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Department of the Treasury Internal Revenue Service

### Return of Organization Exempt From Income Tax

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

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

OMB No 1545-0047

Open to Public Inspection

A For the 2009 calendar year, or tax year beginning 07-01-2009 and ending 06-30-2010 D Employer identification number B Check if applicable Please NORTH CAROLINA PARTNERSHIP FOR CHILDREN INC use IRS label or 56-1850485 Address change Doing Business As E Telephone number print or type. See Name change (919) 821-7999 pecific Initial return Number and street (or P O box if mail is not delivered to street address) Room/suite 1100 WAKE FOREST ROAD Instruc-G Gross receipts \$ 123,603,274 Terminated tions. City or town, state or country, and ZIP + 4 RALEIGH, NC 27604 Amended return Application pending Name and address of principal officer **H(a)** Is this a group return for CONNIE HOLTON affiliates? 1100 WAKE FOREST ROAD RALEIGH, NC 27604 H(b) Are all affiliates included? If "No," attach a list (see instructions) **✓** 501(c) (3) **◄** (insert no) **✓** 4947(a)(1) or **✓** 527 Tax-exempt status Group exemption number 🕨 Website: ► WWW NCSMARTSTART ORG K Form of organization 
✓ Corporation 
✓ Trust 
✓ Association 
✓ Other ► L Year of formation 1993 M State of legal domicile NC Part I Summary Briefly describe the organization's mission or most significant activities To advance a high-quality, comprehensive, accountable system of care and education for every North Carolina child beginning with a healthy birth We do this primarily by overseeing North Carolina's nationally-recognized initiative, Smart Start Activities & Governance Check this box 🔭 if the organization discontinued its operations or disposed of more than 25% of its net assets Number of voting members of the governing body (Part VI, line 1a) . Number of independent voting members of the governing body (Part VI, line 1b) . . . 22 Total number of employees (Part V, line 2a) . . 56 530 Total number of volunteers (estimate if necessary) . 0 7a Total gross unrelated business revenue from Part VIII, column (C), line 12. Net unrelated business taxable income from Form 990-T, line 34 **7**b 0 **Prior Year Current Year** Contributions and grants (Part VIII, line 1h) . 126,085,310 123,412,071 Program service revenue (Part VIII, line 2g) . 37,150 253,450 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 138,850 98,421 10 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 18,819 37,482 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12 126,496,429 123,585,124 118,806,532 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) . 121,368,388 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-Expenses 3,684,907 3,817,824 Professional fundraising fees (Part IX, column (A), line 11e) . . 16a 0 Total fundraising expenses (Part IX, column (D), line 25)  $\blacktriangleright$  36,031ь 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f) . 2,662,996 2,563,167 18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) 127,849,208 125,054,606 Revenue less expenses Subtract line 18 from line 12 . -1,469,482 19 -1,352,779 Net Assets or Fund Balances **Beginning of Current End of Year** Year 5,964,422 20 Total assets (Part X, line 16) . 6,917,138 21 Total liabilities (Part X, line 26) . 1,221,049 1,737,815

#### 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

#### Sian Here

\*\*\*\*\* 2011-05-16 Signature of officer connie holton ASSISTANT TREASURER Type or print name and title

Check if

empolyed 🕨 🦵

Cat No 11282Y

#### Paid Preparer's

Firm's name (or yours if self-employed), **Use Only** address, and ZIP + 4

Preparer's

ROBIN MCDUFFIE

Net assets or fund balances Subtract line 21 from line 20

BLACKMAN & SLOOP CPAs PA 1414 RALEIGH RD SUITE 300

CHAPEL HILL, NC 27517

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

Date

Preparer's identifying number

Phone no (919) 942-8700

(see instructions)

EIN ▶

5,696,089

4,226,607

#### Part III Statement of Program Service Accomplishments

Briefly describe the organization's mission

The mission is to advance a high-quality,	comprehensive, accountable	e system of care and education	for every North	Carolina child beginning
with a healthy hirth. We do this primarily h	ay overseeing North Carolina	s's nationally-recognized initia	IVA Smart Start	

2	Did the organization unde the prior Form 990 or 99	, ,	ant program se	rvices during the year	which were not listed on	┌ Yes ┌ No
	If "Yes," describe these i	new services on Sc	chedule O			
3	Did the organization ceaservices?		-	t changes in how it co	nducts, any program	┌ Yes ┌ No
	If "Yes," describe these	changes on Sched	ule O			
4		01(c)(4) organızat	ions and sectio	on 4947(a)(1) trusts a	largest program services bure required to report the arservice reported	• •
	(Code	) (Expenses \$	121,574,592	ıncludıng grants of \$	118,568,675 ) (Revenue \$	)
	the foundation for all future I children to learn skills they n in raising happy, healthy such benefits. Key findings include had received relatively more of each other and compleme 37 independently conducted began tracking this data - Child disabilities are identified at a improves the quality of child well as state insurance programs approximately 125,000 childratisk for development delay schools and 20 school district worked to ensure that Smart Smart Start local partnerships	learning, by -Improvinged for success in schools cessful children Resear at -Third-graders have funding for Smart Statent each other, so that evaluations all with pouldren have teachers we younger age and are care programs, connecting and helps improved the state of the state o	g children's early cool -Ensuring that of the leased in Mar higher standardize it and More at Fou the best outcomes sitive results, incluith higher levels of referred to early incts families to high ve parenting and estudy early educat working families in health-related series to ease school the mandates and oost effective tools	are and education program children are screened for de ch 2011 by Duke University of reading and math scores or when these children were shold for children exposed ding -More children attend education -More working stervention services -More plaquality child care and ofte arly literacy skills In the fision at the college level, alk eceived assistance from Srvices, 16,178 parents/guarr child transitions into kinder perated to the highest star and systems to do busines	is so that they are safe, healthy evelopmental delays -Providing py found that investments in Smai and lower special education place by younger -The favorable effects to more of each program. In addingly quality care -from 33% to a families receive help to afford his parents are engaged in positive per helps families pay for this care scal year ended June 30, 2010. Sowing them to stay in the profess	arents with tools that support them it Start generate broad education ement rates in those counties that for each program are independent tion, since 1996 there have been 54% since 2001, when Smart Start in quality care -More children with parenting practices This initiative, connects families to physicians as 10,733 teachers participated in 169 children with special needs or programs, and 53 elementary are doversight agency, NCPC in accountability, and integrity diaccounting, computer and
4b	(Code	) (Expenses \$	682,962	ıncludıng grants of \$	139,461 ) (Revenue \$	37,150 )
	comprehensive early care an Early Childhood Leadership N	d education system Ir letwork and the Quality	n addition to worki y Rating and Impr	ng with several states durii ovement System (QRIS) co	er states that want to learn how ng the fiscal year ended June 30, ontinued The Leadership Network	2010, implementation of the State
	elevate the quality of care a				ıs advancıng the use of ratıng ar pment	
4c						
4c	(Code Governance Strengthening Ir implement Smart Start in all	) (Expenses \$ nitiative This nonstate 100 counties The initiative the properties of the initiative the initiative the properties of the initiative	532,756 funded capacity bative seeks to stre	improve children's developments of \$ uilding program works to singthen governance and ex resources. In the fiscal year	1,000 ) (Revenue \$ trengthen and sustain the 77 local	nd improvement strategies to  ) Il nonprofit organizations that
4c	(Code Governance Strengthening Ir implement Smart Start in all community involvement, and	) (Expenses \$ nitiative This nonstate 100 counties The initial help these nonprofits 32 nonprofit organizat	532,756 funded capacity bative seeks to stre diversify financial tions and their boa	improve children's developments of \$ uilding program works to struct the governance and expressources. In the fiscal yeards.	1,000 ) (Revenue \$ trengthen and sustain the 77 loca ecutive leadership, increase dive ir ended June 30, 2010, intensive	) Il nonprofit organizations that risty and inclusion, expand
	(Code Governance Strengthening Ir implement Smart Start in all community involvement, and and training was provided to	) (Expenses \$ initiative This nonstate 100 counties The initial help these nonprofits 32 nonprofit organizate (Describe in Sch	532,756 funded capacity bative seeks to stre diversify financial tions and their boa	improve children's development of \$ uncluding grants of \$ uniding program works to singthen governance and ex resources In the fiscal yeards	1,000 ) (Revenue \$ trengthen and sustain the 77 loca ecutive leadership, increase dive ir ended June 30, 2010, intensive	) Il nonprofit organizations that risty and inclusion, expand

Part TV	Checklist	of Requir	ed Sche	dules
4: I L T L T	CHECKHSL	UI KEYUII	eu Stile	uuies

	•		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors? 🕏	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4	Yes	
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	5		
6	Did the organization maintain any donor advised funds or any similar funds or 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	6		No
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>	7		Νo
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		Νο
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		No
10	Did the organization, directly or through a related organization, hold assets in term, permanent,or quasi- endowments? If "Yes," complete Schedule D, Part V	10	Yes	
11	Is the organization's answer to any of the following questions "Yes"? If so,complete Schedule D,  Parts VI, VII, VIII, IX, or X as applicable	11	Yes	
	◆ Did the organization report an amount for land, buildings, and equipment in Part X, line10? If "Yes," complete Schedule D, Part VI.			
	◆ Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.			
	◆ Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.			
	◆ Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.			
	◆ Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.			
	◆ 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? If "Yes," complete Schedule D, Part X.			
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12	Yes	
12A	Was the organization included in consolidated, independent audited financial statements for the tax year? Yes No			
	If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional			
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
Ь	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If "Yes," complete Schedule F, Part I	14b		No
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 U S? If "Yes," complete Schedule F, Part II	15		No
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 U S ? <i>If "Yes," complete Schedule F, Part III</i>	16		No
17	Did the organization report a total of more than \$15,000, of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		No
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		No

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer questions 24b-24d and complete Schedule K. If "No," go to line 25	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
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?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	<b>Section 501(c)(3) and 501(c)(4) organizations.</b> Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If</i> "Yes," complete Schedule L, Part I	25a		Νο
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		No
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27		No
28	Was the organization a party to a business transaction with one of the following parties? (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part			
		28a		Νo
	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes,"</i> complete Schedule L, Part IV	28b		Νο
С	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or owner? <i>If</i> "Yes," complete Schedule L, Part IV	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Νo
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If</i> " <i>Yes,"</i> complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		Νo
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		No
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</i> "Yes," complete Schedule R, Part I	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34		No
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35		No
36	<b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		Νο
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		Νo
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?  Note, All Form 990 filers are required to complete Schedule O	38	Yes	

-orm 990 (2009)						
Part V	Statements Regarding Other IRS Filings and Tax Compliance					
		Vac	N			

