. All Children Excel (ACE) – 76% 4. PFC Child Care Subsidy (TANF) & (Non-TANF) - 73% 5. Autism Circle of Parent Support Program – 73% 6. Kindermusik – 73% 7. Reach Out and Read (ROR) – 67% 	Child Passenger Safety Car Seats Program – 45%

C. Early Care And Education (ECE) Allocation Panel*

1. **Team Members:** Deborah Teasley (chair), Kandy Cox, Sue Godwin-Baker, Mary Lanier, Kenneth Lawhead, Doris Taitague
2. **Funding Summary:** ECE Service Dollar Level is \$5,023,112 or 80% of Service Dollars (\$6,278,890). PFC will continue to fund EC&E subsidy at a higher percentage than the 39% mandate. EC&E subsidy is \$3,161,557 or 51% of the total service allocation. The EC&E quality is \$1,861,555 or 29% of the total service allocation.
3. **Recommendations:**
 - a. Fund PFC Child Care Subsidy at requested amount of \$366,368.
 - b. Fund DSS Child Care Subsidy TANF at requested amount of \$2,230,306.
 - c. Fund Parents for Higher Education Subsidy (TANF) \$207,260 and not at request amount of \$307,260.

- d. Fund PFC Child Care Subsidy Admin Non-TANF at \$35,150 and not at the requested amount of \$35,450.
- e. Fund DSS Child Care Subsidy Admin Non-TANF at \$159,807 and not at the requested amount of \$178,424.
- f. Fund Parents for Higher Education Subsidy Admin (Non-TANF) at \$11,450 and not at the requested amount of \$36,050.
- g. Fund PFC Child Care Subsidy Non-TANF at \$59,500 and not at the requested amount of \$60,000.
- h. Fund Spainhour Subsidized Child Care (Non-TANF) at the requested amount of \$91,716.
- i. Fund Child Care Resource and Referral at \$1,432,792 and not at the requested amount of \$1,445,042.
- j. Fund Kindermusik at \$57,209 and not at the requested amount of \$65,557.
- k. Fund WAGE\$ at \$371,554 and not at the requested amount of \$450,000.

D. Family Support And Health Allocation Panel*

- 1. **Team Members:** Amy Cannon (Chair), Julie Aul, Elise Chung, Robin Deaver, Alana Hix, Steven King, Mary McCoy
- 2. **Funding Summary:** Family Support/Health is \$439,523 or 7% of the total service allocation 7% of Family/Health Support Service Dollars is \$439,523
- 3. **Recommendations:**
 - a. Fund Assuring Better Child Health & Development at \$92,238 and not at the requested amount of \$93,502,
 - b. Fund All Children Excel at \$180,785 and not at the requested amount of \$198,825,
 - c. Fund Autism Circle of Parent Support Program at the requested amount of \$45,000.
 - d. Fund Family Connect at \$100,000 and not at the requested amount of \$110,000,
 - e. Fund Child Passenger Safety Car Seat at \$5,000 and not at the requested amount of \$15,000. This amount serves as a bridge to convene, coordinate, and collaborate with other organizations who provide child passenger safety car seats services as a beginning of a more comprehensive, coordinated strategy.
 - f. Fund Reach Out and Read at \$16,500 and not at the requested amount of \$32,859.

E. System Support Allocation Panel*

- 1. **Team Members:** Carl Mitchell (Chair), Albert Brunson, Angela Crosby, Erica Little, Jerome Scott, Lynn Greene
- 2. **Funding Summary:** System Support is \$816,255 or 13% of the total service allocation.
- 3. **Recommendations:**
 - a. Fund Family Resource Center at \$130,144 and not at the requested amount of \$133,502,
 - b. Fund Community Engagement and Development at \$210,886 and not at the requested amount of \$241,105.
 - c. Fund Program Monitoring and Evaluation at the requested amount of \$475,225.

F. Programmatic Changes*

- 1. Name changes for the following programs
 - a. ~~FTCC CC Scholarship~~ Parents for Higher Education Subsidy (TANF)
 - b. PFC Child Care Subsidy (TANF)
 - c. Spainhour/Child Play Subsidized Child Care
 - d. ~~FTCC CC Scholarship/Admin.~~ Parents for Higher Education Subsidy Admin
 - e. Autism O&R Service Circle of Parent Support Program
 - f. Community Engagement & Resource Development
 - g. ~~Evaluation, Planning and Accountability~~ Planning, Monitoring & Evaluation
- 2. Required Contract Activity Description Templates for
 - a. DSS Child Care Subsidy (TANF)
 - b. FTCC Parents for Higher Education Subsidy (TANF)
 - c. PFC Child Care Subsidy (TANF)
 - d. PFC Child Care Subsidy (Non-TANF)
 - e. Spainhour Subsidized Child Care
- 3. Outcomes for each purpose service code (PSC) are highly recommended and in some cases NCPD are marked as required. The recommendation is to treat the NCPD recommendation as required for grantees. Exception will be made on a case by case by Planning and Evaluation Committee.
- 4. All activities aligned with an EC Profile indicator and phase out the PBIS indicators this year.



Community Child Abuse Prevention Plan

Vision Statement

Cumberland County is a safe and stable community, where children are nurtured and families thrive.

Mission Statement

Educate, empower, and support families so they are able to provide nurturing homes for their children.

Goals

1. Build the capacity of parents and prevention partners to understand, deliver, evaluate and advocate for the prevention of child abuse and neglect.
2. Cultivate beneficial prevention-focused partnerships to create a shared language, build efficiency and extend reach.

Actionable Cross-Cutting Strategies for Large-Scale Progress

- Build nurturing community bringing coherence, sustainability, and consistently higher performance.
- Cultivate expanded prevention-focused partnerships to implement a shared vision, engage in shared action, and strengthen networks and partnerships.
- Focus on protective factors in families so that all children who live here will have the safe, stable, nurturing environment they deserve.
- Influence community with a continuum of prevention evidence-based or evidence-informed strategies at the societal, community, family and individual levels.
- Network with prevention partners in all sectors of the community to embrace the role they can play to strengthen families and keep children safe.
- Act collectively to maximize the effectiveness of prevention efforts to ensure optimal child development, increased family strengths, a responsive service system and a decrease in child abuse and neglect.

Outputs

- # organizations will sign resolution of support for *Community Child Abuse Prevention Plan* by November 20, 2018
- # individuals in Cumberland County will review 1-hour screening of movie – *Resilience* to educate on Educate and motivate key stakeholders on ACEs, and resilience by June 30, 2019
- # individuals from # organizations in Cumberland County will receive up to 14 hours of *Protective Factors Training* by June 30, 2019
- A set of at least # community indicators of child and family well-being in # domains and # sub-domains will be collected by November 20, 2018
- Approximately # teams of four (28-32 individuals) made up of parent leaders (2) and local agency staff (2) will participate in *Parent Café Training Institute* by June 30, 2018
- # individuals from # organizations in Cumberland County will receive *Community Resiliency Model Training* by June 30, 2019
- # Parent Cafés will reach # parents to have their own conversations about keeping their families strong through the Protective Factors by June 30, 2019

Short-term Outcomes (3 years) [2021]

- *Family Connect Universal Home Visiting Program* for all newborns will be established

Intermediate-Term Outcomes (5 years) [2023]

- A tipping point of adults viewing the Resiliency Screening will be reached
- Increase Family Functioning/Resiliency
- Increase Social Emotional Support
- Increase Concrete Support
- Increase Child Development/Knowledge of Parenting
- Increase Social and Emotional Competence of Your Children

Long-Term Outcomes (10-15 years) [2028 -2033]

SOAR (Strengths in Overcoming Adversity thru Resiliency) % by30, decrease child abuse and neglect in Cumberland County % by the year 2030.



Community Child Abuse Prevention Plan Resolution of Support

WHEREAS, multiple factors cause community problems; therefore, efforts to affect behavioral, environmental, and social change must be collaborative and multidimensional;

WHEREAS, adverse childhood experiences (ACEs) are traumatic experiences, such as abuse, neglect and household dysfunction, and can result in toxic stress and have a profound effect on a child’s developing brain and body;

WHEREAS, protective factors serve as a buffer to prevent families from becoming “at risk” for abuse and neglect;

WHEREAS, multiple agencies provide services, resources and supports to parents, children and other family members;

WHEREAS, collaboration across governmental jurisdictions and across the public, private, and non-profit sectors is needed to reinforce one another’s work and investments;

WHEREAS, we can choose a course for change that will lead to the mutually reinforcing outcomes of optimal child development, increased family strengths, a responsive service system and a decrease in child abuse and neglect;

WHEREAS, there is a network of prevention partners ensuring access to evidence-based/informed prevention programs for children and their families all along the age continuum;

WHEREAS, our Community Child Abuse Prevention Plan is framed around Sound Science, Strong Families, and Stronger Services;

AND WHEREAS, the plan steers the efforts of prevention partners to be used as a vehicle for promoting community dialogue, problem-solving and planning at the local level;

NOW, THEREFORE, BE IT RESOLVED _____ hereby endorses the Community Child Abuse Prevention Plan.

ENDORSED this the ____ day of _____ [MONTH], 2018.

Signed:

PARTNERSHIP FOR CHILDREN OF CUMBERLAND COUNTY, INC.

FINANCIAL SUMMARY - WHAT YOU NEED TO KNOW

Board Responsibility

The review of the financial statements is the responsibility of the Committee and Board Members of PFC.

