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Return of Organization Exempt From Income Tax

2008

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

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

Open to Public Inspection

For the 2008 calendar year, or tax year beginning 7/01, 2008, and ending 6/30, 2009

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Termination <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending		Please use IRS label or print or type. See specific instructions. Riverside County Child Care Consortium 2010 Iowa Avenue #100 Riverside, CA 92507		D Employer identification number 33-0265253	
				E Telephone number 951 248-0015	
				G Gross receipts \$ 2,974,990.	
		F Name and address of principal officer Same As C Above		H(a) Is this a group return for affiliates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all affiliates included? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If 'No,' attach a list (see instructions)	
I Tax-exempt status <input checked="" type="checkbox"/> 501(c) (3) (insert no) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		H(c) Group exemption number			
J Website: www.riversidechildcare.org					
K Type of organization <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other		L Year of formation		M State of legal domicile CA	

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities <u>To provide advocacy and resources in the establishment and support of quality, affordable and accessible child care services for children and families in Riverside County through community partnerships.</u>			
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its assets			
	3	Number of voting members of the governing body (Part VI, line 1a)		
	4	Number of independent voting members of the governing body (Part VI, line 1b)		
	5	Total number of employees (Part V, line 2a)		
	6	Total number of volunteers (estimate if necessary)		
	Revenue	7a	Total gross unrelated business revenue from Part VIII, line 12, column (C)	
7b		Net unrelated business taxable income from Form 990-T, line 34		
8		Contributions and grants (Part VIII, line 1h)		
9		Program service revenue (Part VIII, line 2g)		
10		Investment income (Part VIII, column (A), lines 3, 4, and 7d)		
11		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		
12		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		
Expenses		13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	
		14	Benefits paid to or for members (Part IX, column (A), line 4)	
		15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	
	16a	Professional fundraising fees (Part IX, column (A), line 11e)		
	16b	Total fundraising expenses (Part IX, column (D), line 25)		
	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)		
	18	Total expenses - add lines 13-17 (must equal Part IX, column (A), line 25)		
	19	Revenue less expenses. Subtract line 18 from line 12		
Net Assets or Fund Balances	20	Total assets (Part X, line 16)		
	21	Total liabilities (Part X, line 26)		
	22	Net assets or fund balances. Subtract line 21 from line 20		

Part II Signature Block

Sign Here	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.		
	Signature of officer: <u>[Signature]</u> Date: <u>1/14/10</u> Type or print name and title: <u>Vice President</u>		
Paid Preparer's Use Only	Preparer's signature	<u>[Signature]</u> Larry A. Saunders	Date: <u>1/12/2010</u>
	Firm's name (or yours if self-employed), address, and ZIP + 4	LARRY A. SAUNDERS E.A. 827 ENGLISH HOLLY LN SAN MARCOS, CA 92078-4593	
	Check if self-employed <input checked="" type="checkbox"/>	Preparer's identifying number (see instructions) N/A	
	EIN N/A	Phone no (760) 746-8434	

May the IRS discuss this return with the preparer shown above? (see instructions)

☒ Yes ☐ No

BAA For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.

TEEA0112L 12/22/08

Form 990 (2008)

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Part III Statement of Program Service Accomplishments (see instructions)**1.** Briefly describe the organization's mission:

To provide advocacy and resources in the establishment and support of quality, affordable and accessible child care services for children and families in Riverside County through community partnerships.

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 exempt purpose achievements for each of the organization's three largest program services by expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported

4a (Code ☐) (Expenses \$ 849,402. including grants of \$) (Revenue \$ 1,165,841.)

CARES funds are used to support a compensation and retention program in Riverside County by which child care providers working with children ages 0-5 in private child care centers or in licensed family child care homes receive stipends for remaining on their job for one year and increasing their education and/or professional growth. The goal of this program is to increase quality and continuity of care.

During FY 2008-2009, four hundred forty-six (446) participants received \$ 703,874 in stipends and \$27,249 in textbook reimbursement while achieving 9,954 professional growth training hours and 2,838 semester college units. Funding from these monies are also used to offer resources and trainings for participants in this program.

4b (Code ☐) (Expenses \$ 436,795. including grants of \$) (Revenue \$ 549,439.)

AB 212 funds are used to support a compensation and retention program in Riverside County by which child care providers working in state funded before or after school programs or state funded preschool programs receive stipends for remaining in their job for one year and increasing their education and/or professional growth. The goal of this program is to increase quality and continuity of care.

During FY 2008-2009, one hundred eighty-two (182) participants received \$342,515 in stipends, and \$15,238 in textbook reimbursement while achieving 3,276 of professional growth training hours and 1,638 semester college units. Funding from these monies are also used to offer resources and trainings for participants in this program.

4c (Code ☐) (Expenses \$ 5,660. including grants of \$) (Revenue \$ 113,186.)

Local Planning Council funds are used to fulfill the legislative mandate of operating a child care planning council in each county that shall provide a forum for the identification of local priorities for child care in each county and develop policies to meet the needs identified within those priorities.

The planning council shall, also, work with existing local collaboratives and program strategies to provide a unified integrated system of service for children and families. To accomplish these objectives, funds may be utilized to employ a full time coordinator in Riverside County to oversee the Local Planning Council. The countywide child care plan is designed to mobilize public and private resources and educating private and public entities about local child care issues.