			Yes	No
la	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of U.S. Information Returns. Enter -0- if not applicable			
	<b>1a</b> 50			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable  1b  0			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	<b>1</b> c	Yes	
2a	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			
Ь	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)	2b	Yes	
a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a		Νο
h	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		110
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)?	4a		Νο
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			
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Νo
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?  If "Yes" to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding	5b		No
	Prohibited Tax Shelter Transaction?	5с		
3	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?	6a	Yes	
Ь	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b	Yes	
	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		Νo
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		Νo
d	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Νo
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	7h		
	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		
	Sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966?	9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
)	Section 501(c)(7) organizations. Enter			
а	Initiation fees and capital contributions included on Part VIII, line 12 10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
1	Section 501(c)(12) organizations. Enter			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them )			
_		1,		
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the			

1100 WAKE FOREST ROAD

raleigh, NC 27604 (919) 821-7999

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

Se	ection A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body 1a 22			
b	Enter the number of voting members that are independent 1b 22			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No
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?	3		Νο
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		Νο
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		Νο
6	Does the organization have members or stockholders?	6		Νο
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	7a		Νο
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		Νο
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A , who cannot be reached at the			
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		Νo
	ection B. Policies (This Section B requests information about policies not required by the Internal			
Re	evenue Code.)		Yes	No
10a	Does the organization have local chapters, branches, or affiliates?	10a		No
	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?	10b		
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?			
114	Describe in Cabadula O the masses of any wood by the average to account to Form 000	11		No
IIA	Describe in Schedule O the process, if any, used by the organization to review the Form 990			
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
c	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	12c	Yes	
13	Does the organization have a written whistleblower policy?	13	Yes	
14	Does the organization have a written document retention and destruction policy?	14	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	Yes	
Ь	Other officers or key employees of the organization	15b	Yes	
	If "Yes" to line a or b, describe the process in Schedule O (See instructions )			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
b	taxable entity during the year?	16a		No
	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?	16b		
Se	ection C. Disclosure			
17	List the States with which a copy of this Form 990 is required to be filed▶			
18	Section 6104 requires an organization to make its Form 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 Additional Data Table			
20	State the name, physical address, and telephone number of the person who possesses the books and records of the	ne orga	ınızatıor	n <b>-</b>
	CONNIE HOLTON			

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

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

1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year. Use Schedule J-2 if additional space is needed

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and current key employees Enter -0- in columns (D), (E), and (F) if no compensation was paid
- List all of the organization's current key employees. 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, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

Check this box if the organization did i	not compen	sate any	y curi	rent	or fo	rmer	ffice	r, dırector, trustee	or key employee	
<b>(A)</b> Name and Title	(B) Average hours	Posi t	<b>(C</b> tion ( hat a	ched	ckal )	I		( <b>D)</b> Reportable compensation	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	<b>(F)</b> Estimated amount of other
	per week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	from the organization (W- 2/1099-MISC)		compensation from the organization and related organizations
See add'l data										

For	m 990 (2009)			Page					
1b	Total	0		66,87					
2	Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization 4								
			Yes	No					
3	Did the organization list any <b>former</b> officer, director or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual	3		No.					
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	4	Yes						
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? If "Yes," complete Schedule J for such person	5		No					
_	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								
	(A) (B) Name and business address Description of services		(C Compe						
182	RDSOURCE 8 L ST NW SUITE 900 SHINGTON, DC 20036 GOVERNANCE TECHNICAL ASSISTANCE			355,686					
103	SERVICES LLC 0 SWABIA COURT RHAM, NC 27703	$\perp$		102,098					
=		$\Rightarrow$							
2	Total number of independent contractors (including but not limited to those listed above) who received more than								

Form **990** (2009)

\$100,000 in compensation from the organization 🗠 2

Form 9	•	,						Page <b>9</b>
Part	<u> </u>	Statement of	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
nts ots	1a	Federated cam	paigns 1a					
ig ja	Ь	Membership du	ıes <b>1b</b>					
ું ∰	c	Fundraising eve	ents <b>1c</b>					
<u>≅</u> ,⊒	d		zations 1d					
ns, si⊞	e	Government grant						
er.	f	All other contribution similar amounts no	ons, gifts, grants, and <b>1f</b> ot included above	220,115				
Contributions, gifts, grants and other similar amounts	g		ibutions included in					
E E	h		s 1a-1f	▶	123,412,071			
O 46	<b>├</b> "	Total: Add filles			,,			
III e	2a	CONFERENCE REG	GISTRATIO	Business Code 900,099	37,150	37,150		
Program Service Revenue	Ь			300,033	37,130	37,130		
	c							
er K	d	-						
ű E	e							
្យាន	f	All other progra	am service revenue					
Š	g	Total. Add lines	s 2a-2f		37,150			
	3		ome (including dividen		27,130			
			aramounts)	<del> </del>	98,421			98,421
	4	Income from inves	stment of tax-exempt bond	proceeds 🕨				
	5	Royalties						
		Cross Bonto	(ı) Real	(II) Personal				
	6a b	Gross Rents Less rental						
	_ c	expenses Rental income						
	_	or (loss)						
	d	Net rental inco	me or (loss)  (i) Securities	(II) O ther				
	7a	Gross amount from sales of assets other	(i) Securities	(ii) o thei				
	ь	than inventory Less cost or other basis and						
	c	sales expenses Gaın or (loss)						
	d	Net gaın or (los	ss)	►				
ıne	8a	Gross income f events (not inc \$	from fundraising luding					
Other Revenue		of contributions	s reported on line 1c) ne 18					
Тег	Ь	Less directex	penses b					
₹	С		(loss) from fundraising	events 🟲				
	9a		from gaming activities ne 19 a					
	b c		penses <b>b</b> (loss) from gaming acti	vities				
	10a	Gross sales of returns and allo	owances .					
	b		a oods sold b (loss) from sales of invo	21,852 18,150	3,702			3,702
	۲	Miscellaneous		Business Code	-,			1,112
	11a	MISCELLANEC	DUSINCOME	900,099	33,780	33,780		
	ь							
	c							
	d	All other reven						
	e	Total. Add lines	s 11a-11d		33,780			
	12	Total revenue.	See Instructions .	▶	123,585,124	70,930	0	102,123

	990 (2009)				Page <b>10</b>
Par	IX Statement of Functional Expenses				_
	Section 501(c)(3) and 501(c)(4) organizations m			(D)	
	ll other organizations must complete column (A) but are not required to		(B), (C), and ( (B)	(C)	(D)
	ot include amounts reported on lines 6b, b, 9b, and 10b of Part VIII.	(A) Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to governments and organizations in the U S $$ See Part IV , line 21 $$	118,789,080	118,789,080		
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22	17,452	17,452		
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	424,290	115,610	308,680	
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	2,514,149	1,918,341	565,002	30,806
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	172,676	132,506	38,005	2,165
9	Other employee benefits	351,224	252,750	97,955	519
10	Payroll taxes	222,568	152,087	68,117	2,364
11	Fees for services (non-employees)	,			
 a	Management	2,855		2,855	
h	Legal	8,787		8,787	
c	Accounting	8,755		8,755	
d	Lobbying	0,733		0,733	
e	Professional fundraising See Part IV, line 17				
	Investment management fees				
f	-	1 726 120	1.676.016	40.214	
g 42	Other	1,726,130	1,676,916	· +	
12	Advertising and promotion	3,281	666	2,615	
13	Office expenses	32,980	20,152	12,828	
14	Information technology	76,123	45,655	30,468	
15	Royalties				
16	Occupancy	325,604		325,604	
17	Travel	49,792	44,635	5,057	100
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	84,556	74,172	10,384	
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	65,222		65,222	
23	Insurance	9,467		9,467	
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 )				
а	REPAIRS AND MAINTENANCE	89,706	82,143	7,563	
ь	Miscellaneous	32,811	22,099	10,685	27
c	EQUIPMENT RENTAL	28,465	26,150	2,315	
d	Dues & Subscriptions	18,633	10,966	7,617	50
e					
f	All other expenses				
25	Total functional expenses. Add lines 1 through 24f	125,054,606	123,381,380	1,637,195	36,031
26	Joint costs. Check here ► ☐ If following SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational	225,55 1,550		2,037,133	23,031
	campaign and fundraising solicitation				

Part X Balance Sheet (A) (B) Beginning of year End of year 264.819 444,144 1 1 Cash—non-interest-bearing . . . . . . . . . . . . 4.501.664 2 4.076.336 2 1,118,136 105,243 3 3 4 775,535 1.042.330 5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of 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 6 Notes and loans receivable, net . . . . . 7 8 Inventories for sale or use . . . . . . 80.654 9 141,636 Prepaid expenses and deferred charges . . . . . . . . . . . . 385.036 10a Land, buildings, and equipment cost or other basis Complete 10a Part VI of Schedule D 10b 230.303 176.330 154.733 b Less accumulated depreciation . . . . 10c 11 11 12 12 Investments—other securities See Part IV, line 11 . . . . . . . . . 13 13 Investments—program-related See Part IV, line 11 . . 14 14 15 15 16 6,917,138 16 5,964,422 Total assets. Add lines 1 through 15 (must equal line 34) . . . 401.171 17 253.864 17 Accounts payable and accrued expenses . 18 18 22,334 19 19 20 20 Liabilities 21 Escrow or custodial 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 22 23 23 Secured mortgages and notes payable to unrelated third parties . . 24 Unsecured notes and loans payable to unrelated third parties . . . . 24 797.544 25 Other liabilities Complete Part X of Schedule D . . . . . 25 1,483,951 26 **Total liabilities.** Add lines 17 through 25 . . . . . 1,221,049 1,737,815 Organizations that follow SFAS 117, check here ▶ 🔽 and complete lines 27 Balances through 29, and lines 33 and 34. 2.415.389 2,446,819 27 Unrestricted net assets . . . . 27 28 3.260.700 28 1.759.388 Temporarily restricted net assets . . . . . Fund 20.000 20.400 29 29 Permanently restricted net assets . . . . . Organizations that do not follow SFAS 117, check here ▶ □ and complete lines 30 through 34. ö 30 30 Capital stock or trust principal, or current funds . . . Assets 31 31 Paid-in or capital surplus, or land, building or equipment fund . . . . . 32 32 Retained earnings, endowment, accumulated income, or other funds ¥ Total net assets or fund balances . . . . 33 5,696,089 33 4,226,607 34 Total liabilities and net assets/fund balances . . . . . 6.917.138 5.964.422 34