The detailed financial reports have been provided to you via email and will be provided electronically during the meeting.

February 28, 2018

1 Balance Sheet

- a. The cash balances; investments and liabilities are at the anticipated amounts and are sufficient for the current needs.

2 Smart Start Grant

- a. PFC's Smart Start grant budgets are reflected at full allocation effective 07-01-2017
- b. All Smart Start funds are now in contract.

3 NC Pre-Kindergarten Grant

- a. PFC is in full contract with DCDEE effective 07-01-2017.
- b. The total grant is now \$8,578,375 and currently consists of \$8,410,172 of state funds and \$168,203 of federal funds. The additional amount is for federal NC Pre-K CCDF Quality funds effective 9-1-2017 through 6-30-2018.
- c. Due to the amount of these federal funds, the Partnership will again be audited extensively for fiscal responsibility and federal compliances, i.e. an A-133 audit since we are anticipating to have at least \$750,000 in federal expenditures for the fiscal year.
- d. All budgets and expenditures are at the expected percentages at the month end.

4 DCDEE - Region 5 Grants

- a. PFC's three Region 5 grants are in contract effective 07-01-17.
- b. All budgets and expenditures are at the expected percentages at the month end.

5 All Funding Sources

- a. The cash balance at month-end is as projected and is sufficient for the requirements of the upcoming month.
- b. The NC Pre-K reimbursements from DCDEE are sometimes received later than anticipated which causes the reimbursements to providers to be delayed.

6 Unrestricted State Revenues (USR)

- a. The goal is to continue to use these funds only when other funding streams cannot be used or is not available.
- b. Some investment funds may ***need to be converted to operating cash during this fiscal yearend*** to cover the current and the anticipated shortfall as projected.
- c. In March 2017, the First Citizens Bank CD matured at \$249,522.08, including interest, and was deposited into the Partnership's main checking account until future investment decisions are made by the Investment Committee.
- d. In March 2017, the First South Bank Money Market account of \$243,587.60, including interest, was deposited into the Partnership's main checking account until future investment decisions are made by the Investment Committee.
- e. \$26,000 plus \$22,000 of the funds from items 6 e. and 6 f. above will remain in the Partnership's main checking account to assist in filling the shortfall in the operating funds portion of the USR funding stream. Any additional amounts will be determined at a later date by the Investment Committee.
- f. In October 2017, a check for \$443,000 was made payable to PNC Bank to move funds from the Partnership's main checking account until future investment decisions are made by the Investment Committee.
The \$443,000 consisted of \$429,000 of USR funds and \$14,000 of interest income funds and was deposited into the PNC Bank on November 9, 2017.

**PARTNERSHIP FOR CHILDREN OF CUMBERLAND COUNTY, INC.
FINANCIAL SUMMARY - WHAT YOU NEED TO KNOW**

Board Responsibility

The review of the financial statements is the responsibility of the Committee and Board Members of PFC.

The detailed financial reports have been provided to you via email and will be provided electronically during the meeting.

February 28, 2018

7 Cash and In-kind Report

- a. The 19% match amount reflected on the monthly report is reflected at 100% of the full allocation.
- b. PFC's Leadership Team, staff and Board members will continue to discuss and implement strategies to make up our potential short-fall to meet our match requirement. PFC did not meet last year's match requirement which was also at 19%.
- c. Since the 19% required match was not met for the FY ended June 30, 2017, there will be no contribution to the PFC endowment.
- d. Since the 19% required match was not met for the FY ended June 30, 2017, PFC will not be eligible to apply for additional grants with NCPC.
- e. Of the required \$1,253,751 match, we are required to report at least 13% in cash match. At the end of FY2016-2017, PFC exceeded that goal and projects to exceed the cash goal at the end of the 2017-18 fiscal year.
- f. **The actual shortfall was \$34,753.39 for FY2016-2017.**

PARTNERSHIP FOR CHILDREN OF CUMBERLAND COUNTY, INC.

Cash & In-Kind Contributions Report
Fiscal Year 2017/2018

Total Smart Start Allocation:	\$ 6,598,689.00
Target Cash & In-Kind Required (19%):	\$ 1,253,750.91
Target Cash Required (≥13%):	\$ 857,829.57
Target In-Kind Required (±6%):	\$ 395,921.34

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CASH DONATIONS		December	January	February	Y-T-D
Cash Donations - In-House					
Board & Committee Donations	501-4410	\$ 100.00	\$ 50.00	\$ 65.00	\$ 840.00
Staff Donations	501-4410	\$ 170.00	\$ -	\$ -	\$ 170.00
Donations - General Admin Operations	501-4410	\$ -	\$ 25.00	\$ 57.04	\$ 2,573.96
Donations - General CCR&R	501-4410	\$ -	\$ -	\$ -	\$ 400.00
Donations - Reach Out & Read	501-4410	\$ -	\$ -	\$ -	\$ -
Donations - General PD&C	501-4410	\$ -	\$ -	\$ -	\$ -
Donations - General PFCRC	501-4410	\$ -	\$ -	\$ -	\$ -
Donations - PD&C KidStuff	501-4410	\$ -	\$ -	\$ -	\$ -
Donations - CCR&R Angel Tree	501-4410	\$ 350.00	\$ -	\$ -	\$ 1,480.00
Donations - Vending Machine Proceeds	515-4410	\$ 46.48	\$ 33.62	\$ 21.41	\$ 346.49
Donations - PFC Annual Engagements	531-4410	\$ -	\$ -	\$ -	\$ -
Donations - Forward March Conference	806-4830	\$ -	\$ -	\$ -	\$ 17,267.00
Donations - Fundraising Events 2017	820-4611	\$ 2,500.00	\$ -	\$ -	\$ 3,000.00
Donations - Fundraising Events 2018	820-4611	\$ 2,500.00	\$ 8,000.00	\$ 13,600.00	\$ 25,150.00
Donations - Fundraising Event Sales 2017	820-4601	\$ -	\$ -	\$ -	\$ -
Donations - Fundraising Event Sales 2018	820-4601	\$ -	\$ -	\$ 1,200.00	\$ 1,200.00
Program Income - Rent from Resource Center I	801-4824	\$ 3,960.92	\$ 3,306.36	\$ 3,970.29	\$ 29,162.72
Program Income - Conference Room Rental RCI	801-4762	\$ 150.00	\$ -	\$ -	\$ 2,050.00
Program Income - Nurturing Parenting Workshop Ft	801-4836	\$ -	\$ -	\$ -	\$ -
Program Income - Tenant Copier Fees	801-5311	\$ 66.78	\$ -	\$ -	\$ 469.23
Program Income - CCR&R Workshop Fees	801-4823	\$ 525.00	\$ 2,020.00	\$ 2,890.00	\$ 12,240.00
Program Income - CCR&R Resource Library Fees	801-4823	\$ 20.80	\$ 25.00	\$ 80.45	\$ 1,100.96
Program Income - PDCC IACET Workshop Fees	801-4822	\$ 135.00	\$ 200.00	\$ 475.00	\$ 2,370.00
Program Income - PD&C Services	801-4834	\$ -	\$ -	\$ -	\$ -
Program Income - PD&C KidStuff	801-4834	\$ -	\$ -	\$ -	\$ -
Program Income - Summer Camp Expo	801-4833	\$ -	\$ -	\$ -	\$ -
Program Income - Other	801-4827	\$ -	\$ -	\$ -	\$ -
Program Income - Rent from Resource Center II	812-4761	\$ 4,166.66	\$ 4,166.66	\$ 4,166.66	\$ 33,333.28
Cost Reduction - Car Seat Program Parent Fees	144-6902	\$ 280.00	\$ 220.00	\$ 300.00	\$ 2,440.00
Quality Enhancement - Cash Matches	144-6904	\$ -	\$ -	\$ -	\$ -
Cost Reduction - Unlimited Online Learning	144-5317	\$ -	\$ -	\$ -	\$ -
		\$ -	\$ -	\$ -	\$ -
Total Cash Donations - In-House		\$ 14,971.64	\$ 18,046.64	\$ 26,825.85	\$ 135,593.64

Cash Donations - Direct Service Providers				
1st Quarter (July - September)				\$ 26,089.67
2nd Quarter (October - December)	\$ 13,588.17			\$ 13,588.17
3rd Quarter (January - March)		\$ -	\$ -	\$ -
4th Quarter (April - June)				\$ -
PFC Child Care Subsidy Parent Fees	\$ -	\$ 21,444.07		\$ 21,444.07
Total Cash Donations - Direct Service Providers	\$ 13,588.17	\$ 21,444.07	\$ -	\$ 61,121.91

TOTAL CASH DONATIONS	\$ 28,559.81	\$ 39,490.71	\$ 26,825.85	\$ 196,715.55
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2

GRANTS					
Carmax Foundation (100% Private Grants)	536-4426	\$ -	\$ -	\$ 10,000.00	\$ 10,000.00
WalMart Foundation (100% Private Grants)	533-4423	\$ -	\$ -	\$ -	\$ -
Raising A Reader (100% Private Grants)	534-4420	\$ -	\$ -	\$ -	\$ -
Kohl's Corporate Grants (100% Private Grants)	518-4420	\$ -	\$ -	\$ -	\$ -
Cumberland Community Foundation (100% Private	535-4425	\$ -	\$ (7,736.80)	\$ -	\$ 2,263.20
TOTAL GRANTS		\$ -	\$ (7,736.80)	\$ 10,000.00	\$ 12,263.20