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

(Expenses \$ 780,764. including grants of \$) (Revenue \$ 1,072,828.)

4e Total program service expenses ▶ \$ 2,072,621. (Must equal Part IX, Line 25, column (B))

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)? If 'Yes,' complete Schedule A	X	
2 Is the organization required to complete Schedule B, Schedule of Contributors?	X	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I		X
4 Section 501(c)(3) organizations Did the organization engage in lobbying activities? If 'Yes,' complete Schedule C, Part II		X
5 Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If 'Yes,' complete Schedule C, Part III		
6 Did the organization maintain any donor advised funds or any accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If 'Yes,' complete Schedule D, Part I		X
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If 'Yes,' complete Schedule D, Part II		X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III		X
9 Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If 'Yes,' complete Schedule D, Part IV		X
10 Did the organization hold assets in term, permanent, or quasi-endowments? If 'Yes,' complete Schedule D, Part V		X
11 Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? If 'Yes,' complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable	X	
12 Did the organization receive an audited financial statement for the year for which it is completing this return that was prepared in accordance with GAAP? If 'Yes,' complete Schedule D, Parts XI, XII, and XIII	X	
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E		X
14a Did the organization maintain an office, employees, or agents outside of the U S ?		X
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the U S ? If 'Yes,' complete Schedule F, Part I		X
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If 'Yes,' complete Schedule F, Part II		X
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If 'Yes,' complete Schedule F, Part III		X
17 Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If 'Yes,' complete Schedule G, Part I		X
18 Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II		X
19 Did the organization report more than \$15,000 on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part III		X
20 Did the organization operate one or more hospitals? If 'Yes,' complete Schedule H		X
21 Did the organization report more than \$5,000 on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II		X
22 Did the organization report more than \$5,000 on Part IX, column (A), line 2? If 'Yes,' complete Schedule I, Parts I and III	X	
23 Did the organization answer 'Yes' to Part VII, Section A, questions 3, 4, or 5? If 'Yes,' complete Schedule J		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, and that was issued after December 31, 2002? If 'Yes,' answer questions 24b-24d and complete Schedule K If 'No,' go to question 25		X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
d Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?		
25a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I		X
b Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a prior year? If 'Yes,' complete Schedule L, Part I		X
26 Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If 'Yes,' complete Schedule L, Part II		X
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or substantial contributor, or to a person related to such an individual? If 'Yes,' complete Schedule L, Part III		X

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Form 990 (2008)

Part IV Checklist of Required Schedules (continued)

	Yes	No
28 During the tax year, did any person who is a current or former officer, director, trustee, or key employee		
a Have a direct business relationship with the organization (other than as an officer, director, trustee, or employee), or an indirect business relationship through ownership of more than 35% in another entity (individually or collectively with other person(s) listed in Part VII, Section A)? <i>If 'Yes,' complete Schedule L, Part IV</i>	28a	X
b Have a family member who had a direct or indirect business relationship with the organization? <i>If 'Yes,' complete Schedule L, Part IV</i>	28b	X
c Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a professional corporation) doing business with the organization? <i>If 'Yes,' complete Schedule L, Part IV</i>	28c	X
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If 'Yes,' complete Schedule M</i>	29	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>	30	X
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If 'Yes,' complete Schedule N, Part I</i>	31	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>	32	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>	33	X
34 Was the organization related to any tax-exempt or taxable entity? <i>If 'Yes,' complete Schedule R, Parts II, III, IV, and V, line 1</i>	34	X
35 Is any related organization a controlled entity within the meaning of section 512(b)(13)? <i>If 'Yes,' complete Schedule R, Part V, line 2</i>	35	X
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>	36	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>	37	X

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Form 990 (2008)

Part V Statements Regarding Other IRS Filings and Tax Compliance

	Yes	No
1 a Enter the number reported in Box 3 of form 1096, Annual Summary and Transmittal of U S Information Returns Enter -0- if not applicable	1 a 512	
b Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	1 b 0	
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1 c X	
2 a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	2 a 13	
2 b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instructions)	2 b X	
3 a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3 a	X
b If 'Yes' has it filed a Form 990-T for this year? If 'No,' provide an explanation in Schedule O	3 b	
4 a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? b If 'Yes,' enter the name of the foreign country ▶ See the instructions for exceptions and filing requirements for Form TD F 90-22.1 , Report of Foreign Bank and Financial Accounts	4 a	X
5 a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5 a	X
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5 b	X
c If 'Yes,' to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?	5 c	X
6 a Did the organization solicit any contributions that were not tax deductible?	6 a	X
b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not deductible?	6 b	
7 Organizations that may receive deductible contributions under section 170(c).		
a Did the organization provide goods or services in exchange for any quid pro quo contribution of more than \$75?	7 a	X
b If 'Yes,' did the organization notify the donor of the value of the goods or services provided?	7 b	
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7 c	X
d If 'Yes,' indicate the number of Forms 8282 filed during the year	7 d	
e Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7 e	X
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7 f	X
g For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7 g	X
h For all contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	7 h X	
8 Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8	X
9 Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.		
a Did the organization make any taxable distributions under section 4966?	9 a	X
b Did the organization make any distribution to a donor, donor advisor, or related person?	9 b	X
10 Section 501(c)(7) organizations. Enter		
a Initiation fees and capital contributions included on Part VIII, line 12	10 a	
b Gross Receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10 b	
11 Section 501(c)(12) organizations. Enter		
a Gross income from other members or shareholders	11 a	
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	11 b	
12 a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12 a	
b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year	12 b	