#### Part XI Financial Statements and Reporting

			Yes	No
1	Accounting method used to prepare the Form 990			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		Νo
b	Were the organization's financial statements audited by an independent accountant?	2b	Yes	
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? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	2c	Yes	
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a consolidated basis, separate basis, or both			
	▼ Separate basis			
3а	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?	3a		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	3b		

Form **990** (2009)

OMB No 1545-0047

**SCHEDULE A** (Form 990 or 990EZ)

Department of the Treasury Internal Revenue Service

## **Public Charity Status and Public Support**

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

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

Inspection

Name of the organization NORTH CAROLINA PARTNERSHIP FOR CHILDREN INC  Employer identification number												
NORTI	1 CARC	ошна ракт	NERSHIP FOR	CHILDREN INC					56-1850485	5		
Pa	rt I	Reas	on for Pul	olic Charity Stat	<b>us</b> (All orga	anızatıons ı	nust comple					
The	rganı			foundation because								
1	$\Gamma$	A churc	h, conventio	on of churches, or as	sociation of d	hurches <b>se</b>	ction 170(b)(	(1)(A)(i).				
2	$\Gamma$	A scho	A school described in section 170(b)(1)(A)(ii). (Attach Schedule E)									
3	$\Gamma$	A hosp	ıtal or a coop	erative hospital serv	vice organiza	tion describ	ed in <b>section</b>	170(b)(1)(A	.)(iii).			
4	Γ	A medical research organization operated in conjunction with a hospital described in <b>section 170(b)(1)(A)(iii).</b> Enter the hospital's name, city, and state										
5	Γ	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	$\Gamma$	A feder	al, state, or	local government or	governmenta	l unit descri	bed ın <b>sectio</b> ı	n 170(b)(1)(	A)(v).			
7	<b>▽</b>	describ	ed ın	t normally receives a		part of its si	upport from a	government	al unit or fron	n the general	public	:
8	$\sqcap$	A comr	nunity trust	described in <b>section</b>	170(b)(1)(A	)(vi) (Comp	olete Part II )	l				
9	$\Gamma$	Anorga	nızatıon tha	t normally receives	(1) more tha	n 331/3% of	ıts support fr	rom contribut	tions, membe	rship fees, a	nd gro	ss
		receipt	s from actıvı	ties related to its ex	empt functioi	ns—subject 1	to certain exc	eptions, and	l (2) no more	than 331/3%	of	
		ıts sup <sub>l</sub>	oort from gro	ss investment incom	ne and unrela	ted business	s taxable inco	ome (less se	ction 511 tax	() from busın	esses	
		acquire	d by the org	anızatıon after June 3	30,1975 Se	e <b>section 50</b>	<b>9(a)(2).</b> (Cor	mplete Part I	II)			
10	Γ	Anorga	anızatıon org	anızed and operated	exclusively t	to test for pu	blic safety S	ee <b>section 5</b> 0	09(a)(4).			
11	Γ	one or i	more publicly	anized and operated supported organizations besthe type of support  b Type II	tions describ orting organiz	ed in sectio ation and co	n 509(a)(1) c	or section 50 11e through	9(a)(2) See	•	a)(3).	. Check
e f	Γ	other th	nan foundatio 509(a)(2)	x, I certify that the con managers and other received a written de	er than one o	r more publi	cly supported	d organizatioi	ns described	in section 50	09(a)(	1) or
g		Since A	his box ugust 17, 2 g persons?	006, has the organiz	ation accept	ed any gıft o	r contributior	n from any of	the			l
			• .	ectly or indirectly co	ntrols, eithei	r alone or tog	gether with pe	ersons descr	ıbed ın (ıı)		Yes	No
		and (III)	) below, the g	overning body of the	the support	ed organızat	ion?			11g(i)		
		(ii) a fa	mily membe	r of a person describ	ed in (i) abov	e?				11g(ii)		
		(iii) a 3	5% controll	ed entity of a person	described in	(ı) or (ıı) ab	ove?			11g(iii)		
h 		Provide	the followin	g information about t	the supported	d organizatio	n(s)					
(i Nam suppo organiz		e of rted	(ii) EIN	(iii) Type of organization (described on lines 1- 9 above or IRC section (see	(iv) Is the organizati col (i) list your gove docume	on in ed in rning	organızatı col (ı) of	ou notify the Is the anization in organization in Col (i) of your Col (i) organized A mou			( <b>vii)</b> ount of oport?	
		instructions)) Yes No Yes No Yes No										
			1	1	Ì	1		1	1		I	

Total

## Support Schedule for Organizations Described in IRC 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.)

	(Complete only if y	ou checked the	box on line 3,	, or o or Fart 1	)			
	ection A. Public Support endar year (or fiscal year beginning	.						
Car	in)	(a) 2005	<b>(b)</b> 2006	<b>(c)</b> 2007	( <b>d)</b> 2008	<b>(e)</b> 200	9	<b>(f)</b> Total
1	Gifts, grants, contributions, and							
	membership fees received (Do	121,184,280	130,761,603	133,536,436	126,085,310	123,4	12,071	634,979,700
	not include any "unusual		, ,	, ,	, ,	,	, I	, ,
_	grants ")							
2	Tax revenues levied for the organization's benefit and either							
	paid to or expended on its							
	behalf							
3	The value of services or facilities							
	furnished by a governmental unit							
	to the organization without							
	charge							
4	<b>Total.</b> Add lines 1 through 3	121,184,280	130,761,603	133,536,436	126,085,310	123,4	12,071	634,979,700
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							634,979,700
	from line 4							
	ection B. Total Support							
Cale	endar year (or fiscal year	(a) 2005	<b>(b)</b> 2006	(c) 2007	(d) 2008	<b>(e)</b> 200	9	(f) Total
_	beginning in)	121,184,280	138,536	133,536,436	126,085,310	123./	12,071	634,979,700
7	A mounts from line 4 Gross income from interest,	121,104,200	130,330	133,330,430	120,003,310	123,4	12,071	034,979,700
8	dividends, payments received							
	on securities loans, rents,	145,084	138,536	186,607	146,425		98,421	715,073
	royalties and income from			,	·			•
	sımılar sources							
9	Net income from unrelated							
	business activities, whether or							
	not the business is regularly							
	carried on							
10	Other income (Explain in Part							
	IV ) Do not include gain or loss from the sale of capital	54,742	64,105	56,958	18,819		37,482	232,106
	assets							
11	Total support (Add lines 7							625.026.070
	through 10)							635,926,879
12	Gross receipts from related activi	ties, etc (See ins	tructions )		•	12		1,135,565
13	First Five Years If the Form 990 is	s for the organizat	ıon's fırst, second	. third, fourth, or f	fifth tax vear as a !	501(c)(3)	organiz	ation,
	check this box and <b>stop here</b>	-			·		-	<b>▶</b> □
	ection C. Computation of Pu			4.4 1 (0)				
14	Public Support Percentage for 20			11 column (t))		14		99 850 %
15	Public Support Percentage for 20	08 Schedule A, Pa	art II, line 14			15		99 840 %
16a	33 1/3% support test—2009. If th				line 14 is 33 1/3%	or more,	check th	
L	and <b>stop here.</b> The organization qu	•	, ,,			2 4/20/		<b>▶</b>  ▼
D	33 1/3% support test—2008. If the box and stop here. The organization	-			oa, and line 15 is a	3 1/3% 0	more, o	Eneck this
17a	10%-facts-and-circumstances tes	·		-	ne 13 16a or 16h	and line :	14	-1
-, -	is 10% or more, and if the organiz	_						
	in Part IV how the organization me							ed
	organization				,	, =,	· •	Ĩ <b>⊳</b> ┌
Ь	10%-facts-and-circumstances tes	<b>t—2008.</b> If the org	janization did not o	heck a box on lir	ne 13, 16a, 16b, o	r 17a and	lıne	
	15 is 10% or more, and if the orga			•		-		
	Explain in Part IV how the organiz	zation meets the "	facts and circums	tances" test The	organization qual	ıfıes as a	oublicly	<u>. –                                     </u>
	supported organization			16-161 17	. 476 -6		_	▶□
18	<b>Private Foundation</b> If the organizations	ation did not check	ka box on line 13,	10a, 10b, 1/a o	r 1 / b, cneck this i	oox and se	ee	<b>▶</b> □
	1113 (1 (1 (1 (1 (1 (1 (1 (1 (1 (1 (1 (1 (1							F 1

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

	(Complete only if you	cnecked the	box on line 9 o	r Part I.)			
	ction A. Public Support			<u> </u>	1	T	ı
Cale	ndar year (or fiscal year beginning in)	(a) 2005	<b>(b)</b> 2006	(c) 2007	( <b>d)</b> 2008	(e) 2009	<b>(f)</b> 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						
3	purpose Gross receipts from activities that				+		
3	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	A mounts included on lines 1, 2, and 3 received from disqualified						
	persons				1		
ь	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						
с	Add lines 7a and 7b						
8	Public Support (Subtract line 7c						
	from line 6 )						
	ction B. Total Support		1			1	Γ
Cale	ndar year (or fiscal year beginning in)	(a) 2005	<b>(b)</b> 2006	<b>(c)</b> 2007	( <b>d)</b> 2008	(e) 2009	(f) Total
9	A mounts from line 6						
10a	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar sources						
ь	Unrelated business taxable						
	ıncome (less section 511 taxes)						
	from businesses acquired after						
_	June 30, 1975 Add lines 10a and 10b						
c 11	Net income from unrelated						
	business activities not included						
	ın lıne 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,						
14	11 and 12 ) First Five Years If the Form 990 is for	or the organizat	lon's first, second	L third fourth or	l fifth tax vear as a	1 a 501(c)(3) organ	l uzation
	check this box and <b>stop here</b>	or the organizat		., 4,	men tax your as t	(c)(c) c.gu.	<b>▶</b> ┌
	ction C. Computation of Publ						
15	Public Support Percentage for 2009	(line 8 column	(f) divided by line	13 column (f))		15	
16	Public support percentage from 200	8 Schedule A , F	art III, line 15			16	
Se	ction D. Computation of Inve	stment Inco	ome Percenta	ge			
17	Investment income percentage for 2	<b>009</b> (line 10c c	olumn (f) dıvıded	by line 13 columi	n (f))	17	
18	Investment income percentage from	<b>2008</b> Schedule	A, Part III, line 1	L 7		18	
19a	33 1/3% support tests—2009. If the	organization di	d not check the b	ox on line 14, and	d line 15 is more	than 33 1/3% and	d line 17 is not
	more than 33 1/3%, check this box a	ind <b>stop here.</b> T					
L	organization 33 1/3% support tests—2008. If the	► C	d not chastes here	on line 14 amilion	100 and line 4	5 ic mara +ha= 22	1/20/2 and line
b	שר בו בע suppoit tests—zouo. If the	organization (I	и посепеска вох	OILLINE TH OLINE	= ⊥⊃a, anu nne 1(	us more man 33	1/370 and ine

18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization **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.** 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

Schedule A (Form 990 or 990-EZ) 2009

DLN: 93493136037401

OMB No 1545-0047

Open to Public Inspection

#### **SCHEDULE C** (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

For Organizations Exempt From Income Tax Under section 501(c) and section 527 ► Complete if the organization is described below.