3.2%

IN-KIND DONATIONS					
In-Kind Donations - In-House					
In-Kind Donations - Volunteer Time		\$ 7,298.80	\$ 1,590.40	\$ 2,039.12	\$ 41,236.12
Discounts on Materials - Kaplan		\$ -	\$ -	\$ -	\$ 152.52
Discounts on Materials - Brame		\$ -	\$ -	\$ -	\$ -
Discounts on Materials - Discount School Supply		\$ -	\$ -	\$ -	\$ 161.58
Discounts on Materials - Lakeshore		\$ -	\$ -	\$ -	\$ 109.96
Discounts on Software - Techsoup Stock		\$ -	\$ -	\$ -	\$ 85,863.00
Donations - Other In-Kind		\$ 49.95	\$ -	\$ 3,591.40	\$ 4,609.35
PFC Staff Donations - Supplies and Mileage		\$ -	\$ -	\$ 148.62	\$ 169.82
PFC Board Member Donations - Supplies and Mileage		\$ -	\$ -	\$ -	\$ -
		\$ -	\$ -	\$ -	\$ -
Total In-Kind Donations - In-House		\$ 7,348.75	\$ 1,590.40	\$ 5,779.14	\$ 132,302.35

In-Kind Donations - Direct Service Providers				
1st Quarter (July - September)				\$ 17,499.06
2nd Quarter (October - December)	\$ 25,178.75			\$ 25,178.75
3rd Quarter (January - March)		\$ -	\$ -	\$ -
4th Quarter (April - June)				\$ -
Total In-Kind Donations - Direct Service Providers	\$ 25,178.75	\$ -	\$ -	\$ 42,677.81

TOTAL IN-KIND DONATIONS	\$ 32,527.50	\$ 1,590.40	\$ 5,779.14	\$ 174,980.16
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2.7%

3

GRAND TOTAL	\$ 61,087.31	\$ 33,344.31	\$ 42,604.99	\$ 383,958.91
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5.8%

TARGET REMAINING	\$ (869,792.00)
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4

- 1 - Current Month Reporting
- 2 - YTD Cash Reported
- 3 - YTD In-Kind Reported
- 4 - Amount remaining to reach target

* This grant was not fully spent and \$7736.80 was reverted to the funder.

PARTNERSHIP FOR CHILDREN OF CUMBERLAND COUNTY, INC.

Cash & In-Kind Contributions Report

Fiscal Year 2017/2018

SUMMARY

Total Smart Start Allocation:	\$	6,598,689.00
Target Cash & In-Kind Required (19%):	\$	1,253,750.91

YTD In-House Unrestricted Cash	\$	64,690.65
YTD In-House Program Income	\$	80,726.19
YTD In-House Parent/Grantee Fees	\$	2,440.00
YTD In-House Volunteers	\$	41,236.12
YTD In-House Discounts/Other In-Kind	\$	90,896.41
YTD Staff/Board In-Kind	\$	169.82
YTD PFC Subsidy Parent Fees	\$	21,444.07
YTD DSP Cash	\$	39,677.84
YTD DSP In-Kind	\$	42,677.81
YTD Total	\$	383,958.91

PROJECTIONS

Actual Cash Match Reported YTD 2018	\$	208,978.75
Actual In-Kind Match Reported YTD 2018	\$	174,980.16
Anticipated In-House Cash Match Mar - Jun	\$	100,000.00
Anticipated In-House In-Kind Match Mar - Jun	\$	60,000.00
Anticipated DSP Cash Match Mar - Jun	\$	500,000.00
Anticipated DSP In-Kind Match Mar - Jun	\$	50,000.00
Total Anticipated FY17/18	\$	1,093,958.91

Anticipated Actual Match Requirement*	\$	1,253,750.91
Projected Shortfall*	\$	(159,792.00)

Return of Organization Exempt From Income Tax

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

2016
Open to Public Inspection

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.

A For the 2016 calendar year, or tax year beginning 07/01/16, and ending 06/30/17

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization PARTNERSHIP FOR CHILDREN OF CUMBERLAND COUNTY, INC.		D Employer identification number 56-1845926
	Doing business as		E Telephone number 910-867-9700
	Number and street (or P.O. box if mail is not delivered to street address) 351 WAGONER DRIVE SUITE 200		
	City or town, state or province, country, and ZIP or foreign postal code FAYETTEVILLE NC 28303		G Gross receipts \$ 13,313,019
F Name and address of principal officer: MARY SONNENBERG SAME AS ABOVE			H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. (see instructions)
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			
J Website: WWW.CCPFC.ORG			H(c) Group exemption number ▶
K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶			L Year of formation: 1993 M State of legal domicile: NC

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: THE PARTNERSHIP'S MISSION IS TO BE THE DRIVING FORCE TO ENGAGE PARTNERS TO ACHIEVE LASTING POSITIVE OUTCOMES FOR ALL CHILDREN, BEGINNING AT BIRTH.	
	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)	28
	4 Number of independent voting members of the governing body (Part VI, line 1b)	18
	5 Total number of individuals employed in calendar year 2016 (Part V, line 2a)	72
	6 Total number of volunteers (estimate if necessary)	444
	7a Total unrelated business revenue from Part VIII, column (C), line 12	0
7b Net unrelated business taxable income from Form 990-T, line 34	0	
Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year: 13,039,825 Current Year: 12,670,893
	9 Program service revenue (Part VIII, line 2g)	299,274 319,974
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	3,442 8,093
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	61,174 106,067
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	13,403,715 13,105,027
	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	344,011 184,020
Expenses	14 Benefits paid to or for members (Part IX, column (A), line 4)	0
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	3,181,671 2,782,813
	16a Professional fundraising fees (Part IX, column (A), line 11e)	0
	b Total fundraising expenses (Part IX, column (D), line 25) ▶	0
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	10,196,632 10,124,139
	18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	13,722,314 13,090,972
19 Revenue less expenses. Subtract line 18 from line 12	-318,599 14,055	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Current Year: 3,514,109 End of Year: 3,579,481
	21 Total liabilities (Part X, line 26)	19,684 71,001
	22 Net assets or fund balances. Subtract line 21 from line 20	3,494,425 3,508,480

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	DRAFT	Date		
	Type or print name and title				
Paid Preparer Use Only	Print/Type preparer's name PAMELA W. VILLEGAS, CPA	Preparer's signature	Date 03/14/18	Check <input type="checkbox"/> if self-employed	PTIN
	Firm's name ▶ COMSTOCK & VILLEGAS, CPAS, PA	Firm's EIN ▶			
	Firm's address ▶ 2545 RAVENHILL DR STE 106 FAYETTEVILLE, NC 28303	Phone no. 910-483-6077			

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

1 Briefly describe the organization's mission:

THE PARTNERSHIP'S MISSION IS TO BE THE DRIVING FORCE TO ENGAGE PARTNERS TO ACHIEVE LASTING POSITIVE OUTCOMES FOR ALL CHILDREN, BEGINNING AT BIRTH.

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 No

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? Yes No

If "Yes," describe these changes on Schedule O.

4 Describe the organization's program service accomplishments for each of its three largest program services, measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to other organizations, the total expenses, and revenue, if any, for each program service reported.

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4a (Code:) (Expenses \$ 2,009,953 including grants of \$ 168,786) (Revenue \$)

CHILD CARE & EDUCATION QUALITY (CONTINUED ON SCHEDULE O) - PROFESSIONAL DEVELOPMENT, QUALITY ENHANCEMENT AND TECHNICAL ASSISTANCE ENCOURAGED EARLY CARE AND EDUCATION PROFESSIONALS TO CONTINUE THEIR PROFESSIONAL GROWTH AND AWARDED THEM PROFESSIONAL DEVELOPMENT SUPPLEMENTS. THE PARTNERSHIP ADVANCED 126 DIRECT TEACHING STAFF TO INCREASE HIGHER EDUCATION BY PROVIDING SUPPORT FOR COLLEGE-LEVEL COURSE CREDIT. 89% OF PARTICIPATING TEACHERS EARNED AT LEAST 3 SEMESTER HOURS IN EARLY CHILDHOOD EDUCATION WITH AT LEAST A 2.0 GRADE POINT AVERAGE. 1,053 DIRECT TEACHING STAFF ATTENDED NON-CREDIT BASED TRAINING OR WORKSHOPS. 264 CHILD CARE PROFESSIONALS REPRESENTING 129 CHILD CARE FACILITIES WERE ISSUED EDUCATION-BASED SALARY SUPPLEMENTS THROUGH THE WAGES PROGRAM.