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Form 990 (2008)

Part VI Governance, Management and Disclosure (Sections A, B, and C request information about policies not required by the Internal Revenue Code.)**Section A. Governing Body and Management**

For each 'Yes' response to lines 2-7b below, and for a 'No' response to lines 8 or 9b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

	Yes	No
1 a Enter the number of voting members of the governing body		
1 b Enter the number of voting members that are independent		
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 organizational documents since the prior Form 990 was filed?		X
5 Did the organization become aware during the year of a material diversion of the organization's assets?		X
6 Does the organization have members or stockholders?		X
7 a Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?		X
7 b Are any decisions of the governing body subject to approval by members, stockholders, or other persons?		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 a Does the organization have local chapters, branches, or affiliates?	X	
b If 'Yes,' does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?	X	
10 Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations must describe in Schedule O the process, if any, the organization uses to review the Form 990. See Schedule O.	X	
11 Is there any officer, director or 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

	Yes	No
12 a Does the organization have a written conflict of interest policy? If 'No,' go to line 13	X	
b Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	X	
c Does the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this is done. See Schedule O.	X	
13 Does the organization have a written whistleblower policy?	X	
14 Does 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? See Schedule O. Describe the process in Schedule O (see instructions)	X	
16 a 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,' has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?		

Section C. Disclosures

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

18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply.

☐ Own website ☐ Another's website ☒ Upon request

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

20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization.

► Riverside Cnty Child Care Cons 2010 Iowa Avenue, #100 Riverside CA 92507 951 248-0015

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Form 990 (2008)

[illegible]

2 Total number of individuals (including those in 1a) who received more than \$100,000 in reportable compensation from the organization ▶ 0

- | | Yes | No |
|---|-----|----|
| 3 | | X |
| 4 | | X |
| 5 | | X |

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization

2 Total number of independent contractors (including those in 1) who received more than \$100,000 in compensation from the organization ▶ 3

Part VIII Statement of Revenue

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
CONTRIBUTIONS, GIFTS, GRANTS AND OTHER SIMILAR AMOUNTS	1 a Federated campaigns	1 a				
	b Membership dues	1 b				
	c Fundraising events	1 c				
	d Related organizations	1 d				
	e Government grants (contributions)	1 e 2,859,261.				
	f All other contributions, gifts, grants, and similar amounts not included above	1 f 110,555.				
	g Noncash contribns included in lns 1a-1f	\$				
	h Total. Add lines 1a-1f		2,969,816.			
PROGRAM SERVICE REVENUE		Business Code				
	2 a -----					
	b -----					
	c -----					
	d -----					
	e -----					
	f All other program service revenue					
g Total. Add lines 2a-2f						
OTHER REVENUE	3 Investment income (including dividends, interest and other similar amounts)		5,174.	5,174.		
	4 Income from investment of tax-exempt bond proceeds					
	5 Royalties					
	6 a Gross Rents	(i) Real (ii) Personal				
	b Less rental expenses					
	c Rental income or (loss)					
	d Net rental income or (loss)					
	7 a Gross amount from sales of assets other than inventory	(i) Securities (ii) Other				
	b Less cost or other basis and sales expenses					
	c Gain or (loss)					
	d Net gain or (loss)					
	8 a Gross income from fundraising events (not including \$ of contributions reported on line 1c) See Part IV, line 18	a				
	b Less direct expenses	b				
	c Net income or (loss) from fundraising events					
	9 a Gross income from gaming activities See Part IV, line 19	a				
	b Less direct expenses	b				
	c Net income or (loss) from gaming activities					
	10 a Gross sales of inventory, less returns and allowances	a				
	b Less cost of goods sold	b				
	c Net income or (loss) from sales of inventory					
Miscellaneous Revenue	Business Code					
11 a -----						
b -----						
c -----						
d All other revenue						
e Total. Add lines 11a-11d						
12 Total Revenue. Add lines 1h, 2g, 3, 4, 5, 6d, 7d, 8c, 9c, 10c, and 11e		2,974,990.	5,174.	0.	0.	

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

<i>Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.</i>	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the U S See Part IV, line 21				
2 Grants and other assistance to individuals in the U S See Part IV, line 22	1,149,009.	1,149,009.		
3 Grants and other assistance to governments, organizations, and individuals outside the U S See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	0.	0.	0.	0.
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1) and persons described in section 4958(c)(3)(B)	0.	0.	0.	0.
7 Other salaries and wages	589,644.		589,644.	
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	11,165.		11,165.	
9 Other employee benefits	43,786.		43,786.	
10 Payroll taxes	46,492.		46,492.	
11 Fees for services (non-employees)				
a Management				
b Legal	1,970.		1,970.	
c Accounting	25,094.		25,094.	
d Lobbying				
e Prof fundraising svcs See Part IV, ln 17				
f Investment management fees				
g Other				
12 Advertising and promotion				
13 Office expenses	27,826.	12,323.	15,503.	
14 Information technology	12,077.		12,077.	
15 Royalties				
16 Occupancy	84,516.		84,516.	
17 Travel	12,463.	1,639.	10,824.	
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	46,194.	46,194.		
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	24,526.		24,526.	
23 Insurance	14,257.		14,257.	
24 Other expenses Itemize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below)				
a Consultants/Subcontractors	667,307.	667,307.		
b Computer/Data Base Support	42,658.	42,658.		
c Printing and Publications	42,246.	26,945.	15,301.	
d Computer Technical Support	35,123.	35,123.		
e Resource Lending Library	30,226.	30,226.		
f All other expenses	85,312.	61,197.	24,115.	
25 Total functional expenses Add lines 1 through 24f	2,991,891.	2,072,621.	919,270.	0.
26 Joint Costs. Check here <input type="checkbox"/> if following SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