**Political Campaign and Lobbying Activities** 

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

If the organization answered "Yes," to Form 990, Part IV, Line 3, or Form 990-EZ, Part VI, line 46 (Political Campaign Activities),

- ◆ Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C
- ◆ Section 501(c) (other than section 501(c)(3)) organizations Complete Parts I-A and C below Do not complete Part I-B
- ◆ Section 527 organizations Complete Part I-A only

	me of the organization	zations Complete Part III		Employe	rıdent	tification number
NO	RTH CAROLINA PARTNERSHIP FOR CHI	LDREN INC		56-1850	1485	
ar	t I-A Complete if the or	ganization is exempt und	ler section 501(			organization.
1	Provide a description of the or	ganızatıon's dırect and ındırect p	olitical campaign ac	tivities in Part IV		
2	Political expenditures		, ,	•		\$
3	Volunteer hours					
ar	toonplete if the or	ganization is exempt und	ler section 501(	c)(3).		
1		e tax incurred by the organization			<b>F</b>	\$
2		e tax incurred by organization ma			<b>&gt;</b>	\$
3		ection 4955 tax, did it file Form				Yes
4a	Was a correction made?					☐ Yes ☐ No
ь	If "Yes," describe in Part IV					
Par	t I-C Complete if the or	ganization is exempt und	ler section 501(	c) except section	า 501	.(c)(3).
1	Enter the amount directly expe	ended by the filing organization fo	r section 527 exem	pt function activities	<b> -</b>	\$
2	Enter the amount of the filing of exempt funtion activities	organization's funds contributed t	o other organization	s for section 527	F	\$
3	Total exempt function expendi	tures Add lines 1 and 2 Enter h	ara and an Earm 11	00 DOL 1:== 17h	_	
			ere and on Form 112	20-POL, line 176	-	\$
4	Did the filing organization file I		ere and on Form 112	20-POL, line 176	•	\$ Yes
	State the names, addresses as were made For each organizat contributions received that we		r (EIN) of all sectior from the filing organ d to a separate polit	ı 527 political organiz ızation's funds Also e ıcal organization, such	nter th	to which payments he amount of political
	State the names, addresses as were made For each organizat contributions received that we	Form 1120-POL for this year? nd employer identification numbe ion listed, enter the amount paid re promptly and directly delivere	r (EIN) of all sectior from the filing organ d to a separate polit	ı 527 political organiz ızation's funds Also e ıcal organization, such	nter the a a a a a a a a a a a a a a a a a a a	to which payments he amount of political
	State the names, addresses at were made For each organizat contributions received that we fund or a political action comm	Form 1120-POL for this year?  Ind employer identification number ion listed, enter the amount paid re promptly and directly delivere intered (PAC) If additional space	r (EIN) of all section from the filing organ d to a separate polit is needed, provide in	n 527 political organiz ization's funds Also e ical organization, such formation in Part IV (d) Amount paid f filing organization	nter the a a a a a a a a a a a a a a a a a a a	to which payments he amount of political separate segregated  (e) A mount of political contributions receive and promptly and directly delivered to a separate political organization. If none
	State the names, addresses at were made For each organizat contributions received that we fund or a political action comm	Form 1120-POL for this year?  Ind employer identification number ion listed, enter the amount paid re promptly and directly delivere intered (PAC) If additional space	r (EIN) of all section from the filing organ d to a separate polit is needed, provide in	n 527 political organiz ization's funds Also e ical organization, such formation in Part IV (d) Amount paid f filing organization	nter the a a a a a a a a a a a a a a a a a a a	to which payments he amount of political separate segregated  (e) A mount of political contributions receive and promptly and directly delivered to a separate political organization. If none
	State the names, addresses at were made For each organizat contributions received that we fund or a political action comm	Form 1120-POL for this year?  Ind employer identification number ion listed, enter the amount paid re promptly and directly delivere intered (PAC) If additional space	r (EIN) of all section from the filing organ d to a separate polit is needed, provide in	n 527 political organiz ization's funds Also e ical organization, such formation in Part IV (d) Amount paid f filing organization	nter the a second	to which payments he amount of political separate segregated  (e) A mount of political contributions receive and promptly and directly delivered to a separate political organization. If none
	State the names, addresses at were made For each organizat contributions received that we fund or a political action comm	Form 1120-POL for this year?  Ind employer identification number ion listed, enter the amount paid re promptly and directly delivere intered (PAC) If additional space	r (EIN) of all section from the filing organ d to a separate polit is needed, provide in	n 527 political organiz ization's funds Also e ical organization, such formation in Part IV (d) Amount paid f filing organization	nter the a second	to which payments he amount of political separate segregated  (e) A mount of political contributions receive and promptly and directly delivered to a separate political organization. If none,
	State the names, addresses at were made For each organizat contributions received that we fund or a political action comm	Form 1120-POL for this year?  Ind employer identification number ion listed, enter the amount paid re promptly and directly delivere intered (PAC) If additional space	r (EIN) of all section from the filing organ d to a separate polit is needed, provide in	n 527 political organiz ization's funds Also e ical organization, such formation in Part IV (d) Amount paid f filing organization	nter the a second	to which payments he amount of political separate segregated  (e) A mount of political contributions receive and promptly and directly delivered to a separate political organization. If none
	State the names, addresses at were made For each organizat contributions received that we fund or a political action comm	Form 1120-POL for this year?  Ind employer identification number ion listed, enter the amount paid re promptly and directly delivere intered (PAC) If additional space	r (EIN) of all section from the filing organ d to a separate polit is needed, provide in	n 527 political organiz ization's funds Also e ical organization, such formation in Part IV (d) Amount paid f filing organization	nter the a second	to which payments he amount of political separate segregated  (e) A mount of political contributions receive and promptly and directly delivered to a separate political organization. If none

e Grassroots ceiling amount (150% of line 2d, column (e))

**f** Grassroots lobbying expenditures

Pa	art II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).								
	Check If the filing organization belongs to an affiliated group  Check If the filing organization checked box A and "limited control" provisions apply								
<u> </u>	Limits on Lobbying E  (The term "expenditures" means ar	Expenditures			(a) Filing Organization's Totals	(b) Affiliated Group Totals			
1a	Total lobbying expenditures to influence public o	ppinion (grass roots lob	bying)						
b	Total lobbying expenditures to influence a legisla	ative body (direct lobby	yıng)						
c	Total lobbying expenditures (add lines 1a and 18	b)							
d	Other exempt purpose expenditures								
e	Total exempt purpose expenditures (add lines 1	c and 1d)							
f	Lobbying nontaxable amount Enter the amount f	from the following table	ın both						
	If the amount on line 1e, column (a) or (b) is: Not over \$500,000	The lobbying nontaxa 20% of the amount on lir							
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the	e excess over \$500,00	0					
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the	e excess over \$1,000,0	000					
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the	excess over \$1,500,00	00					
	Over \$17,000,000	\$1,000,000							
		•							
g	Grassroots nontaxable amount (enter 25% of lin	ne 1 f)							
h	Subtract line 1g from line 1a If zero or less, enter	er -0-							
i	Subtract line 1f from line 1c If zero or less, ente	er - 0 -							
j	If there is an amount other than zero on either li section 4911 tax for this year?	ne 1h or line 1ı, did the	organization file F	orm 4720 repoi	rtıng	┌ Yes ┌ No			
	(Some organizations that made a columns below. See the	he instructions fo	ection do not l r lines 2a thro	nave to com ugh 2f on pa		ne five			
	Lobbying Exp	enditures During	4-Year Averag	ing Period	I	ı			
	Calendar year (or fiscal year beginning in)	(a) 2006	<b>(b)</b> 2007	<b>(c)</b> 2008	( <b>d)</b> 2009	<b>(e)</b> Total			
2a	Lobbying non-taxable amount								
b	Lobbying ceiling amount (150% of line 2a, column(e))								
c	Total lobbying expenditures								
d	Grassroots non-taxable amount								

Part II-B	Complete if the organization is ex	empt under section 501(c)(3)	and has NOT filed Form 5768
	(election under section 501(h)).		

		(a	(a) (b)	
		Yes	No	A mount
	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of			
а	Volunteers?	Yes		
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?	Yes		
c	Media advertisements?			
d	Mailings to members, legislators, or the public?	Yes		
e	Publications, or published or broadcast statements?	Yes		2,368
f	Grants to other organizations for lobbying purposes?	Yes		14,000
g	Direct contact with legislators, their staffs, government officials, or a legislative body?	Yes		82,852
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?			
i	Other activities? If "Yes," describe in Part IV	Yes		4,200
j	Total lines 1c through 1:			103,420
a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		No	
b	If "Yes," enter the amount of any tax incurred under section 4912			
c	If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?		-	

## Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

			Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?	1		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?	2		
3	Did the organization agree to carryover lobbying and political expenditures from the prior year?	3		

# Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part III-A, line 3 is answered "Yes".

1	Dues, assessments and similar amounts from members	1	
2	Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		
а	Current year	2a	
b	Carryover from last year	2b	
С	Total	2c	

**3** Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues

If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?

5 Taxable amount of lobbying and political expenditures (see instructions)

#### Part IV Supplemental Information

Complete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, and Part II-B, line 1, Also, complete this part for any additional information

Ident if ier	Return Reference	Explanation
· · · · · · · · · · · · · · · · · · ·	Activities	TO PROVIDE LEGISLATIVE STRATEGY TO NORTH CAROLINA'S EARLY CHILDHOOD INITIATIVE TO PREPARE CHILDREN FROM BIRTH TO FIVE FOR SCHOOL THROUGH FACILITATION OF MEETINGS WITH LEGISLATORS
Part IV , Supplemental Information		part II-b line 1I the organization facilitated meetings with state legislators for other nonprofit organizations

3

4

5

efile GRAPHIC print - DO NOT PROCESS

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DLN: 93493136037401

OMB No 1545-0047

Open to Public Inspection

### SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

### **Supplemental Financial Statements**

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

**Employer identification number** Name of the organization NORTH CAROLINA PARTNERSHIP FOR CHILDREN INC 56-1850485 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 Total number at end of year Aggregate contributions to (during year) 3 Aggregate grants from (during year) Aggregate value at end of year

Did the organization inform all donors and donor advisors in writing that the assets held in donor advised □ No funds are the organization's property, subject to the organization's exclusive legal control? 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 for any other purpose conferring impermissible private benefit

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

Pur	Purpose(s) of conservation easements held by the organization (check all that apply)								
Γ	Preservation of land for public use (e g , recreation or pleasure)	Γ	Preservation of an historically importantly land area						
Γ	Protection of natural habitat	$\vdash$	Preservation of a certified historic structure						
	Preservation of open space								

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

Total number of conservation easements Total acreage restricted by conservation easements

Number of conservation easements on a certified historic structure included in (a)

Number of conservation easements included in (c) acquired after 8/17/06

Held at the End of the Year 2a 2b 2c 2d

Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during 3 the taxable year 🛌

Number of states where property subject to conservation easement is located 🛌

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

Staff and volunteer hours devoted to monitoring, inspecting and enforcing conservation easements during the year 🕨

7 A mount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ \$\_\_\_\_\_ Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(ı) and 170(h)(4)(B)(ıı)?