4b (Code:) (Expenses \$ 9,026,679 including grants of \$ 7,905) (Revenue \$)

CHILD CARE AND EDUCATION AFFORDABILITY (CONTINUED ON SCHEDULE O) - SUBSIDIES OFFSET THE COST OF EARLY LEARNING PROGRAMS FOR 978 CHILDREN FROM LOW-INCOME WORKING FAMILIES. 88% OF CHILDREN WHOSE FAMILIES RECEIVED HELP PAYING FOR EARLY CARE AND EDUCATION ATTENDED 4-STAR AND 5-STAR PROGRAMS, WITH AN AVERAGE RATING OF 4.40 STARS. THE NC PRE-K (PRE-KINDERGARTEN) PROGRAM OFFERS CHILDREN A HIGH-QUALITY PRESCHOOL EXPERIENCE AT NO CHARGE TO PARENTS, WITH SMOOTHER PRE-K TO KINDERGARTEN TRANSITIONS. THE PROGRAM IS A STATE-FUNDED, COMMUNITY-BASED PRE-KINDERGARTEN PROGRAM DESIGNED TO PROVIDE 4-YEAR-OLD CHILDREN, WHO MAY NOT OTHERWISE BE SERVED, WITH A VALUABLE EDUCATIONAL EXPERIENCE. THIS PART-DAY PROGRAM PROVIDES YOUNG CHILDREN WITH ACCESS TO A SPECIFIC

4c (Code:) (Expenses \$ 348,857 including grants of \$ 5,414) (Revenue \$)

FAMILY SUPPORT (CONTINUED ON SCHEDULE O) - 29 PARENTS/GUARDIANS PARTICIPATED IN HOME VISITS. 23 PARENTS/GUARDIANS OF CHILDREN WITH AUTISM SPECTRUM DISORDERS WERE CONNECTED WITH OTHERS BY PARTICIPATING IN AN ONGOING PARENT SUPPORT GROUP. THE PARTNERSHIP ENHANCED THE HOME LITERACY ENVIRONMENT BY PROVIDING BOOKS TO 1,424 AT-RISK YOUNG CHILDREN THROUGH THE MEDICAL PRACTICE-BASED REACH OUT AND READ PROGRAM. IN ADDITION, THE PARTNERSHIP INCREASED 1,241 PARENTS' KNOWLEDGE IN HOW TO IDENTIFY QUALITY CHILD CARE BY PROVIDING BEST PRACTICE CHILD CARE CONSULTATION GROUNDED IN A PARENTAL CHOICE MODEL. THE PARTNERSHIP FOR CHILDREN RESOURCE CENTER PROVIDED A HUB FOR ORGANIZATIONS PROVIDING PROGRAMS TO PATRONS TO STRENGTHEN FAMILIES THROUGH PARENTING SUPPORT, INFORMATION AND REFERRAL,

4d Other program services (Describe in Schedule O.)

(Expenses \$ 941,450 including grants of \$ 1,915) (Revenue \$)

4e Total program service expenses 12,326,939

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>	X	
2 Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> (see instructions)?		X
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>		X
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>		X
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? <i>If "Yes," complete Schedule C, Part III</i>		X
6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</i>		X
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>		X
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>		X
9 Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i>		X
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>	X	
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>	X	
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>		X
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>		X
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>		X
e Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>	X	
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>	X	
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>	X	
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>		X
13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>		X
14a Did the organization maintain an office, employees, or agents outside of the United States?		X
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>		X
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? <i>If "Yes," complete Schedule F, Parts II and IV</i>		X
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If "Yes," complete Schedule F, Parts III and IV</i>		X
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I (see instructions)</i>		X
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>	X	
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>		X

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Part IV Checklist of Required Schedules (continued)

	Yes	No
20a Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>		X
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		
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? <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 or for domestic individuals 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), 501(c)(4), and 501(c)(29) 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? <i>If "Yes," complete Schedule L, Part II</i>		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, Parts 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? Note. All Form 990 filers are required to complete Schedule O.	X	

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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 table with columns for question numbers (1a-14b), Yes/No checkboxes, and numerical responses (73, 0, 72).

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Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes 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.		
	1a	28	
b	Enter the number of voting members included in line 1a, above, who are independent		
	1b	18	
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?		
10b			
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	
12c		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 If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).	X	
15b		X	
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?		
16b			

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed NC

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, address, and telephone number of the person who possesses the organization's books and records:

MARIE CLARK 351 WAGONER DRIVE, STE. 200
 FAYETTEVILLE NC 28303 910-867-9700

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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.

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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 dotted 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) CHRISTIANA ADEYEMI	0.34									
BOARD MEMBER	0.00	X					0	0	0	
(2) LISA CHILDERS	0.54									
BOARD MEMBER	0.00	X					0	0	0	
(3) JEANNETTE COUNCIL	0.00									
BOARD MEMBER	0.00	X					0	0	0	
(4) HANK DEBNAM	0.43									
BOARD MEMBER	0.00	X					0	0	0	
(5) VAN GUNTER III	1.68									
CHAIR	0.00	X		X			0	0	0	
(6) LORNA RICOTTA	0.44									
BOARD MEMBER	0.00	X					0	0	0	
(7) JULIE AUL	0.57									
BOARD MEMBER	0.00	X					0	0	0	
(8) ROBERT HINES	0.29									
BOARD MEMBER	0.00	X					0	0	0	
(9) PERRY MELTON	4.14									
BOARD MEMBER	0.00	X					0	0	0	
(10) DEBORAH SLEDGE	0.45									
BOARD MEMBER	0.00	X					0	0	0	
(11) JAMES GRAFSTROM	0.28									
BOARD MEMBER	0.00	X					0	0	0	

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted 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			
(12) LARRY KEEN	0.49									
BOARD MEMBER	0.00	X					0	0	0	
(13) CHARLES MORRIS	0.00									
BOARD MEMBER	0.00	X					0	0	0	
(14) WENDY LOWERY	0.34									
SECRETARY	0.00	X		X			0	0	0	
(15) SHARON MOYER	0.63									
SECRETARY	0.00	X		X			0	0	0	
(16) ANGIE MALAVE	0.50									
BOARD MEMBER	0.00	X					0	0	0	
(17) MARCUS HEDGEPEETH	1.32									
TREASURER	0.00	X		X			0	0	0	
(18) CHRIS REY	0.82									
VICE-CHAIR	0.00	X		X			0	0	0	
(19) BRENDA REID-JACKSON	0.00									
BOARD MEMBER	0.00	X					0	0	0	
1b Sub-total										
c Total from continuation sheets to Part VII, Section A							194,503		20,656	
d Total (add lines 1b and 1c)							194,503		20,656	

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2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **0**

	Yes	No
3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual		X
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual		X
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person		X

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation
CUMBERLAND COUNTY SCHOOLS FAYETTEVILLE NC 28302	P.O. BOX 2537 SEE SCHEDULE O	1,453,500
ACTION PATHWAYS, INC. FAYETTEVILLE NC 28314	5135 MORGANTON ROAD SEE SCHEDULE O	875,700
TRINITY CHILD CARE FAYETTEVILLE NC 28311	3727 ROSEHILL ROAD SEE SCHEDULE O	724,162
CHILD CARE NETWORK #109 AND #110 FAYETTEVILLE NC 28304	6905 RAEFORD ROAD SEE SCHEDULE O	651,825
HEAVENLY HAVEN CHILD CARE FAYETTEVILLE NC 28311	P.O. BOX 9605 SEE SCHEDULE O	438,334

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization **23**

Part VIII Statement of Revenue

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

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514	
Contributions, Gifts, Grants and Other Similar Amounts	1a Federated campaigns	1a					
	b Membership dues	1b					
	c Fundraising events	1c					
	d Related organizations	1d					
	e Government grants (contributions)	1e	12,654,672				
	f All other contributions, gifts, grants, and similar amounts not included above	1f	16,221				
	g Noncash contributions included in lines 1a-1f	\$					
	h Total. Add lines 1a-1f		12,670,893				
Program Service Revenue	2a OTHER MISC. PROGRAM REVENUE	Busn. Code	283,916			283,916	
	b WORKSHOPS/LIBRARY FEES		36,058			36,058	
	c						
	d						
	e						
	f All other program service revenue						
	g Total. Add lines 2a-2f		319,974				
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)		8,093			8,093	
	4 Income from investment of tax-exempt bond proceeds						
	5 Royalties						
	6a Gross rents	(i) Real	187,993				
		(ii) Personal					
		b Less: rental exps.	162,902				
	c Rental inc. or (loss)	25,091					
	d Net rental income or (loss)		25,091	19,274		5,817	
	7a Gross amount from sales of assets other than inventory	(i) Securities					
		(ii) Other					
		b Less: cost or other basis & sales exps.					
		c Gain or (loss)					
d Net gain or (loss)							
8a Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18	a	99,319					
	b Less: direct expenses	45,090					
	c Net income or (loss) from fundraising events		54,229				
9a Gross income from gaming activities. See Part IV, line 19	a						
	b Less: direct expenses						
	c Net income or (loss) from gaming activities						
10a 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		Busn. Code					
11a SALES TAX REFUNDS			26,747	26,747			
	b						
	c						
	d All other revenue						
e Total. Add lines 11a-11d			26,747				
12 Total revenue. See instructions.			13,105,027	46,021	0	333,884	

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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

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 domestic organizations and domestic governments. See Part IV, line 21	55,707	55,707		
2 Grants and other assistance to domestic individuals. See Part IV, line 22	128,313	128,313		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	198,166	19,448	178,718	
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	2,079,259	1,820,819	258,440	
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	50,767	37,457	13,310	
9 Other employee benefits	276,019	226,469	49,550	
10 Payroll taxes	178,602	145,355	33,247	
11 Fees for services (non-employees):				
a Management				
b Legal	8,789		8,789	
c Accounting	5,310	1,000	4,310	
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 Schedule O.)				
12 Advertising and promotion	6,136	6,112	24	
13 Office expenses				
14 Information technology				
15 Royalties				
16 Occupancy				
17 Travel	46,002	43,481	2,521	
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	24,188	14,297	9,891	
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	50,978		50,978	
23 Insurance	20,274	9,829	10,445	
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 PURCHASE SVCS/CONTRACTS	8,902,138	8,902,138		
b OTHER CONTRACT SERVICES	288,703	253,022	35,681	
c OTHER COMPUTER EXPENSES	109,789	108,550	1,239	
d TEMPORARY SERVICES	108,321	108,321		
e All other expenses	553,511	446,621	106,890	
25 Total functional expenses. Add lines 1 through 24e	13,090,972	12,326,939	764,033	0
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 <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