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Form 990 (2008)

Part X Balance Sheet

		(A) Beginning of year		(B) End of year
ASSETS	1 Cash — non-interest-bearing	76,959.	1	105,334.
	2 Savings and temporary cash investments	576,957.	2	172,637.
	3 Pledges and grants receivable, net	851,794.	3	1,096,620.
	4 Accounts receivable, net	18,010.	4	
	5 Receivables from current and former officers, directors, trustees, key employees, or other related parties. Complete Part II of Schedule L		5	
	6 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). 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 basis	10a 152,017.		
	b Less accumulated depreciation. Complete Part VI of Schedule D	10b 93,037.	83,508.	10c 58,980.
	11 Investments — publicly-traded securities		11	
	12 Investments — other securities. See Part IV, line 11		12	
	13 Investments — program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11		15	2.
16 Total assets. Add lines 1 through 15 (must equal line 34).	1,607,228.	16	1,433,573.	
LIABILITIES	17 Accounts payable and accrued expenses	1,442,398.	17	1,293,921.
	18 Grants payable		18	
	19 Deferred revenue		19	
	20 Tax-exempt bond liabilities		20	
	21 Escrow account liability. Complete Part IV of Schedule D		21	
	22 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		24	
	25 Other liabilities. Complete Part X of Schedule D	17,524.	25	9,248.
	26 Total liabilities. Add lines 17 through 25	1,459,922.	26	1,303,169.
NET ASSETS OR FUND BALANCES	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 29 and lines 33 and 34.			
	27 Unrestricted net assets	147,306.	27	130,404.
	28 Temporarily restricted net assets		28	
	29 Permanently restricted net assets		29	
	Organizations that do not follow SFAS 117, 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, and equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
	33 Total net assets or fund balances.	147,306.	33	130,404.
	34 Total liabilities and net assets/fund balances.	1,607,228.	34	1,433,573.

Part XI Financial Statements and Reporting

- 1 Accounting method used to prepare the Form 990 ☐ Cash ☒ Accrual ☐ Other
- 2a Were the organization's financial statements compiled or reviewed by an independent accountant?
- b Were the organization's financial statements audited by an independent accountant?
- c If 'Yes' to 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?
- 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?
- b If 'Yes,' did the organization undergo the required audit or audits?

	Yes	No
2a		X
2b	X	
2c	X	
3a		X
3b		

BAA

Form 990 (2008)

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.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1 Gifts, grants, contributions and membership fees received (Do not include 'unusual grants'.)	2,065,493.	2,266,387.	2,531,387.	3,465,381.	2,971,162.	13,299,810.
2 Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf						0.
3 The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge.						0.
4 Total. Add lines 1-3	2,065,493.	2,266,387.	2,531,387.	3,465,381.	2,971,162.	13,299,810.
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).						0.
6 Public support. Subtract line 5 from line 4						13,299,810.

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
7 Amounts from line 4	2,065,493.	2,266,387.	2,531,387.	3,465,381.	2,971,162.	13,299,810.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	19,601.	24,024.	11,403.	9,615.	5,174.	69,817.
9 Net income from unrelated business activities, whether or not the business is regularly carried on						0.
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						0.
11 Total support. Add lines 7 through 10						13,369,627.
12 Gross receipts from related activities, etc. (see instructions)					12	0.

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 ☐**Section C. Computation of Public Support Percentage**

14 Public support percentage for 2008 (line 6, column (f) divided by line 11, column (f))	14	99.5 %
15 Public support percentage for 2007 Schedule A, Part IV-A, line 26f	15	99.3 %

16a 33-1/3 support test – 2008. If the organization did not check the box on line 13, and the line 14 is 33-1/3 % or more, check this box and stop here. The organization qualifies as a publicly supported organization. ☒**b 33-1/3 support test – 2007.** If the organization did not check a box on line 13, or 16a, and line 15 is 33-1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization ☐**17a 10%-facts-and-circumstances test – 2008.** If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the 'facts-and-circumstances' test, check this box and stop here. Explain in Part IV how the organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization ☐**b 10%-facts-and-circumstances test – 2007.** If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the 'facts-and-circumstances' test, check this box and stop here. Explain in Part IV how the organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization ☐**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 ☐

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

(Complete only if you checked the box on line 9 of Part I.)