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.

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

If the organization elected, as permitted under SFAS 116, 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

following amounts required to be reported under SFAS 116 relating to these items

(ii) Assets included in Form 990, Part X

If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the

Revenues included in Form 990, Part VIII, line 1

Assets included in Form 990, Part X For Privacy Act and Paperwork Reduction Act Notice, see the Intructions for Form 990

ar	<b>Til</b> Organizations Maintaining Co	llections of Art,	Hist	orical T	reasu	res, or O	the	r Similar	<u>Asse</u>	ts (co	ntınued,
3	Using the organization's accession and othe items (check all that apply)	r records, check any	ofthe	following	that are	e a significa	ant u	se of its coll	ection	า	
а	Public exhibition		d	┌ Loan	orexch	nange progr	ams				
b	Scholarly research		e	┌ Othe	er						
c	Preservation for future generations										
ŀ	Provide a description of the organization's co Part XIV	ollections and explai	n how	they furth	er the o	rganızatıon	's ex	cempt purpos	se in		
5	During the year, did the organization solicit of assets to be sold to raise funds rather than t		,	,				nılar	Г	Yes	┌ No
aı	t IV Escrow and Custodial Arrang					answere	d "Y	es" to Forr	n 990	),	
	Part IV, line 9, or reported an an			•							
a	Is the organization an agent, trustee, custod included on Form 990, Part X?				utions o	or other ass	etsı	not	Γ	Yes	Г No
b	If "Yes," explain the arrangement in Part XI	/ and complete the f	ollowii	ng table		г					
						-	_		A mou	Int	
с	Beginning balance						1c				
d	Additions during the year					-	1d				
е	Distributions during the year						1e				
f	Ending balance					L	1f				
3	Did the organization include an amount on Fo	orm 990, Part X, line	21?						Γ	Yes	┌ No
	If "Yes," explain the arrangement in Part XIV										
a	rt V Endowment Funds. Complete										
	D	(a)Current Year 20,175	(b)	Prior Year	(c)Tw	o Years Back	(d)	Three Years Ba	ick (e	)Four Ye	ears Back
1	Beginning of year balance	1,151		20,45	:5						
	Contributions	858		72	_						
c	Investment earnings or losses	1,000		1,00	_						
d	Grants or scholarships	1,000		1,00	,,,,						
е	Other expenditures for facilities and programs										
f	Administrative expenses										
g	End of year balance	21,184		20,17	75						
_	Provide the estimated percentage of the yea	r end balance held a	s		_						
а	Board designated or quasi-endowment										
- b	Permanent endowment										
c a	Term endowment ►  Are there endowment funds not in the posses	ssion of the organiza	tion th	hat are he	ld and a	dministere	d for	the			
-	organization by	oston of the organiza		nat are ne	ia ana a	a i i i i i i i i i i i i i i i i i i i	u 101	tiic		Yes	No
	(i) unrelated organizations							[	3a(i)		Νo
	(ii) related organizations							📑	3a(ii)		Νo
	If "Yes" to 3a(II), are the related organizatio						٠		3b		
	Describe in Part XIV the intended uses of th				000 5		4.0				
aı	t VI Investments—Land, Buildings	s, and Equipmer	1t. Se					I			
	Description of investment			(a) Cost basis (inve		(b)Cost or obasis (oth		(c) Accumul depreciati		( <b>d)</b> Bo	ok value
а	Land										
b	Buildings										
С	Leasehold improvements										
d	Equipment					385	5,036	23	30,303		154,733
e	Other										

154,733

Part VIII Investments—Other Securities. See	Form 990, Part X, line 12		
(a) Description of security or category	(b)Book value		lofvaluation
(including name of security)		Cost or end-of-	year market value
Financial derivatives			
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	
			l of valuation
(a) Description of investment type	(b) Book value		year market value
	<u> </u>		
Total. (Column (b) should equal Form 990, Part X, col (B) line 13 )			
Part IX Other Assets. See Form 990, Part X, lir	ne 15.		
	ne 15.		<b>(b)</b> Book value
Part IX Other Assets. See Form 990, Part X, lir	ne 15.		(b) Book value
Part IX Other Assets. See Form 990, Part X, lir	ne 15.		(b) Book value
Part IX Other Assets. See Form 990, Part X, lir	ne 15.		<b>(b)</b> Book value
Part IX Other Assets. See Form 990, Part X, lir	ne 15.		( <b>b)</b> Book value
Part IX Other Assets. See Form 990, Part X, lir	ne 15.		(b) Book value
Part IX Other Assets. See Form 990, Part X, lir	ne 15.		(b) Book value
Part IX Other Assets. See Form 990, Part X, lir	ne 15.		(b) Book value
Part IX Other Assets. See Form 990, Part X, lir	ne 15.		( <b>b</b> ) Book value
Part IX Other Assets. See Form 990, Part X, lir	ne 15.		(b) Book value
Part IX Other Assets. See Form 990, Part X, lir	ne 15.		(b) Book value
Part IX Other Assets. See Form 990, Part X, lir	ne 15.		(b) Book value
Part IX Other Assets. See Form 990, Part X, lir	ne 15.		(b) Book value
Part IX Other Assets. See Form 990, Part X, lir	ne 15.		(b) Book value
Part IX Other Assets. See Form 990, Part X, lir	ne 15.		(b) Book value
Part IX Other Assets. See Form 990, Part X, lir	ne 15.		(b) Book value
Part IX Other Assets. See Form 990, Part X, lir	ne 15.		(b) Book value
Part IX Other Assets. See Form 990, Part X, lir	ne 15.		(b) Book value
Part IX Other Assets. See Form 990, Part X, Im (a) Descrip	ne 15.		(b) Book value
Part IX Other Assets. See Form 990, Part X, Im  (a) Description  (b) Should equal Form 990, Part X, col.(B) line 1	ne 15. Stion		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1  Part X Other Liabilities. See Form 990, Part X	5.)		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1  Part X Other Liabilities. See Form 990, Part X  (a) Description of Liability	ne 15. Stion		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1  Part X Other Liabilities. See Form 990, Part X  (a) Description of Liability  Federal Income Taxes	5.)		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1  Part X Other Liabilities. See Form 990, Part X  1 (a) Description of Liability  Federal Income Taxes due to primary government	5.)		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1  Part X Other Liabilities. See Form 990, Part X  (a) Description of Liability  Federal Income Taxes	5.)		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1  Part X Other Liabilities. See Form 990, Part X  1 (a) Description of Liability  Federal Income Taxes due to primary government	5.)		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1  Part X Other Liabilities. See Form 990, Part X  (a) Description of Liability  Federal Income Taxes due to primary government  Funds held for others	5.)		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1  Part X Other Liabilities. See Form 990, Part X  (a) Description of Liability  Federal Income Taxes due to primary government  Funds held for others	5.)		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1  Part X Other Liabilities. See Form 990, Part X  (a) Description of Liability  Federal Income Taxes due to primary government  Funds held for others	5.)		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1  Part X Other Liabilities. See Form 990, Part X  (a) Description of Liability  Federal Income Taxes due to primary government  Funds held for others	5.)		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1  Part X Other Liabilities. See Form 990, Part X  (a) Description of Liability  Federal Income Taxes due to primary government  Funds held for others	5.)		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1  Part X Other Liabilities. See Form 990, Part X  (a) Description of Liability  Federal Income Taxes due to primary government  Funds held for others	5.)		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1  Part X Other Liabilities. See Form 990, Part X  (a) Description of Liability  Federal Income Taxes due to primary government  Funds held for others	5.)		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1  Part X Other Liabilities. See Form 990, Part X  (a) Description of Liability  Federal Income Taxes due to primary government  Funds held for others	5.)		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1  Part X Other Liabilities. See Form 990, Part X  (a) Description of Liability  Federal Income Taxes due to primary government  Funds held for others	5.)		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1  Part X Other Liabilities. See Form 990, Part X  (a) Description of Liability  Federal Income Taxes due to primary government  Funds held for others	5.)		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1  Part X Other Liabilities. See Form 990, Part X  (a) Description of Liability  Federal Income Taxes due to primary government  Funds held for others	5.)		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1  Part X Other Liabilities. See Form 990, Part X  (a) Description of Liability  Federal Income Taxes due to primary government  Funds held for others	5.)		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1  Part X Other Liabilities. See Form 990, Part X  (a) Description of Liability  Federal Income Taxes due to primary government  Funds held for others	5.)		(b) Book value

	nts	t XII Reconciliation of Change in Net Assets from Form 990 to Financial Statemer	
123,585,124	1	Total revenue (Form 990, Part VIII, column (A), line 12)	1
125,054,606	2	Total expenses (Form 990, Part IX, column (A), line 25)	2
-1,469,482	3	Excess or (deficit) for the year Subtract line 2 from line 1	3
	4	Net unrealized gains (losses) on investments	4
	5	Donated services and use of facilities	5
	6	Investment expenses	6
	7	Prior period adjustments	7
	8	Other (Describe in Part XIV)	8
0	9	Total adjustments (net) Add lines 4 - 8	9
-1,469,482	10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10
<u> </u>		XII Reconciliation of Revenue per Audited Financial Statements With Revenue p	
123,585,124	1	Total revenue, gains, and other support per audited financial statements	1
		A mounts included on line 1 but not on Form 990, Part VIII, line 12	2
		Net unrealized gains on investments 2a	а
		Donated services and use of facilities	b
		Recoveries of prior year grants	c
		Other (Describe in Part XIV) 2d	d
0	2e	Add lines <b>2a</b> through <b>2d</b>	e
123,585,124	3	Subtract line <b>2e</b> from line <b>1</b>	3
		A mounts included on Form 990, Part VIII, line 12, but not on line 1	4
		Investment expenses not included on Form 990, Part VIII, line 7b . 4a	а
		Other (Describe in Part XIV) 4b	b
0	4c	Add lines <b>4a</b> and <b>4b</b>	c
123,585,124	5	Total Revenue Add lines <b>3</b> and <b>4c.</b> (This should equal Form 990, Part I, line 12)	5
	s per Re	Reconciliation of Expenses per Audited Financial Statements With Expenses	
125,054,606	1	Total expenses and losses per audited financial statements	1
		A mounts included on line 1 but not on Form 990, Part IX, line 25	2
		Donated services and use of facilities	а
		Solidated Solviness and associated in the solid	
		Prior year adjustments	b
			b c
		Prior year adjustments	
0	2e	Prior year adjustments	c
	2e 3	Prior year adjustments         2b           Other losses         2c           Other (Describe in Part XIV)         2d           Add lines 2a through 2d            Subtract line 2e from line 1	c d
0 125,054,606		Prior year adjustments	c d e
		Prior year adjustments	c d e 3
		Prior year adjustments	c d e 3
		Prior year adjustments	c d e 3 4