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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	733,554	1	1,122,312
	2	Savings and temporary cash investments	242,000	2	
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net	197	4	
	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 instructions). Complete Part II of Schedule L		6	
	7	Notes and loans receivable, net		7	
	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges		9	
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 3,592,545		
	b	Less: accumulated depreciation	10b 1,166,760	2,506,974	10c 2,425,785
	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	31,384	15	31,384
16	Total assets. Add lines 1 through 15 (must equal line 34)	3,514,109	16	3,579,481	
Liabilities	17	Accounts payable and accrued expenses	3,407	17	2,717
	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	16,277	25	68,284
	26	Total liabilities. Add lines 17 through 25	19,684	26	71,001
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	3,422,387	27	3,436,816
	28	Temporarily restricted net assets	40,654	28	40,280
	29	Permanently restricted net assets	31,384	29	31,384
	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	3,494,425	33	3,508,480	
34	Total liabilities and net assets/fund balances	3,514,109	34	3,579,481	

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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	13,105,027
2	Total expenses (must equal Part IX, column (A), line 25)	2	13,090,972
3	Revenue less expenses. Subtract line 2 from line 1	3	14,055
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	3,494,425
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	
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	3,508,480

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 checked="" type="checkbox"/> Cash <input 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 checked="" 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.		X
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.	X	

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Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted 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			
(20) JODY RISACHER	0.21									
BOARD MEMBER	0.00	X						0	0	0
(21) DEBORAH TEASLEY	0.37									
BOARD MEMBER	0.00	X						0	0	0
(22) FRANK TILL	0.00									
BOARD MEMBER	0.00	X						0	0	0
(23) ANGELA CROSBY	0.90									
BOARD MEMBER	0.00	X						0	0	0
(24) SARAH SMITH PITTS	0.24									
BOARD MEMBER	0.00	X						0	0	0
(25) BUCK WILSON	0.42									
BOARD MEMBER	0.00	X						0	0	0
(26) AMY CANNON	0.13									
BOARD MEMBER	0.00	X						0	0	0
(27) LISA HEMSTREET	0.20									
BOARD MEMBER	0.00	X						0	0	0
1b Sub-total										
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)										

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization

	Yes	No
3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual		
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual		
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person		

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation
DRAFT		

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted 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			
(28) MURRAY DUGGINS, JR. BOARD MEMBER	0.00 0.00	X						0	0	0
(29) MARIE CLARK COO	40.00 0.00			X				92,272	0	12,076
(30) EVA HANSEN PRESIDENT	40.00 0.00			X				63,452	0	431
(31) MARY SONNENBERG PRESIDENT	40.00 0.00			X				38,779	0	8,149
1b Sub-total								194,503		20,656
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)										

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization

	Yes	No
3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual		
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual		
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person		

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation
DRAFT		

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization

SCHEDULE A
(Form 990 or 990-EZ)

Public Charity Status and Public Support

OMB No. 1545-0047

2016

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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.

Name of the organization PARTNERSHIP FOR CHILDREN OF CUMBERLAND COUNTY, INC.	Employer identification number 56-1845926
--	---

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 12, 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 (Form 990 or 990-EZ).)
- 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 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:
- 10 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.)
- 11 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 12g.
 - a **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving 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**.
 - 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**.
 - d **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) 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**.
 - e 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.
 - f Enter the number of supported organizations
 - g Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1–10 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
(A)						
(B)						
(C)						
(D)						
(E)						
Total						

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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) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	13,272,578	12,850,971	12,925,517	13,039,825	12,670,893	64,759,784
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	13,272,578	12,850,971	12,925,517	13,039,825	12,670,893	64,759,784
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.						64,759,784

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
7 Amounts from line 4	13,272,578	12,850,971	12,925,517	13,039,825	12,670,893	64,759,784
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	4,133	4,457	857	3,442	8,093	20,982
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 Total support. Add lines 7 through 10						64,780,766
12 Gross receipts from related activities, etc. (see instructions)					12	240,402
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 2016 (line 6, column (f) divided by line 11, column (f))	14	99.97%
15 Public support percentage from 2015 Schedule A, Part II, line 14	15	99.98%
16a 33 1/3% support test—2016. 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 checked="" type="checkbox"/>
b 33 1/3% support test—2015. 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—2016. 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 VI 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—2015. 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 VI 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"/>

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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.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(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) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(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 VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						

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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 2016 (line 8, column (f) divided by line 13, column (f))	15	%
16 Public support percentage from 2015 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2016 (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from 2015 Schedule A, Part III, line 17	18	%

19a 33 1/3% support tests—2016. 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—2015. 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

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

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

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Part IV Supporting Organizations (continued)

		Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?		
a	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?		
b	A family member of a person described in (a) above?		
c	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.		

Section B. Type I Supporting Organizations

		Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.		

Section C. Type II Supporting Organizations

		Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).		

Section 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?		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).		
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.		

Section 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 instructions).		
a	<input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.		
b	<input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.		
c	<input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions).		
2	Activities Test. Answer (a) and (b) below.		
a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.		
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.		
3	Parent of Supported Organizations. Answer (a) and (b) below.		
a	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in Part VI.		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.		

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

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

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	
6	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	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	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).		

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

Section D - Distributions	Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	
4 Amounts paid to acquire exempt-use assets	
5 Qualified set-aside amounts (prior IRS approval required)	
6 Other distributions (describe in Part VI). See instructions.	
7 Total annual distributions. Add lines 1 through 6.	
8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.	
9 Distributable amount for 2016 from Section C, line 6	
10 Line 8 amount divided by Line 9 amount	

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2016	(iii) Distributable Amount for 2016
1 Distributable amount for 2016 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2016 (reasonable cause required-explain in Part VI). See instructions.			
3 Excess distributions carryover, if any, to 2016:			
a			
b			
c From 2013			
d From 2014			
e From 2015			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2016 distributable amount			
i Carryover from 2011 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4 Distributions for 2016 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2016 distributable amount			
c Remainder. Subtract lines 4a and 4b from 4.			
5 Remaining underdistributions for years prior to 2016, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions.			
6 Remaining underdistributions for 2016. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.			
7 Excess distributions carryover to 2017. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a			
b Excess from 2013			
c Excess from 2014			
d Excess from 2015			
e Excess from 2016			

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Part VI **Supplemental Information.** Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

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SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

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.

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

OMB No. 1545-0047

2016

Open to Public Inspection

Name of the organization

PARTNERSHIP FOR CHILDREN OF CUMBERLAND COUNTY, INC.

Employer identification number

56-1845926

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.

Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

Table with 2 columns: (a) Donor advised funds, (b) Funds and other accounts. Rows include: 1 Total number at end of year, 2 Aggregate value of contributions to (during year), 3 Aggregate value of grants from (during year), 4 Aggregate value at end of year, 5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?, 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?

Part II Conservation Easements.

Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

Table with 2 columns: Held at the End of the Tax Year. Rows include: 1 Purpose(s) of conservation easements held by the organization (check all that apply), 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, 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?, 6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year, 7 Amount of expenses incurred in monitoring, inspecting, handling of violations, 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)?, 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.

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

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

Table with 2 columns: Revenue and Assets. Rows include: 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. 1b 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) Revenue included on 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 Revenue included on 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" on 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, for escrow or custodial account liability? Yes No
- b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII

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Part V Endowment Funds.

Complete if the organization answered "Yes" on 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	31,384	31,166	29,732	29,732	25,000
b Contributions		218	1,434		4,732
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	31,384	31,384	31,166	29,732	29,732

- 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 100.00 %
 - c Temporarily restricted endowment %
- The percentages on 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:
- | | Yes | No |
|-----------------------------|-----|----|
| (i) unrelated organizations | X | |
| (ii) related organizations | | X |
| 3b | | |
- b If "Yes" on line 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" on 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		345,000		345,000
b Buildings		3,247,545	1,166,760	2,080,785
c Leasehold improvements				
d Equipment				
e Other				

Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.) 2,425,785

Part VII Investments—Other Securities.

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

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

Part VIII Investments—Program Related.

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

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

Part IX Other Assets.

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

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

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Part X Other Liabilities.

Complete if the organization answered "Yes" on 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) FUNDS DUE TO THE STATE	57,006
(3) TENANT SECURITY DEPOSITS	11,278
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶	68,284

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" on Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements		1	13,296,514
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
a	Net unrealized gains (losses) on investments	2a		
b	Donated services and use of facilities	2b		
c	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII.)	2d	191,487	
e	Add lines 2a through 2d	2e		191,487
3	Subtract line 2e from line 1	3		13,105,027
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b		
c	Add lines 4a and 4b	4c		
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5		13,105,027

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

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

1	Total expenses and losses per audited financial statements		1	13,201,270
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
a	Donated services and use of facilities	2a		
b	Prior year adjustments	2b		
c	Other losses	2c		
d	Other (Describe in Part XIII.)	2d	191,486	
e	Add lines 2a through 2d	2e		191,486
3	Subtract line 2e from line 1	3		13,009,784
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b	81,188	
c	Add lines 4a and 4b	4c		81,188
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5		13,090,972

DRAFT**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.