Section A. Public Support

Calendar year (or fiscal yr beginning in) ▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1 Gifts, grants, contributions and membership fees received (Do not include "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in a 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 1-5						
7a Amounts included on lines 1, 2, 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the total of lines 9, 10c, 11, and 12 for the year or \$5,000						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal yr beginning in) ▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(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 on line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13 Total support. (add lines 9, 10c, 11, and 12.)						
14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

15 Public support percentage for 2008 (line 8, column (f) divided by line 13, column (f))	15	%
16 Public support percentage from 2007 Schedule A, Part IV-A, line 27g	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2008 (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from 2007 Schedule A, Part IV-A, line 27h	18	%

19a 33-1/3% support tests – 2008. 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 – 2007. If the organization did not check a box on line 14 or 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	Supplemental Information. Complete this part to provide the explanation required by Part II, line 10; Part II, line 17a or 17b; or Part III, line 12. Provide any other additional information. (see instructions)
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[illegible]

**SCHEDULE D
(Form 990)**Department of the Treasury
Internal Revenue Service**Supplemental Financial Statements****Attach to Form 990. To be completed by organizations that
answered 'Yes,' to Form 990, Part IV, lines 6, 7, 8, 9, 10, 11, or 12.**

OMB No 1545-0047

2008**Open to Public
Inspection**

Name of the organization

Riverside County Child Care Consortium

Employer identification number

33-0265253

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

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

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

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

<input type="checkbox"/> Preservation of land for public use (e g , recreation or pleasure)	<input type="checkbox"/> Preservation of an historically important land area
<input type="checkbox"/> Protection of natural habitat	<input type="checkbox"/> Preservation of certified historic structure
<input type="checkbox"/> Preservation of open space	

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

	Held at the End of the Year
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included in (a)	2c
d Number of conservation easements included in (c) acquired after 8/17/06	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable 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, violations, and enforcement of the conservation easement it holds? ☐ Yes ☐ No

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

7 Amount of expenses incurred in monitoring, inspecting, and enforcing 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 170(h)(4)(B)(ii)? ☐ Yes ☐ No

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

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets
Complete if the organization answered 'Yes' to Form 990, Part IV, line 8.

1 a If the organization elected, as permitted under SFAS 116, 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 XIV, the text of the footnote to its financial statements that describes these items

b If the organization elected, as permitted under SFAS 116, 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 the following amounts relating to these items

(i) Revenues included in Form 990, Part VIII, line 1	▶ \$ _____
(ii) Assets included in Form 990, Part X	▶ \$ _____

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

a Revenues included in Form 990, Part VIII, line 1	▶ \$ _____
b Assets included in Form 990, Part X	▶ \$ _____

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

3 Using the organization's 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

d ☐ Loan or exchange programs

b ☐ Scholarly research

e ☐ Other _____

c ☐ Preservation for future generations

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

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

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

b If 'Yes,' explain the arrangement in Part XIV and complete the following table

	Amount
1c	
1d	
1e	
1f	

c Beginning balance

d Additions during the year

e Distributions during the year

f Ending balance

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

b If 'Yes,' explain the arrangement in Part XIV

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

1a Beginning of year balance

b Contributions

c Investment earnings or losses

d Grants or scholarships

e Other expenditures for facilities and programs

f Administrative expenses

g End of year balance

(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back

2 Provide the estimated percentage of the year end balance held as

a Board designated or quasi-endowment ▶ _____ %

b Permanent endowment ▶ _____ %

c Term endowment ▶ _____ %

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

(i) unrelated organizations

(ii) related organizations

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

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

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

Part VI Investments—Land, Buildings, and Equipment. See Form 990, Part X, line 10.

Description of investment	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Depreciation	(d) Book Value
1a Land				
b Buildings				
c Leasehold improvements				
d Equipment		89,917.	55,695.	34,222.
e Other		62,100.	37,342.	24,758.

Total. Add lines 1a-1e (Column (d) should equal Form 990, Part X, column (B), line 10(c).) ▶ 58,980.

BAA

Schedule D (Form 990) 2008

Part VII Investments—Other Securities See Form 990, Part X, line 12. N/A

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
Financial derivatives and other financial products		
Closely-held equity interests		
Other		
Total. (Column (b) should equal Form 990 Part X, col. (B) line 12.)		

Part VIII Investments—Program Related (See Form 990, Part X, line 13) N/A

(a) Description of investment type	(b) Book value	(c) Method of valuation Cost or end-of-year market value
Total. Column (b) should equal Form 990, Part X, Col. (B) line 13.		

Part IX Other Assets (See Form 990, Part X, line 15) N/A

(a) Description	(b) Book value
Total. Column (b) Total (should equal Form 990, Part X, col. (B), line 15)	

Part X Other Liabilities (See Form 990, Part X, line 25)

(a) Description of Liability	(b) Amount
Federal Income Taxes	
Credit Cards Payable	510.
Due to Other Funds	8,738.
Total. Column (b) Total (should equal Form 990, Part X, col. (B) line 25)	9,248.

In Part XIV, 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

Part XI Reconciliation of Change in Net Assets from Form 990 to Financial Statements

1	Total revenue (Form 990, Part VIII, column (A), line 12)	2,974,990.
2	Total expenses (Form 990, Part IX, column (A), line 25)	2,991,891.
3	Excess or (deficit) for the year Subtract line 2 from line 1	-16,901.
4	Net unrealized gains (losses) on investments	
5	Donated services and use of facilities	
6	Investment expenses	
7	Prior period adjustments	
8	Other (Describe in Part XIV)	
9	Total adjustments (net) Add lines 4-8	
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	-16,901.

Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

1	Total revenue, gains, and other support per audited financial statements	1	2,974,990.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a	Net unrealized gains on investments	2a	
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIV)	2d	
e	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	2,974,990.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
a	Investments expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIV)	4b	
c	Add lines 4a and 4b	4c	
5	Total revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12.)	5	2,974,990.

Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

1	Total expenses and losses per audited financial statements	1	2,991,891.
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	Losses reported on Form 990, Part IX, line 25	2c	
d	Other (Describe in Part XIV)	2d	
e	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	2,991,891.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investments expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIV)	4b	
c	Add lines 4a and 4b	4c	
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18.)	5	2,991,891.

Part XIV Supplemental Information

Complete this part to 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, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b

Part XIV	Supplemental Information <i>(continued)</i>
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[illegible]

► Complete if the organization answered 'Yes,' on Form 990, Part IV, lines 21 or 22.
► Attach to Form 990.

Department of the Treasury
Internal Revenue Service

Name of the organization

Riverside County Child Care Consortium

Part I	General Information on Grants and Assistance
---------------	---

Employer identification number

33-0265253

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?

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 Governments and Organizations in the United States.** Complete if the organization answered 'Yes' on Form 990. Part IV, line 21 for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use

Part IV and Schedule I-1 (Form 990) if additional space is needed

▲

[illegible]

2 Enter total number of section 501(c)(3) and government organizations

3 Enter total number of other organizations

Part III **Grants and Other Assistance to Individuals in the United States.** Complete if the organization answered 'Yes' on Form 990, Part IV, line 22.
Use Schedule I-1 (Form 990) if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
Stipends for Daycare Providers - CARES	456	739,954.			
Stipends for Daycare Providers - AB212	187	355,760.			
Scholarships to Daycare Providers	20	10,507.			
Reimb. for textbooks to daycare providers	282	42,788.			
Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.					

Part I, Line 2 - Grantmaker's Description of How Grants are Used

Each project staff member assigned to a funded project will receive a copy of project

contract and accompanying documentation that outlines project and expected outcomes.

Staff members will sign document stating they have received a copy of project

contract and accompanying documentation.

Each project staff member assigned to a funded project will receive an outline of job

responsibilities associated with project.

Monthly meetings will be scheduled with project staff, Executive Director and

Accounting Technician to review project progress. Records of meetings including

SCHEDULE O
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990

► Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

OMB No 1545-0047

2008

**Open to Public
Inspection**

Name of the organization

Riverside County Child Care Consortium

Employer identification number

33-0265253

Form 990, Part III, Line 4d - Other Program Services Description

The City of Riverside provides funds to provide assistance with the coordination and establishment of child care programs and services for city residents. The Consortium works with city departments, businesses, school districts, community organizations and public to develop additional child care programs and train child care providers.

Coordinated Specialization Training and Staff Development funds are used to provide professional growth opportunities throughout Riverside County to the Early Care and Child Development workforce. A large portion of the funds are used to contract with ten (10) community agencies that can provide specialized training in areas identified as high need for staff development. Additionally, funds are used to support a Resource Lending Library and van that serves both the incorporated and unincorporated areas of the county with quality curriculum and staff development training materials. Funds are also used to support national accreditation programs for both centers and family child care homes.

The Child Care Scholarship program provides scholarships to low/moderate income families who need temporary financial assistance to pay for child care services and do not qualify for or receive any other source of funding. The scholarships provide 50 to 70% subsidies to families for up to six months. To qualify, families must earn less than \$40,000 annually.

Form 990, Part VI, Line 10 - Form 990 Review Process

FORM 990, PART VI, SECTION A, LINE 10: RIVERSIDE COUNTY CHILD CARE CONSORTIUM

Name of the organization

Riverside County Child Care Consortium

Employer identification number

33-0265253

Form 990, Part VI, Line 10 - Form 990 Review Process (continued)

READILY MAKES ALL FINANCIAL DATA, POLICIES AND ANNUAL REPORTS AVAILABLE TO THE
GENERAL PUBLIC UPON REQUEST. IN ADDITION, THE 990 IS PRESENTED TO THE BOARD OF
DIRECTORS DURING A REGULARLY SCHEDULED BOARD MEETING FOR THEIR REVIEW PRIOR TO THE
RETURN BEING FILED.

Form 990, Part VI, Line 12c - Explanation of Monitoring and Enforcement of Conflicts

FORM 990, PART VI, SECTION B, LINE 12C: RIVERSIDE COUNTY CHILD CARE CONSORTIUM
REVIEWS THE WRITTEN CONFLICT OF INTEREST POLICY, SEMI-ANNUALLY, AT REGULARY
SCHEDULED BOARD MEETINGS, WITH KEY EMPLOYEES AND OFFICERS PRESENT, AND WITH
DISCUSSION AND CLARIFICATION OF ANY POINTS. IN ADDITION, THE STAFF IS REQUIRED TO
READ THE MANUAL AND SIGN A STATEMENT AT THE END ACKNOWLEDGING RECEIPT OF THE MANUAL
AND AGREEING TO ABIDE BY THE POLICIES AS OUTLINED. THEY ALSO AGREE TO ABIDE BY
FUTURE POLICIES SET FORTH BY RIVERSIDE COUNTY CHILD CARE CONSORTIUM.

Form 990, Part VI, Line 15b - Compensation Review & Approval Process for Officers & Key Employees

Officers are not compensated for their services.

Form 990, Part VI, Line 19 - Other Organization Documents Publicly Available

FORM 990, PART VI, SECTION C, LINE 19: RIVERSIDE COUNTY CHILD CARE CONSORTIUM
READILY MAKES ALL FINANCIAL DATA, POLICIES AND ANNUAL REPORTS AVAILABLE TO THE
GENERAL PUBLIC UPON REQUEST.