Part V, line 4, Part X, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b. Also complete this part to provide any additional information

Identifier Return Reference Explanation

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

DLN: 93493136037401 OMB No 1545-0047

Department of the Treasury Internal Revenue Service

Schedule I

(Form 990)

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

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

Inspect ion

Name of the organization						Employer identificati	on number
NORTH CAROLINA PARTNERSHIP F	OR CHILDREN INC					56-1850485	
Part I General Informatio	n on Grants and	d Assistance				1	
<ol> <li>Does the organization maintain the selection criteria used to aw</li> <li>Describe in Part IV the organization</li> <li>Part II Grants and Other As</li> </ol>	ard the grants or as tion's procedures fo	sistance? or monitoring the use o	f grant funds in the Unite	d States			ΓYes Γι
Form 990, Part IV, line Part IV and Schedule	e 21 for any recip	ient that received n	nore than \$5,000. Ch	eck this box if no one	recipient receive	ed more than \$5,000	. Use
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of gra or assistance
See Addıtıonal Data Table							
<b>2</b> Enter total number of section 50	1(c)(3) and govern	ment organizations .				· · · · · · ·	I
3 Enter total number of other orga						<del>.</del> −	

**Ident if ier** 

**Return Reference** 

Part III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to 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)A mount of cash grant	(d)A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
EARLY CHILDHOOD LEADERSHIP	3	710			
PROGRAM DESIGN WORKSHOP	21	11,742			
CHILD CARE QUALITY RATING IMPROVEMENT	1	5,000			

Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.

**Explanation** 

	Return Reference	Explanation
Procedure for Monitoring Grants in the US		Schedule I, Part I, Line 2 The North Carolina Partnership for Children, Inc (NCPC) has a staff dedicated to on-site financial and programmatic monitoring of grants. Policies, procedures, and monitoring programs have been in place since 2001 and are periodically reviewed and revised as needed. Of the grantees, 77 (representing nearly 100% of our total grants) are nonprofits that provide services to North Carolina's young children and their families through North Carolina's Early. Childhood Initiative ("Smart Start"). As required by State legislation, these grantees generally have biennial yellow-book audits (financial and compliance) by an independent Certified Public Accounting firm. Accordingly, NCPC typically coordinates its monitoring with that of the auditors and, therefore, also monitors these grantees biennially. Monitoring is rigorous and includes, but is not limited to, a review of board of director operations, financial accounting and reporting, and programmatic compliance. A formal close-out conference is held with board members, management of the partnership, and other staff. Subsequent to the close-out conference, a formal monitoring report with recommendations for improvement is issued to the grantee's board chair, executive committee and executive director. Depending upon the nature and number of issues noted in the report, a monitoring visit may be held in six to eight months to follow up on the status of the issues noted in the report.

Software ID: Software Version:

**EIN:** 56-1850485

Name: NORTH CAROLINA PARTNERSHIP FOR CHILDREN INC

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

Form 990,Schedule I, Pai	rt II, Grants an	<u>d Other Assistance</u>	<u>e to Governments</u>	and Organization	<u>s in the United Sta</u>	tes	
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	( <b>d)</b> A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Alamance Partnership for Children2322 River Road Burlington, NC 27217	56-1884459	501(c)(3)	1,169,750				North Carolina's young children enter school healthy and ready to succeed
Albemarle Smart Start Partnership Inc1403 Parkview Drive Elizabeth City, NC 27909	56-2088109	501(c)(3)	1,509,568				North Carolina's young children enter school healthy and ready to succeed
Alexander County Partnership for Children Inc PO Box 1661 Taylorsville, NC 28681	56-1995412	501(c)(3)	517,175				North Carolina's young children enter school healthy and ready to succeed
Alleghany Partnership for Children IncPO Box 1643 Sparta, NC 28675	56-1928008	501(c)(3)	184,113				North Carolina's young children enter school healthy and ready to succeed
Anson County Partnership for Children117 South Greene Street Wadesboro, NC 28170	56-1987729	501(c)(3)	525,064				North Carolina's young children enter school healthy and ready to succeed
Ashe County Partnership for Children626 Ashe Central School Road Unit 1 1 Jefferson, NC 28640	56-1892216	501(c)(3)	416,681				North Carolina's young children enter school healthy and ready to succeed
Avery County Smart Start A Partnership for ChildrenPO Box 1455 405 Hardees Alley Newland, NC 28657	56-1892570	501(c)(3)	274,386				North Carolina's young children enter school healthy and ready to succeed
BeaufortHyde Partnership for Children979 Washington Square Mall Washington, NC 27889	56-1992257	501(c)(3)	588,496				North Carolina's young children enter school healthy and ready to succeed
Bladen Smart Start-A Partnership for Children Inc PO Box 2255 228 B West Broad Street Street Elizabethtown, NC 28337	56-2048384	501(c)(3)	496,476				North Carolina's young children enter school healthy and ready to succeed
Buncombe County Partnership for Children Inc 84 Coxe Avenue Suite 1A Asheville, NC 28801	56-1942178	501(c)(3)	2,550,109				North Carolina's young children enter school healthy and ready to succeed

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States (a) Name and address of **(b)** EIN (c) IRC Code section (d) A mount of cash (e) A mount of non-(f) Method of (a) Description of (h) Purpose of grant cash organization if applicable grant valuation non-cash assistance or assistance (book, FMV, appraisal, or government assistance other) Burke County Smart Start Inc 56-1852721 501(c)(3) North Carolina's PO Box 630 304 West Union young children enter 1,881,903 Street school healthy and ready to succeed Morganton, NC 28655 56-2088223 501(c)(3) North Carolina's Cabarrus County Partnership for Children2353 Concord young children enter 1,939,536 Lake Road Ste 160 school healthy and Concord, NC 28025 ready to succeed Caldwell County Smart Start 20-1090467 501(c)(3) North Carolina's A Partnership for Young young children enter 1,593,058 Children228 Morganton Blvd school healthy and SW Ste A ready to succeed Lenoir, NC 28645 Carteret County Partnership 56-2273396 501(c)(3) North Carolina's for Children3328-A Bridges young children enter 820,096 school healthy and Street Morehead City, NC 28557 ready to succeed 56-2070459 501(c)(3) Caswell County Partnership North Carolina's for ChildrenPO Box 664 vouna children enter 317,642 Yanceyville, NC 27379 school healthy and ready to succeed Catawba County Partnership 58-2139195 501(c)(3) North Carolina's for ChildrenPO Box 3123 young children enter 1,846,566 Hickory, NC 28602 school healthy and ready to succeed Chatham County Partnership 56-1885127 501(c)(3) North Carolina's for Children200 Sanford young children enter 922,724 Highway Suite 4 school healthy and Pittsboro, NC 27312 ready to succeed Children & Youth Partnership 56-1885539 501(c)(3) North Carolina's for Dare County IncPO Box young children enter 418,977 2539 2400 North Croatan school healthy and Highway Ste D ready to succeed Kill Devil Hills, NC 27948 Children's Council of 58-1416331 501(c)(3) North Carolina's Watauga County Inc225 young children enter 322,909 Birch Street Suite 3 school healthy and Boone, NC 28607 ready to succeed 56-1875246 501(c)(3) Cleveland County North Carolina's Partnership for Children Inc young children enter 1,364,834 PO Box 1468 312 West school healthy and ready to succeed Marion Street Shelby, NC 28150

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States (a) Name and address of **(b)** EIN (c) IRC Code section (d) A mount of cash (e) A mount of non-(f) Method of (a) Description of (h) Purpose of grant organization ıf applıcable grant cash valuation non-cash assistance or assistance (book, FMV, appraisal, or government assistance other) 56-1966108 501(c)(3) Columbus County North Carolina's Partnership for Children young children enter 496,974 Incorporated 109 West Main school healthy and Street ready to succeed Whiteville, NC 28472 Cornell University 373 Pine 15-0532082 501(c)(3) North Carolina's Tree Rd young children enter 53,750 Ithaca, NY 14850 school healthy and ready to succeed Craven Smart Start Inc1917 56-2105879 501(c)(3) North Carolina's Trent Boulevard young children enter 1,076,111 New Bern, NC 28560 school healthy and ready to succeed Down East Partnership for 56-1859313 North Carolina's 501(c)(3) Children215 Lexington St young children enter 2,892,732 Rocky Mount, NC 27801 school healthy and ready to succeed Duplin County Partnership for 56-1892438 501(c)(3) North Carolina's ChildrenPO Box 989 young children enter 936,835 Kenansville, NC 28349 school healthy and ready to succeed Durham's Partnership for 56-1892432 501(c)(3) North Carolina's Children1201 S Briggs young children enter 6,645,221 Avenue Suite 210 school healthy and Durham, NC 27703 ready to succeed Franklin-Granville-Vance 56-2045172 501(c)(3) North Carolina's Partnership for Children Inc young children enter 1,666,566 PO Box 142 125 Charles D school healthy and Rollins ready to succeed Road Henderson, NC 27536 56-1982976 501(c)(3) North Carolina's Guilford County Partnership for Children Inc122 North young children enter 4,235,498 Elm Street Suite 1010 school healthy and Greensboro, NC 27401 ready to succeed 56-2079125 Harnett County Partnership 501(c)(3) North Carolina's for Children Inc1901-G young children enter 1,281,205 North Main Street school healthy and Lillington, NC 27546 ready to succeed 56-1865237 501(c)(3) Hertford-Northampton Smart North Carolina's Start Partnership for Children young children enter 676,897 IncPO Box 504 711 East school healthy and Vance Street ready to succeed Murfreesboro, NC 27855