PART X - FIN 48 FOOTNOTE

THE CUMBERLAND COUNTY PARTNERSHIP IS EXEMPT FROM PAYMENT OF INCOME TAXES UNDER THE PROVISION OF SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE, EXCEPT TO THE EXTENT OF TAXES ON ANY UNRELATED BUSINESS INCOME.

FASB ASC 740 PROVIDES GUIDANCE FOR HOW UNCERTAIN TAX POSITIONS SHOULD BE RECOGNIZED, MEASURED, PRESENTED AND DISCLOSED IN THE FINANCIAL STATEMENTS. FASB ASC 740 REQUIRES THE EVALUATION OF TAX POSITIONS TAKEN OR EXPECTED TO BE TAKEN IN THE COURSE OF PREPARING FINANCIAL STATEMENTS TO DETERMINE WHETHER THE TAX POSITIONS ARE "MORE-LIKELY-THAN-NOT" TO BE SUSTAINED BY THE APPLICABLE TAX AUTHORITY.

THE CUMBERLAND COUNTY PARTNERSHIP DOES NOT BELIEVE THERE ARE ANY UNRECOGNIZED TAX BENEFITS OR COSTS AS OF JUNE 30, 2017. INCOME TAX RETURNS

Part XIII Supplemental Information (continued)

FROM 2013 THROUGH 2016 ARE OPEN TO EXAMINATION BY THE TAX AUTHORITIES.

PART XI, LINE 2D - REVENUE AMOUNTS INCLUDED IN FINANCIALS - OTHER

RENTAL EXPENSES \$ 162,902

REFUND OF PRIOR YEAR GRANT \$ 28,584

ROUNDING DIFFERENCE \$ 1

PART XII, LINE 2D - EXPENSE AMOUNTS INCLUDED IN FINANCIALS - OTHER

RENTAL EXPENSES \$ 162,902

REFUND OF PRIOR YEAR GRANT \$ 28,584

PART XII, LINE 4B - EXPENSE AMOUNTS INCLUDED ON RETURN - OTHER

DEPRECIATION \$ 81,188

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**SCHEDULE G
(Form 990 or 990-EZ)**

Supplemental Information Regarding Fundraising or Gaming Activities

OMB No. 1545-0047

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

2016

Department of the Treasury
Internal Revenue Service

▶ Attach to Form 990 or Form 990-EZ.

Open to Public Inspection

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

Name of the organization **PARTNERSHIP FOR CHILDREN OF
CUMBERLAND COUNTY, INC.**

Employer identification number
56-1845926

Part I Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.

1 Indicate whether the organization raised funds through any of the following activities. Check all that apply.

- a Mail solicitations
- b Internet and email solicitations
- c Phone solicitations
- d In-person solicitations
- e Solicitation of non-government grants
- f Solicitation of government grants
- g Special fundraising events

2a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? Yes No

b If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
Total						

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3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

Part II Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

	(a) Event #1 <u>SOIREE/OTHERS</u> (event type)	(b) Event #2 _____ (event type)	(c) Other events <u>NONE</u> (total number)	(d) Total events (add col. (a) through col. (c))
Revenue				
1 Gross receipts	99,319			99,319
2 Less: Contributions				
3 Gross income (line 1 minus line 2)	99,319			99,319
Direct Expenses				
4 Cash prizes				
5 Noncash prizes				
6 Rent/facility costs	11,584			11,584
7 Food and beverages	53			53
8 Entertainment	15,694			15,694
9 Other direct expenses	17,759			17,759
10 Direct expense summary. Add lines 4 through 9 in column (d)				45,090
11 Net income summary. Subtract line 10 from line 3, column (d)				54,229

Part III Gaming. Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

	(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
Revenue				
1 Gross revenue				
Direct Expenses				
2 Cash prizes				
3 Noncash prizes				
4 Rent/facility costs				
5 Other direct expenses				
6 Volunteer labor	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	
7 Direct expense summary. Add lines 2 through 5 in column (d)				
8 Net gaming income summary. Subtract line 7 from line 1, column (d)				

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9 Enter the state(s) in which the organization conducts gaming activities:
 a Is the organization licensed to conduct gaming activities in each of these states? Yes No

b If "No," explain:

10a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year? Yes No
 b If "Yes," explain:

- 11 Does the organization conduct gaming activities with nonmembers? Yes No
- 12 Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed to administer charitable gaming? Yes No

- 13 Indicate the percentage of gaming activity conducted in:

a The organization's facility	13a	%
b An outside facility	13b	%

14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name ▶

Address ▶

- 15a Does the organization have a contract with a third party from whom the organization receives gaming revenue? Yes No
- b If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ and the amount of gaming revenue retained by the third party ▶ \$
- c If "Yes," enter name and address of the third party:

Name ▶

Address ▶

16 Gaming manager information:

Name ▶

Gaming manager compensation ▶ \$

Description of services provided ▶

Director/officer Employee Independent contractor

- 17 Mandatory distributions:
 - a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? Yes No
 - b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$

Part IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions

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**SCHEDULE I
(Form 990)**

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

OMB No. 1545-0047

2016

**Open to Public
Inspection**

Department of the Treasury
Internal Revenue Service

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

▶ Attach to Form 990.

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

Name of the organization PARTNERSHIP FOR CHILDREN OF CUMBERLAND COUNTY, INC.	Employer identification number 56-1845926
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Part I General Information on Grants and Assistance

- 1** 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? Yes No
- 2** 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.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) BONANZA PRESCHOOL 247 BONANZA DRIVE FAYETTEVILLE NC 28303	56-1720816			7,993	FMV	EDUC. MATERIALS	INCREASE QUALITY
(2) CHILDRENZ PLACE 4027 SOUTH MAIN STREET HOPE MILLS NC 28348	47-3330303			7,597	FMV	EDUC. MATERIALS	INCREASE QUALITY
(3) GRACIE'S CHILDCARE & LEARNING CTR 1140 SAND HILL ROAD HOPE MILLS NC 28348	26-4137997			7,594	FMV	EDUC. MATERIALS	INCREASE QUALITY
(4) LITTLE GREEN BERETS DAYCARE 7652 RAEFORD ROAD FAYETTEVILLE NC 28314	46-1162847			7,507	FMV	EDUC. MATERIALS	INCREASE QUALITY
(5) OWL'S ACADEMY 174 WEST MANCHESTER ROAD SPRING LAKE NC 28390	46-4607165			7,565	FMV	EDUC. MATERIALS	INCREASE QUALITY
(6)							
(7)							
(8)							
(9)							

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2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table	▶ 0
3 Enter total number of other organizations listed in the line 1 table	▶ 5

Part III 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 PARTICIPANT TRAINING	406	103,711			
2 CAR SEAT DISTRIBUTION	233		14,782	FMV	CAR SEATS
3 EDUCATIONAL SUPPLEMENTS	1	250			
4 EDUCATIONAL MATERIALS	700		1,915	FMV	BOOKS/SUPPLIES
5 CHILD CARE REIMBURSEMENT	166	7,655			
6					
7					

Part IV Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

PART I, LINE 2 - PROCEDURES FOR MONITORING THE USE OF GRANT FUNDS

THE PARTNERSHIP FOLLOWS ESTABLISHED CRITERIA, POLICIES AND PROCEDURES FOR THE AWARDING AND MONITORING OF GRANT FUNDS. EACH PROGRAM HAS SPECIFIC ELIGIBILITY REQUIREMENTS, PAYMENT METHODS, AND MONITORING POLICIES. THE PARTNERSHIP IS ALSO SUBJECT TO MONITORING BY THE NORTH CAROLINA PARTNERSHIP FOR CHILDREN, INC., AND IS REQUIRED TO MAINTAIN SPECIFIC DOCUMENTATION RELATED TO GRANTS AND OTHER ASSISTANCE.

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SCHEDULE L
(Form 990 or 990-EZ)

Transactions With Interested Persons

OMB No. 1545-0047

2016

Department of the Treasury
Internal Revenue Service

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.

▶ Attach to Form 990 or Form 990-EZ.

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

Open To Public Inspection

Name of the organization

PARTNERSHIP FOR CHILDREN OF
CUMBERLAND COUNTY, INC.

Employer identification number

56-1845926

Part I Excess Benefit Transactions (section 501(c)(3), section 501(c)(4), and 501(c)(29) organizations only).

Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b.

1	(a) Name of disqualified person	(b) Relationship between disqualified person and organization	(c) Description of transaction	(d) Corrected?	
				Yes	No
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					

2 Enter the amount of tax incurred by the organization managers or disqualified persons during the year under section 4958 ▶ \$ _____

3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization ▶ \$ _____

Part II Loans to and/or From Interested Persons.

Complete if the organization answered "Yes" on Form 990-EZ, Part V, line 38a or Form 990, Part IV, line 26; or if the organization reported an amount on Form 990, Part X, line 5, 6, or 22.

1	(a) Name of interested person	(b) Relationship with organization	(c) Purpose of loan	(d) Loan to or from the org.?		(e) Original principal amount	(f) Balance due	(g) In default?		(h) Approved by board or committee?		(i) Written agreement?	
				To	From			Yes	No	Yes	No	Yes	No
				(1)									
(2)													
(3)													
(4)													
(5)													
(6)													
(7)													
(8)													
(9)													
(10)													
Total							▶ \$						

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Part III Grants or Assistance Benefiting Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 27.