Client 102

Riverside County Child Care Consortium

33-0265253

1/12/10

03 08PM

Part I, Line 2 - Grantmaker's Description of How Grants are Used (continued)

agendas and notes will be kept on file.

Weekly project staff meetings will be scheduled to review project progress to ensure success. Records of meetings including agendas and notes will be kept on file.

Written reports will be submitted to Riverside County Child Care Consortium Board for review and discussion at quarterly meetings.

Ongoing communication with project funder and project staff will be established to ensure success.

Project staff will attend all required meetings with funder.

Project staff will complete reports; and maintain records and documentation as required by project funder.

Client 102

Riverside County Child Care Consortium

33-0265253

1/12/10

03 08PM

Form 990, Part IX, Line 24
Other Expenses

	(A) <u>Total</u>	(B) <u>Program Services</u>	(C) <u>Management & General</u>	(D) <u>Fundraising</u>
Consultants/Subcontractors	667,307.	667,307.		
Computer/Data Base Support	42,658.	42,658.		
Printing and Publications	42,246.	26,945.	15,301.	
Computer Technical Support	35,123.	35,123.		
Resource Lending Library	30,226.	30,226.		
Accreditation Expenses	27,243.	27,243.		
Postage and Shipping	16,595.	11,340.	5,255.	
Mileage	11,818.	8,471.	3,347.	
Facilitator/Presenter Fees	9,265.	9,265.		
Equipment Rental & Maintenan	8,375.	4,878.	3,497.	
Membership Fees	5,555.		5,555.	
Small Equipment	2,964.		2,964.	
Advertising	2,636.		2,636.	
Bank Service Charges	645.		645.	
Miscellaneous	216.		216.	
Total	<u>\$ 902,872.</u>	<u>\$ 863,456.</u>	<u>\$ 39,416.</u>	<u>\$ 0.</u>

6/30/09

2008 Federal Book Depreciation Schedule

Page 1

Client 102

Riverside County Child Care Consortium

33-0265253

1/12/10

03 08PM

No.	Description	Date Acquired	Date Sold	Cost/ Basis	Bus Pct.	Cur 179 Bonus	Special Depr Allow.	Prior 179/ Bonus/ Sp. Depr.	Prior Dec Bal Depr.	Salvage /Basis Reductn.	Depr Basis	Prior Depr.	Method	Life	Rate	Current Depr.	
Form 990/990-PF																	
Auto / Transport Equipment																	
53	Resource Library Van	3/14/07		27,587							27,587	7,608	S/L	MQ	5	20000	5,517
Total Auto / Transport Equipment												27,587	7,608				5,517
Furniture and Fixtures																	
3	42" 4 Drwr Filing Cab (4)	4/12/02		2,572							2,572	2,572	200DB	HY	7	04460	0
5	Office Table	1/30/04		478							478	372	200DB	HY	7	08920	43
7	Filing Cabinets	11/18/03		1,307							1,307	1,016	200DB	HY	7	08920	117
8	Training Room Furniture	12/05/03		2,987							2,987	2,321	200DB	HY	7	08920	266
9	Recpt Front Desk Station	12/17/03		4,757							4,757	3,696	200DB	HY	7	.08920	424
10	Office Furniture	12/18/03		2,207							2,207	1,714	200DB	HY	7	08920	197
11	Secretary Desk Station	1/29/04		6,665							6,665	5,177	200DB	HY	7	08920	595
12	Refrigerator/Microwave	4/08/04		1,020							1,020	792	200DB	HY	7	08920	91
13	Typewriter	3/04/04		143							143	111	200DB	HY	7	08920	13
14	Desk/Cabinets	6/30/05		2,663							2,663	1,832	200DB	HY	7	08930	238
24	File Cabinet	9/29/05		291							291	164	200DB	HY	7	12490	36
25	Office Furniture	10/10/05		3,410							3,410	1,918	200DB	HY	7	12490	426
26	Office Chairs	10/25/05		215							215	122	200DB	HY	7	12490	27
27	Rack for Flyers	11/29/05		225							225	126	200DB	HY	7	12490	28
28	Bookcase	12/19/05		452							452	255	200DB	HY	7	12490	56
29	Metal Shelves (3)	12/19/05		709							709	399	200DB	HY	7	12490	89
30	Lateral File Cabinets (2)	1/01/06		1,142							1,142	643	200DB	HY	7	12490	143
31	Shelving	1/19/06		522							522	294	200DB	HY	7	12490	65
32	Mobile Workstation	1/26/06		224							224	126	200DB	HY	7	12490	28