Form 990. Schedule I. Part II. Grants and Other Assistance to Governments and Organizations in the United States (a) Name and address of **(b)** EIN (c) IRC Code section (d) A mount of cash (e) A mount of non-(f) Method of (a) Description of (h) Purpose of grant organization ıf applıcable cash valuation non-cash assistance arant or assistance (book, FMV, appraisal, or government assistance other) Hoke County Partnership for 56-1898931 501(c)(3) North Carolina's Children and Families PO Box young children enter 1.021.118 1209 1089 East Central school healthy and Avenue ready to succeed Raeford.NC 28376 36-2167755 501(c)(3) North Carolina's International CityCounty Management Association777 young children enter 10.000 North Capital Street NE Ste school healthy and 500 ready to succeed 500 Washington, DC 20002 Institute for Women's Policy 52-1549572 501(c)(3) North Carolina's Research1200 18th Street vouna children enter 46.500 NW Suite 301 school healthy and Washington, DC 20036 ready to succeed Iredell County Partnership for 56-2005160 501(c)(3) North Carolina's Young Children Inc132 East voung children enter 1.755.146 Broad Street school healthy and Statesville, NC 28677 ready to succeed 56-1857162 501(c)(3) North Carolina's Jones County Partnership for ChildrenPO Box 186 115 vouna children enter 300,923 Market Street school healthy and Trenton, NC 28585 ready to succeed 56-2009097 Lee County Partnership for 501(c)(3) North Carolina's Children143 Chatham Street young children enter 888.593 Sanford, NC 27330 school healthy and ready to succeed 56-1898462 501(c)(3) North Carolina's LenoirGreene County Partnership for Children1465 young children enter 1,957,741 school healthy and Highway 258 North Kinston, NC 28504 ready to succeed Louisiana Partnership for 83-0358295 501(c)(3) North Carolina's Children and FamiliesPO Box young children enter 23,500 64507 school healthy and Baton Rouge, LA 70896 ready to succeed Madison County Partnership 56-2040118 501(c)(3) North Carolina's for Children and Families Inc young children enter 499,678 PO Box 545 school healthy and Marshall, NC 28753 ready to succeed 56-1913394 501(c)(3) North Carolina's MartinPitt Partnership for Children Inc115 Eastbrook young children enter 1,870,470 Drive school healthy and Greenville, NC 27858 ready to succeed

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States (a) Name and address of **(b)** EIN (c) IRC Code section (d) A mount of cash (e) A mount of non-(f) Method of (a) Description of (h) Purpose of grant organization ıf applıcable cash valuation non-cash assistance or assistance grant or government assistance (book, FMV, appraisal, other) McDowell County Partnership 56-1900374 501(c)(3) North Carolina's for Children and Families Inc voung children enter 629,143 PO Drawer 158 school healthy and Marion, NC 28752 ready to succeed 56-1853108 Mecklenburg Partnership for 501(c)(3) North Carolina's Children601 East 5th Street young children enter 9,360,788 Charlotte, NC 28202 school healthy and ready to succeed Montgomery County 58-2185898 501(c)(3) North Carolina's Partnership for Children404young children enter 668,002 A North Main Street school healthy and Trov. NC 27371 ready to succeed North Carolina State 56-6000756 Gov't North Carolina's UniversityCampus Box 7205 young children enter 8,750 Raleigh, NC 27695 school healthy and ready to succeed 56-2058409 501(c)(3) North Carolina's Onslow County Partnership for Children Inc308 Western young children enter 2,795,878 Boulevard school healthy and Jacksonville, NC 28546 ready to succeed 501(c)(3) Orange County Partnership 56-1844192 North Carolina's for Young Children 1829 East young children enter 2.526.695 Franklin Street Ste 1200C school healthy and 1200C ready to succeed Chapel Hill, NC 27514 Pamlico Partnership for 56-1874658 501(c)(3) North Carolina's Children IncPO Box 612 205 young children enter 198,513 Main Street school healthy and Bayboro, NC 28515 ready to succeed Partners for Children & 58-2139259 501(c)(3) North Carolina's Families Inc (Moore County) vouna children enter 995,102 7720 NC Hwy 22 Suite C school healthy and Carthage, NC 28327 ready to succeed Partnership for Children of 56-1845926 501(c)(3) North Carolina's Cumberland County Inc351 young children enter 5,379,661 Wagoner Drive Suite 200 school healthy and Fayetteville, NC 28303 ready to succeed Partnership for Children of 56-2063680 501(c)(3) North Carolina's Johnston County Inc1406-A young children enter 1,802,978 S Pollock Street school healthy and Selma, NC 27576 ready to succeed

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States (a) Name and address of **(b)** EIN (c) IRC Code section (d) A mount of cash (e) A mount of non-(f) Method of (g) Description of (h) Purpose of grant organization ıf applıcable grant cash valuation non-cash assistance or assistance assistance (book, FMV, appraisal, or government other) 31-1539832 501(c)(3) North Carolina's Partnership for Children of LincolnGaston Counties Inc young children enter 3,073,293 3146 Dallas-High Shoals school healthy and ready to succeed Hwv Dallas, NC 28034 Person County Partnership 56-1872882 501(c)(3) North Carolina's for ChildrenPO Box 1791 young children enter 635,587 111 South Main Street school healthy and Roxboro, NC 27573 ready to succeed 31-1612024 501(c)(3) North Carolina's Randolph County Partnership for Children349 Sunset young children enter 1,462,669 Avenue school healthy and Asheboro, NC 27203 ready to succeed 56-1869575 Region A Partnership for 501(c)(3) North Carolina's Children116 Jackson St young children enter 1,586,545 Sylva, NC 28779 school healthy and ready to succeed 31-1575604 North Carolina's Richmond County Partnership 501(c)(3) for ChildrenPO Box 1944 young children enter 878,567 315 South Lawrence school healthy and Street ready to succeed Rockingham, NC 28380 Robeson County Partnership 56-1940920 501(c)(3) North Carolina's for Children210 East 2nd young children enter 2,150,692 Street school healthy and Lumberton, NC 28358 ready to succeed 56-1974269 Rockingham County 501(c)(3) North Carolina's Partnership for Children Inc young children enter 1,028,888 PO Box 325 7572 NC school healthy and Higway 87/65 ready to succeed Reidsville, NC 27320 RutherfordPolk Smart Start 56-2014947 501(c)(3) North Carolina's PartnershipPO Box 823 668 young children enter 907,069 Withrow Road school healthy and Forest City, NC 28043 ready to succeed 31-1603397 501(c)(3) North Carolina's Sampson County Partnership for Children211 West Main young children enter 845,398 Street school healthy and Clinton, NC 28328 ready to succeed Scotland County Partnership 56-2094816 501(c)(3) North Carolina's for Children and Families Inc young children enter 540,486 PO Box 586 303 South Main school healthy and Street ready to succeed Laurinburg, NC 28353

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States (a) Name and address of **(b)** EIN (c) IRC Code section (d) A mount of cash (e) A mount of non-(f) Method of (a) Description of (h) Purpose of grant organization ıf applicable arant cash valuation non-cash assistance or assistance (book, FMV, appraisal, or government assistance other) Smart Start of Brunswick 56-1885097 501(c)(3) North Carolina's County IncPO Box 3050 voung children enter 915,511 5140 Sellers Street school healthy and Shallotte, NC 28470 ready to succeed 56-1859989 Smart Start of Davidson 501(c)(3) North Carolina's County Inc235 East Center young children enter 2.904.985 school healthy and Street Lexington, NC 27292 ready to succeed Smart Start of Davie County 31-1600557 501(c)(3) North Carolina's Inc965 Yadkınvılle Road voung children enter 414,675 Mocksville, NC 27028 school healthy and ready to succeed Smart Start of Forsyth County 56-1899564 501(c)(3) North Carolina's 7820 North Point Boulevard young children enter 5,321,165 Ste 200 school healthy and WinstonSalem, NC 27106 ready to succeed Smart Start of Henderson 56-2092325 501(c)(3) North Carolina's County Inc851 Case Street vouna children enter 944,661 Suite 208 school healthy and Hendersonville, NC 28792 ready to succeed Smart Start of New Hanover 56-1951952 501(c)(3) North Carolina's County3001-B Wrightsville young children enter 1,543,189 Avenue school healthy and Wilmington, NC 28403 ready to succeed 56-2044085 Smart Start of Pender County 501(c)(3) North Carolina's IncPO Box 429 600 N young children enter 531,961 Timberly Lane school healthy and Burgaw, NC 28425 ready to succeed 31-1489864 Smart Start of Transvlvania 501(c)(3) North Carolina's County 181 Hillview young children enter 226,277 Extension school healthy and Brevard, NC 28712 ready to succeed Smart Start of Yadkın County 56-1864667 North Carolina's 501(c)(3) IncPO Box 39 246 East Main young children enter 523,701 St school healthy and Yadkınvılle, NC 27055 ready to succeed Smart Start Rowan Inc1839 56-1890324 501(c)(3) North Carolina's Jake Alexander Boulevard young children enter 2,143,687 West school healthy and Salisbury, NC 28147 ready to succeed

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States (a) Name and address of **(b)** EIN (c) IRC Code section (d) A mount of cash (e) A mount of non-(f) Method of (g) Description of (h) Purpose of grant ıf applıcable valuation organization grant cash non-cash assistance orassistance (book, FMV, appraisal, or government assistance other) 56-1851138 501(c)(3) North Carolina's Stanly County Partnership for ChildrenPO Box 2165 1000 young children enter 1,085,610 North First Street school healthy and Ste 8 ready to succeed Albemarle, NC 28001 501(c)(3) Stokes Partnership for 56-1888024 North Carolina's ChildrenPO Box 2319 151 young children enter 621,361 Jefferson Church school healthy and Road Ste 104 ready to succeed King, NC 27021 Surry County Early Childhood 56-1938073 501(c)(3) North Carolina's PartnershipPO Box 7050 817 voung children enter 925,535 West Pine Street school healthy and Mt Airy, NC 27030 ready to succeed The ChowanPerquimans 31-1622057 501(c)(3) North Carolina's Smart Start Partnership718 young children enter 385,181 North Broad Street school healthy and Edenton, NC 27932 ready to succeed The Halifax-Warren Smart 56-1847375 501(c)(3) North Carolina's Start Partnership for Children voung children enter 928,944 IncPO Box 339 1139 school healthy and Roanoke Ave ready to succeed Roanoke Rapids, NC 27870 56-1921260 501(c)(3) North Carolina's The Mitchell-Yancey County Partnership for Children Inc young children enter 397,553 PO Box 1387 131 North Main school healthy and Street ready to succeed Burnsville, NC 28714 The Partnership for Children 56-2054262 501(c)(3) North Carolina's of Wayne County Inc800 young children enter 1,262,918 North William Street school healthy and Goldsboro, NC 27530 ready to succeed 56-1862036 501(c)(3) North Carolina's Tyrrell-Washington Partnership for Children Inc young children enter 351,836 125-B West Water Street school healthy and Plymouth, NC 27962 ready to succeed 56-2052395 Union Smart StartPO Box 988 501(c)(3) North Carolina's 105-C Cedar Street young children enter 1,690,961 school healthy and Monroe, NC 28111 ready to succeed Wake County SmartStart1121 56-1949415 North Carolina's 501(c)(3) Situs Court Suite 250 young children enter 8,066,273 Raleigh, NC 27606 school healthy and ready to succeed