1	(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of assistance	(d) Type of assistance	(e) Purpose of assistance
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
(10)					

Part IV Business Transactions Involving Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of org. revenues?	
				Yes	No
(1) CUMBERLAND COUNTY SCHOOLS	BOARD MEMBER	1,451,250	SERVICE PROVIDER		X
(2) ACTION PATHWAYS, INC.	BOARD MEMBER	906,600	SERVICE PROVIDER		X
(3) FAYETTEVILLE TECHNICAL COMM COLLEGE	BOARD MEMBER	348,136	SERVICE PROVIDER		X
(4) BUILDING BLOCKS EARLY EDUCATION	BOARD MEMBER	345,758	SERVICE PROVIDER		X
(5) COZY CORNER CHILDCARE/JUMP START	BOARD MEMBER	237,512	SERVICE PROVIDER		X
(6) EVA HANSEN	PRESIDENT	13,500	CONSULTING SERVICES		X
(7)					
(8)					
(9)					
(10)					

Part V Supplemental Information

Provide additional information for responses to questions on Schedule L (see instructions)

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SCHEDULE L, PART V - ADDITIONAL INFORMATION

THE PARTNERSHIP FOR CHILDREN IS A NONPROFIT ORGANIZATION WITH A SUCCESSFUL RECORD OF MAKING A DIFFERENCE FOR CUMBERLAND COUNTY'S CHILDREN. THE PARTNERSHIP IS THE LOCAL ADMINISTRATOR FOR SMART START, NORTH CAROLINA'S EARLY CHILDHOOD INITIATIVE, AND THE NC PRE-K (PRE-KINDERGARTEN) PROGRAM. SMART START IS A PUBLIC-PRIVATE INITIATIVE THAT PROVIDES HIGH-QUALITY EARLY CHILDHOOD EDUCATION FUNDING TO ALL NORTH CAROLINA COUNTIES. SMART START FUNDS ARE USED TO IMPROVE THE QUALITY OF CHILD CARE, MAKE CHILD CARE MORE AFFORDABLE AND ACCESSIBLE, PROVIDE ACCESS TO HEALTH SERVICES AND OFFER FAMILY SUPPORT. THE SMART START PROGRAM IS IMPLEMENTED STATEWIDE BY THE NORTH CAROLINA PARTNERSHIP FOR CHILDREN, INC. AND LOCAL PARTNERSHIPS THAT SERVE EACH COUNTY. THE COMPOSITION OF LOCAL PARTNERSHIP BOARDS IS MANDATED BY THE STATE OF NORTH CAROLINA AND CONSISTS OF SPECIFIC REPRESENTATIVES FROM THE COMMUNITY TO GUARANTEE REPRESENTATION WHICH MOST BROADLY REFLECTS THE MAKE-UP OF THE LOCAL PARTNERSHIP SERVICE AREA, ESPECIALLY IN AREAS OF BUSINESS/COMMUNITY, SERVICE AND GOVERNMENT. IN CARRYING OUT SMART START AND NC PRE-K (PRE-KINDERGARTEN) PROGRAM ACTIVITIES, LOCAL PARTNERSHIPS MAY ENTER INTO SERVICE PROVIDER CONTRACTS WITH, OR PROVIDE GRANTS TO, ENTITIES WHO ARE REPRESENTED ON THE BOARD. IN SO DOING, PARTNERSHIPS ARE TO STRICTLY ADHERE TO ESTABLISHED CONFLICT OF INTEREST POLICIES. BOARD

Part IV Business Transactions Involving Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of org. revenues?	
				Yes	No
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
(10)					

Part V Supplemental Information

Provide additional information for responses to questions on Schedule L (see instructions).

MEMBERS ARE TO ACKNOWLEDGE ANY CONFLICTS OF INTEREST AND DECLARE SUCH CONFLICT BEFORE AN AGENDA ITEM IN QUESTION IS DISCUSSED OR VOTED UPON BY THE FULL BOARD.

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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

2016

**Open to Public
Inspection**

Department of the Treasury
Internal Revenue Service

▶ 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.

Name of the organization **PARTNERSHIP FOR CHILDREN OF
CUMBERLAND COUNTY, INC.**

Employer identification number
56-1845926

FORM 990, PART III, LINE 4A - FIRST ACCOMPLISHMENT

79% OF WAGES PARTICIPANTS REMAINED AT THEIR CHILD CARE FACILITIES.

COMPENSATION FOR 193 NC PRE-K TEACHERS WAS INCREASED TO ENCOURAGE TEACHER

RETENTION. 71 CHILD CARE FACILITIES PARTICIPATED IN ACTIVITIES TO INCREASE

OR MAINTAIN THEIR STAR RATINGS, THROUGH TECHNICAL ASSISTANCE AND GRANTS.

THE AVERAGE STAR RATING FOR CHILDREN ENROLLED IN CARE WAS 4.19, WITH 73% OF

CHILDREN IN 4-STAR AND 5-STAR FACILITIES. 63% OF CHILDREN WERE ENROLLED IN

1-5 STAR RATED CHILD CARE CENTERS THAT HAD AT LEAST 7 LEAD TEACHER

EDUCATION POINTS. 73% OF CHILDREN WERE ENROLLED IN 1-5 STAR RATED CHILD

CARE CENTERS THAT HAD AT LEAST 7 ADMINISTRATOR EDUCATION POINTS.

FORM 990, PART III, LINE 4B - SECOND ACCOMPLISHMENT

CURRICULUM AND PRESCHOOL EXPERIENCE TO ENHANCE THEIR SCHOOL READINESS. THE

NC PRE-K PROGRAM STANDARDS ARE BUILT ON THE PREMISE THAT IN ORDER TO BE

ACADEMICALLY SUCCESSFUL IN SCHOOL, CHILDREN NEED TO BE PREPARED IN ALL FIVE

OF THE MAJOR DOMAINS OF DEVELOPMENT OUTLINED BY THE NATIONAL EDUCATIONAL

GOALS PANEL. EACH OF THESE DOMAINS IS CRITICAL TO CHILDREN'S WELL-BEING,

IN PARTICULAR FOR THEIR SUCCESS IN READING AND MATH AS THEY COME TO

SCHOOL. OVER 1,828 AT-RISK, 4-YEAR-OLD CHILDREN WERE PLACED IN CLASSROOMS

IN THE PROGRAM, WHICH WAS OFFERED THROUGHOUT THE COUNTY AT VARIOUS

FACILITIES, INCLUDING PUBLIC SCHOOLS, HEAD START, DEVELOPMENTAL DAY,

MILITARY SITES, OR PRIVATE CHILD CARE CENTERS WITH AT LEAST A 4-STAR

OR 5-STAR RATED LICENSE.

FORM 990, PART III, LINE 4C - THIRD ACCOMPLISHMENT

DRAFT

Name of the organization

Employer identification number

PARTNERSHIP FOR CHILDREN OF

56-1845926

CHILD CARE, CHILD DEVELOPMENT ACTIVITIES, AND OTHER PROGRAMS. IT ALSO PROVIDED A SHARED OFFICE INFRASTRUCTURE AND HIGH-QUALITY TRAINING AND EDUCATIONAL SPACE FOR PARTNERING ORGANIZATIONS.

FORM 990, PART III, LINE 4D - ALL OTHER ACCOMPLISHMENT PROGRAM SUPPORT, COORDINATION, AND EVALUATION -

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PROGRAM MANAGEMENT ACTIVITIES INCLUDED CONDUCTING ON-SITE FISCAL AND PROGRAMMATIC MONITORING OF ALL FUNDED PROJECTS, AS WELL AS THE ONGOING COORDINATION OF PROJECTS AND ACTIVITIES, TO DETERMINE IF SHORT-TERM AND LONG-TERM GOALS WERE BEING ACHIEVED. THE PARTNERSHIP MOBILIZED 33 LOCAL SMART START PARTNERSHIPS REPRESENTING 42 COUNTIES IN A COMMUNITY OF PRACTICE TO IMPROVE METHODS OF DATA SHARING AND TRANSLATION. IN ADDITION, THE PARTNERSHIP SUPPORTED 49 COUNTIES WITH ONE OR MORE OF THE FOLLOWING SHARED SERVICES: MULTI-PARTNERSHIP ACCOUNTING AND CONTRACTING (MAC) SERVICES, REGION 5 CHILD CARE RESOURCE AND REFERRAL, INFORMATION TECHNOLOGY SERVICES, AND GRANT EVALUATION MANAGEMENT SOLUTIONS (GEMS) SERVICES. THE PARTNERSHIP'S INFORMATION TECHNOLOGY SERVICES PROVIDED RELIABLE AND AFFORDABLE TECHNOLOGY SERVICES FOR 23 EARLY CHILDHOOD ORGANIZATIONS TO ENHANCE OR IMPROVE THE SERVICES PROVIDED TO FAMILIES AND CHILDREN IN THE COMMUNITY.

HEALTH AND SAFETY - THROUGH THE ASSURING BETTER CHILD HEALTH AND DEVELOPMENT PROGRAM (ABCD), THE PARTNERSHIP STRENGTHENED THE DEVELOPMENTAL SCREENING AND REFERRAL PRACTICES OF 12 MEDICAL PRACTICES REPRESENTING 32 PROVIDERS, IMPACTING 13,629 AT-RISK YOUNG CHILDREN.