6/30/09

2008 Federal Book Depreciation Schedule

Page 2

Client 102

Riverside County Child Care Consortium

33-0265253

1/12/10

03 08PM

No.	Description	Date Acquired	Date Sold	Cost/ Basis	Bus Pct.	Cur 179 Bonus	Special Depr Allow.	Prior 179/ Bonus/ Sp. Depr.	Prior Dec Bal Depr.	Salvage /Basis Reductn.	Depr Basis	Prior Depr.	Method	Life	Rate	Current Depr.	
33	Desk/Crendza	2/23/06		3,617							3,617	2,036	200DB HY	7	12490	452	
34	Lateral File Cab (2Dr)	9/21/06		404							404	109	S/L MQ	7	14280	58	
35	Office Chair	11/28/06		215							215	50	S/L MQ	7	14280	31	
36	Shelving Units	2/07/07		2,000							2,000	393	S/L MQ	7	14280	286	
37	Printer Stands (2)	2/26/07		722							722	142	S/L MQ	7	14280	103	
38	3 Dr Lateral & Vert Cabin	3/06/07		905							905	178	S/L MQ	7	14280	129	
39	(10) Rolling Shelf Units	3/15/07		2,500							2,500	491	S/L MQ	7	14280	357	
40	(5) Work Stations	4/02/07		19,124							19,124	3,075	S/L MQ	7	14280	2,731	
41	Storage Cab/Workstation	4/16/07		622							622	100	S/L MQ	7	14280	89	
<hr/>																	
Total Furniture and Fixtures				62,098	0	0	0	0	0	0	62,098	30,224					7,118
<hr/>																	
Machinery and Equipment																	
<hr/>																	
1	Laptop Computers (2)	6/30/03		3,848							3,848	3,848	200DB MQ	3		0	
2	Mult Projector	6/30/03		1,880							1,880	1,880	200DB MQ	5		0	
4	Electronic Amplifier	1/29/04		356							356	335	200DB HY	5	05760	21	
6	Telephone System	11/18/03		2,629							2,629	2,043	200DB HY	7	08920	235	
15	Dell Computer/Monitors	6/30/05		7,711							7,711	6,379	200DB HY	5	11520	888	
16	Computers (2)	9/29/05		1,092							1,092	1,011	200DB HY	3	07410	81	
17	Dictaphone	11/22/05		362							362	258	200DB HY	5	11520	42	
18	Electronic Bundle Chassis	12/13/05		1,443							1,443	1,028	200DB HY	5	11520	166	
19	Projector Screen	12/19/05		881							881	496	200DB HY	7	12490	110	
20	Computers (3)	2/06/06		2,877							2,877	2,664	200DB HY	3	07410	213	
21	Computer Monitors (3)	2/20/06		750							750	694	200DB HY	3	07410	56	
22	Translation Equipment	3/15/06		1,500							1,500	1,068	200DB HY	5	11520	173	
23	Laptop Computer	4/02/06		1,936							1,936	1,793	200DB HY	3	07410	143	
42	Laser Prtr/Typewriter	11/28/06		286							286	93	S/L MQ	5	20000	57	

6/30/09

2008 Federal Book Depreciation Schedule

Page 3

Client 102

Riverside County Child Care Consortium

33-0265253

1/12/10

03 08PM

No.	Description	Date Acquired	Date Sold	Cost/ Basis	Bus Pct	Cur 179 Bonus	Special Depr Allow	Prior 179/ Bonus/ Sp. Depr.	Prior Dec Bal Depr.	Salvage /Basis Reductn.	Depr Basis	Prior Depr.	Method	Life	Rate	Current Depr.		
43	Audio Conference Unit	1/08/07		908							908		250	S/L	MQ	5	.20000	182
44	Digital Camera	2/08/07		358							358		99	S/L	MQ	5	20000	72
45	Printers	2/26/07		420							420		116	S/L	MQ	5	20000	84
46	Phone System Upgrade	5/04/07		4,467							4,467		1,005	S/L	MQ	5	20000	893
47	Inventory System Software	3/01/07		1,254							1,254		575	S/L	MQ	3	33340	418
48	Laptop/Printer - Van	3/07/07		1,856							1,856		851	S/L	MQ	3	33340	619
49	Color Printer	3/14/07		1,033							1,033		284	S/L	MQ	5	20000	207
50	Computers & Monitors	4/19/07		6,212							6,212		1,397	S/L	MQ	5	.20000	1,242
51	Shredder (2) & Proj Stan	6/12/07		1,105							1,105		249	S/L	MQ	5	20000	221
52	Lamp for LCD Projectors	5/03/07		443							443		100	S/L	MQ	5	20000	89
54	Equipment	6/30/07		1,022							1,022		230	S/L	MQ	5	20000	204
55	Desktop Computer & Monito	7/09/07		950							950		333	200DB	MQ	5	.26000	247
56	Amplifier	7/17/07		994							994		348	200DB	MQ	5	.26000	238
57	Laptop CDRT	9/06/07		1,359							1,359		476	200DB	MQ	5	26000	353
58	Computer Monitors (2)	11/15/07		420							420		105	200DB	MQ	5	30000	126
59	Network Server #1 and #2	6/23/08		4,254							4,254		213	200DB	MQ	5	38000	1,617
60	Dell Desktop	6/23/08		538							538		27	200DB	MQ	5	.38000	204
61	Dell Laptop	6/23/08		1,084							1,084		54	200DB	MQ	5	.38000	412
62	Computers (4)	6/30/08		2,400							2,400		120	200DB	MQ	5	38000	912
63	LCD Projectors (3)	6/30/08		1,896							1,896		95	200DB	MQ	5	38000	720
64	Dell Laptop	6/30/08		1,512							1,512		76	200DB	MQ	5	.38000	575
65	E-Z up Canopy-CSTSD Grant	5/15/07		294							294		86	200DB	HY	7	17490	51
Total Machinery and Equipment				62,330	0	0	0	0	0	0	62,330	30,679					11,891	
Total Depreciation				152,015	0	0	0	0	0	0	152,015	68,511					24,526	