FORM 990, PART VI, LINE 4 - SIGNIFICANT CHANGES TO ORGANIZATIONAL DOCUMENTS THE PARTNERSHIP AMENDED ITS BYLAWS ON JUNE 29, 2017. CHANGES INCLUDED

Name of the organization

PARTNERSHIP FOR CHILDREN OF

Employer identification number

56-1845926

AMENDMENTS TO THE BOARD COMPOSITION, TERM, AND ELECTION ARTICLES.

FORM 990, PART VI, LINE 11B - ORGANIZATION'S PROCESS TO REVIEW FORM 990
A DRAFT COPY OF FORM 990 IS EMAILED TO ALL BOARD MEMBERS. A DETAILED
REVIEW IS PERFORMED AND, AFTER ANY CHANGES ARE MADE, THE FINAL COPY OF
FORM 990 IS PRESENTED TO THE BOARD OFFICERS FOR APPROVAL. AFTER FORM 990
IS APPROVED, IT IS THEN REVIEWED AND SIGNED BY A BOARD OFFICER AND PREPARED
FOR DELIVERY TO THE INTERNAL REVENUE SERVICE.

FORM 990, PART VI, LINE 12C - ENFORCEMENT OF CONFLICTS POLICY
CONFLICTS OF INTEREST ARE REFLECTED ON THE BOARD MEMBER'S TENT CARD AT THE
MEETINGS; EACH AGENDA ITEM IS REVIEWED FOR CONFLICTS OF INTEREST.
SHOULD INSTANCES ARISE WHEN A CONFLICT MAY BE PERCEIVED, ANY MEMBER WHO MAY
BENEFIT DIRECTLY OR INDIRECTLY FROM THE PARTNERSHIP'S DISBURSEMENT OF FUNDS
RECUSES FROM DELIBERATIONS BY THE PARTNERSHIP REGARDING THE
DISBURSEMENT OF FUNDS.

FORM 990, PART VI, LINE 15A - COMPENSATION PROCESS FOR TOP OFFICIAL
THE BOARD CHAIR, UNDER THE ADVISEMENT OF THE EXECUTIVE COMMITTEE, SETS THE
COMPENSATION OF THE PRESIDENT OF THE PARTNERSHIP. COMPARATIVE DATA IS
OBTAINED FROM SIMILAR NONPROFIT ORGANIZATIONS, AND THE PRESIDENT'S SALARY
RANGE IS ADJUSTED ACCORDINGLY THROUGH BOARD ACTION.

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FORM 990, PART VI, LINE 15B - COMPENSATION PROCESS FOR OFFICERS
WITH THE EXCEPTION OF THE PRESIDENT AND COO, NO OFFICER OR DIRECTOR
RECEIVES ANY COMPENSATION. PER THE BYLAWS, THE PRESIDENT IS AUTHORIZED BY
THE BOARD TO DETERMINE THE COMPENSATION OF ALL OTHER EMPLOYEES OF THE

Name of the organization

PARTNERSHIP FOR CHILDREN OF

Employer identification number

56-1845926

ORGANIZATION. THE PARTNERSHIP PERIODICALLY REVIEWS PAY LEVELS AT LEAST EVERY THREE YEARS, AND MAY RETAIN AN INDEPENDENT CONSULTANT FOR SUCH REVIEW. ALL ADJUSTMENTS TO PAY LEVEL RANGES MUST BE APPROVED BY THE BOARD.

FORM 990, PART VI, LINE 19 - GOVERNING DOCUMENTS DISCLOSURE EXPLANATION
GOVERNING DOCUMENTS AND POLICIES ARE MADE AVAILABLE FOR INSPECTION AT THE PARTNERSHIP'S OFFICE UPON REQUEST AND ARE ALSO INCLUDED ON THE PARTNERSHIP'S WEBSITE. FINANCIAL STATEMENTS ARE INCLUDED IN THE PARTNERSHIP'S PUBLISHED ANNUAL REPORT AS WELL AS IN AUDIT REPORTS MADE AVAILABLE BY THE NORTH CAROLINA PARTNERSHIP FOR CHILDREN, INC. UPON REQUEST.

FORM 990, PART VII - ADDITIONAL INFORMATION

SECTION B. INDEPENDENT CONTRACTORS, COL. (B)

CUMBERLAND COUNTY SCHOOLS PROVIDED SUPPORT SERVICES OF CHILDREN IN BLENDED PRE-SCHOOL CLASSROOMS, PROVIDED A PARENTS EDUCATION PROGRAM, AND PROVIDED ASSISTANCE THROUGH CHILD CARE SUBSIDIES AND PRE-SCHOOL CLASSROOMS.

ACTION PATHWAYS, INC. PROVIDED ASSISTANCE THROUGH CHILD CARE SUBSIDIES AND PRE-SCHOOL CLASSROOMS. TRINITY CHILD CARE PROVIDED ASSISTANCE THROUGH CHILD CARE SUBSIDIES AND PRE-SCHOOL CLASSROOMS. CHILD CARE NETWORK #109 AND #110 PROVIDED ASSISTANCE THROUGH CHILD CARE SUBSIDIES AND PRE-SCHOOL CLASSROOMS. HEAVENLY HAVEN CHILD CARE PROVIDED ASSISTANCE THROUGH CHILD CARE SUBSIDIES AND PRE-SCHOOL CLASSROOMS.

FORM 990, PART XII - ADDITIONAL INFORMATION

FINANCIAL STATEMENTS AND REPORTING, QUESTION 2

THE PARTNERSHIP WAS AUDITED BY AN INDEPENDENT ACCOUNTING FIRM CONTRACTED

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Name of the organization

Employer identification number

PARTNERSHIP FOR CHILDREN OF

56-1845926

BY THE NORTH CAROLINA PARTNERSHIP FOR CHILDREN, INC., WHO WAS RESPONSIBLE FOR THE SELECTION AND OVERSIGHT OF THE AUDITOR. THE FINANCIAL STATEMENTS WERE NOT PREPARED IN ACCORDANCE WITH GENERALLY ACCEPTED ACCOUNTING PRINCIPLES.

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Taxable Interest on Investments

<u>Description</u>	<u>Amount</u>	<u>Unrelated Business Code</u>	<u>Exclusion Code</u>	<u>Postal Code</u>	<u>Acquired after 6/30/75</u>	<u>US Obs (\$ or %)</u>
INTEREST INCOME	\$ 8,093		14			
TOTAL	<u>\$ 8,093</u>					

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Federal Statements

Form 990, Part IX, Line 24e - All Other Expenses

Description	Total Expenses	Program Service	Management & General	Fund Raising
REPAIRS & MAINTENANCE	\$ 78,612	\$ 70,596	\$ 8,016	\$
LOCAL AGENCY ALLOCATIONS	62,226	62,226		
TELEPHONE	50,342	44,052	6,290	
COMPUTER EQUIPMENT	43,372	37,938	5,434	
UTILITIES	31,613	26,713	4,900	
EMPLOYEE TRAINING	31,572	28,300	3,272	
EQUIPMENT RENTAL	26,195	22,419	3,776	
OFFICE SUPPLIES	21,129	18,115	3,014	
OUTREACH /PUB. OF SERVICE	19,116	19,116		
FURNITURE/FIXTURES	18,660	17,404	1,256	
DUES & SUBSCRIPTIONS	18,386	13,535	4,851	
SALES TAXES	18,325		18,325	
EDUCATIONAL SUPPLIES	18,278	18,278		
PROPERTY TAXES	16,255	16,240	15	
BUILDING IMPROVE/REPAIRS	15,657	15,657		
EQUIPMENT	14,929	14,034	895	
PAYROLL SERVICES	13,162		13,162	
COMPUTER SUPPLIES	12,573	10,001	2,572	
WORKMEN'S COMPENSATION	6,786	5,986	800	
POSTAGE & SHIPPING	6,058	2,479	3,579	
BANK CHARGES	5,647	4,335	1,312	
SPONSORSHIPS	4,361	4,111	250	
MEALS IN STATE	3,938	3,713	225	
AUTOMOTIVE SUPPLIES	3,400	3,132	268	
JANITORIAL SUPPLIES	3,362	2,973	389	
PRINTING & PUBLICATIONS	2,820	2,626	194	
MEALS OUT OF STATE	2,411	2,411		
OTHER ADMIN SUPPLIES	2,116	962	1,154	
HONORARIUMS	1,978	842	1,136	
VEHICLE RENTAL	232		232	
INFORMATION TECH SERVICES		-21,573	21,573	
TOTAL	\$ <u>553,511</u>	\$ <u>446,621</u>	\$ <u>106,890</u>	\$ <u>0</u>

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Federal Statements**Schedule A, Part II, Line 1(e)**

<u>Description</u>	<u>Amount</u>
GOVERNMENT GRANTS OR CONTRIBUTIONS	\$ 12,654,672
OTHER	16,221
TOTAL	<u>\$ 12,670,893</u>

Schedule A, Part II, Line 12 - Current year

<u>Description</u>	<u>Amount</u>
SALES TAX REFUNDS	\$ 26,747
SOIREE/OTHERS	99,319
OFFICE BLDG-EXEMPT USE	114,336
TOTAL	<u>\$ 240,402</u>

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SOIREE/OTHERS

Other Direct Fundraising or Gaming Expenses

<u>Description</u>	<u>Amount</u>
CONTRACTED SERVICES	\$ 8,837
OTHER DIRECT COSTS	8,922
TOTAL	<u>\$ 17,759</u>

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