Form 990,Schedule 1, Pa	<u>rt 11, Grants an</u>	<u>la Otner Assistance</u>	<u>e to Governments</u>	and Organization	s in the United Sta	tes	
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	<b>(d)</b> A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Wilkes Community Partnership for ChildrenPO Box 788 1006 F Streeet Wilkesboro, NC 28659	56-1875083	501(c)(3)	984,174				North Carolina's young children enter school healthy and ready to succeed
Wilson County Partnership for ChildrenPO Box 2661 109 Park Ave West Wilson, NC 27893	56-1942537	501(c)(3)	1,148,695				North Carolina's young children enter school healthy and ready to succeed

**Compensation Information** 

DLN: 93493136037401

**Employer identification number** 

OMB No 1545-0047

Schedule J (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

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

► Complete if the organization answered "Yes" to Form 990, Part IV, question 23.

► Attach to Form 990. ► See separate instructions.

Open to Public Inspection

NOR	TH CAROLINA PARTNERSHIP FOR CHILDREN INC					
			56-18504	485		
Pa	rt I Questions Regarding Compensat	tion				
					Yes	No
1a	Check the appropriate box(es) if the organization	provided a	ny of the following to or for a person listed in Fo	rm		
	990, Part VII, Section A, line 1a Complete Part					
	First-class or charter travel	Γ	Housing allowance or residence for personal u	ıse		
	Travel for companions	Γ	Payments for business use of personal reside	nce		
	Tax idemnification and gross-up payments	Γ	Health or social club dues or initiation fees			
	Discretionary spending account	Г	Personal services (e g , maid, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the					
	reimbursement orprovision of all the expenses de			1b		
2	Did the organization require substantiation prior officers, directors, trustees, and the CEO/Execu			2		
3	Indicate which, if any, of the following the organiz organization's CEO/Executive Director Check a		•			
	Compensation committee	пі спас аррі	Written employment contract			
	✓ Independent compensation consultant	<u>.</u>	Compensation survey or study			
	Form 990 of other organizations		Approval by the board or compensation comm	uttee		
	,	,				
4	During the year, did any person listed in Form 99 or a related organization	90, Part VII	, Section A , line ${f 1}{f a}$ with respect to the filing or	ganization		
а	Receive a severance payment or change-of-cont	trol paymer	t?	4a		Νο
ь	Participate in, or receive payment from, a supple	mental non	qualified retirement plan?	4b		Νο
c	Participate in, or receive payment from, an equity	y-based co	mpensation arrangement?	4c		Νo
	If "Yes" to any of lines 4a-c, list the persons and	d provide th	e applicable amounts for each item in Part III			
	Only 501(c)(3) and 501(c)(4) organizations only	must com	elete lines 5-9.			
5	For persons listed in form 990, Part VII, Section compensation contingent on the revenues of	n A , line 1a ,	did the organization pay or accrue any			
а	The organization?			5a		Νο
b	Any related organization?			5b		Νo
	If "Yes," to line 5a or 5b, describe in Part III					
6	For persons listed in form 990, Part VII, Section compensation contingent on the net earnings of	n A , line 1a,	did the organization pay or accrue any			
а	The organization?			6a		No
b	Any related organization?			6b		Νο
	If "Yes," to line 6a or 6b, describe in Part III					
7	For persons listed in Form 990, Part VII, Section payments not described in lines 5 and 6? If "Yes	•	•	7		No
8	Were any amounts reported in Form 990, Part VI	II, paid or a	ccured pursuant to a contract that was			
	subject to the initial contract exception describe	ed in Regs	section 53 4958-4(a)(3)? If "Yes," describe			
	ın Part III			8		Νo
9	If "Yes" to line 8, did the organization also follow section $53 4958-6(c)$ ?	v the rebutt	able presumption procedure described in Regul	ations 9		

#### Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use Schedule J-1 if additional space needed.

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

Note. The sum of columns (B)(1)-(111) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a

(A) Name		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and		(E) Total of columns	(F) Compensation	
		(i) Base compensation	(ii) Bonus & (iii) Other reportable compensation compensation		other deferred compensation	benefits	(B)(ı)-(D)	reported in prior Form 990 or Form 990-EZ	
Ms Stephanie Fanjul	(ı) (ıı)	140,321 0	0		0		159,388 0	0	
	,		0	0	0	0		0	

#### Part III Supplemental Information

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 4c, 5a, 5b, 6a, 6b, 7, and 8 Also complete this part for any additional information

]	Ident if ier	Ret urn Ref erence	Explanation
]	Ident if ier	Reference	Explanation

Schedule J (Form 990) 2009

Software ID: **Software Version:** 

**EIN:** 56-1850485

Name: NORTH CAROLINA PARTNERSHIP FOR CHILDREN INC

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493136037401

OMB No 1545-0047

Inspection

**SCHEDULE 0** 

Department of the Treasury Internal Revenue Service

(Form 990)

**Supplemental Information to Form 990** 

 $\label{lem:complete} \textbf{Complete to provide information for responses to specific questions on } \\$ Form 990 or to provide any additional information. ► Attach to Form 990.

Name of the organization

NORTH CAROLINA PARTNERSHIP FOR CHILDREN INC

**Employer identification number** 

56-1850485

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section B, line 11		Prior to filing, the Audit and Finance Committee of the Board of Directors is provided with a copy of the Form 990 for review

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section B, line 12c		The North Carolina Partnership for Children, Inc. (NCPC) recognizes that effective governance depends on deliberate, thoughtful, and disinterested decision-making by its directors, officers and staff. Moreover, NCPC's work depends on the continued trust and confidence in its integrity, which is grounded in fair and responsible decision-making. The Board of Directors of NCPC believes it is in the best interest of NCPC to establish a clear and concise. Conflict of Interest Policy. The Conflict of Interest Policy is intended to promote the avoidance of Conflicts of Interest and the appearance of impropriety by NCPC directors, officers and staff. It sets the rules for conduct, including disclosure by directors and officers of personal or financial interests that may affect the business of NCPC. Annually each member of the Board is required to review a copy of the Policy and to acknow ledge that he or she has done so. The Policy is monitored and enforced through the following actions. A Prior to action on a Contract or Transaction, the Board or Committee Chair shall ask the group to identify actual or perceived Conflicts of Interest. A director who knows he or she has a Conflict of Interest shall disclose the conflict and such disclosure shall be reflected in the minutes of the meeting. B. When there is a doubt as to whether a conflict exists, the matter shall be resolved by a vote of the Board of Directors excluding the person(s) concerning whose situation the doubt has arisen. C. All appointed Board members shall avoid conflicts of interest and the appearance of impropriety. Should instances arise when a conflict may be perceived, any individual who may benefit directly or indirectly from the NCPC's disbursement of funds. D. The person known to have a Conflict of Interest may not vote on the Contract or Transaction and must leave the room during the vote unless leaving the room brings attendance below the level of a quorum. The official minutes shall reflect that the Conflict of Interest was disclosed and person(s

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section B, line 15		Salaries and wages of all employees are set in accordance with a formal pay plan which includes pay grades (with minimum, mid-point and maximum pay rates). The plan was originally developed by an independent consultant and is based on the National Position Evaluation Plan published by the Management Associations of America. It is updated periodically by benchmarking pay rates against data from Capital Associated Industries of Raleigh, NC, which conducts annual salary surveys, and occupation-specific and location-specific data from the Occupational Employment and Wages Statistics program of the Employment Security Commission of North Carolina. The plan will be revised periodically to include data from the recently developed survey of salaries in North Carolina nonprofits sponsored by the N.C. Center for Nonprofits.

ldentifier	Return Reference	—-p								
Form 990, Part VI, Section C, line 19		These documents are available upon request, and the financial statements are also available on the website of the North Carolina Office of State Auditor Additionally, the governance structure, board committee roles, and meeting dates are posted on our website								

ldentifier	Return Reference	Explanation
FORM 990, PART XI, LINE 2C	AUDIT COMMITTEE	THE AUDIT COMMITTEE ASSUMES RESPONSIBILITY FOR OVERSIGHT OF THE AUDIT OF THE FINANCIAL STATEMENTS

ldentifier	Return Reference	Explanation
FORM 990, PART VI, LINE 8B		Authority Delegated to the Executive Committee The Executive Committee consists of the Chair, Vice-Chair, Secretary, Treasurer and the chairs of these board committees. Governance, Planning and Oversight, and Audit and Finance, who are appointed by the Chair and approved by the Board of Directors. The Executive Committee shall have and may exercise all the authority of the Board in matters pertaining to the basic management of the Corporation between meetings of the Board except as limited by NCGS S55A-8-25. All Executive Committee members are members of the Board.

#### **Additional Data**

Software ID: Software Version:

**EIN:** 56-1850485

Name: NORTH CAROLINA PARTNERSHIP FOR CHILDREN INC

#### Form 990, Part III - 4 Program Service Accomplishments (See the Instructions)

#### 4d. Other program services

(Code ) (Expenses \$ 591,070 including grants of \$ 97,396 ) (Revenue \$ 33,780 )

Strengthen Early Childhood System A public engagement initiative titled Smart Investing Communities thrive when children thrive to establish what North Carolina communities want for their youngest children and the future of the State Smart Investing brought together a diverse mix of citizens to determine early education and childrens health priorities in the State Ready Schools Initiative. This initiative is a partnership with the North Carolina Department of Public Instruction to support Ready Schools throughout North Carolina. A Ready School provides a seamless continuum of learning for children ages three through eight between elementary schools, families, communities, and children's early care and educational experience.

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest

(A) Name and Title	(B) Average hours per	(C) Position (check all that apply)						( <b>D)</b> Reportable compensation from the	(E) Reportable compensation from related	(F) Estimated amount of other compensation
	week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	organization (W- 2/1099-MISC)	organizations (W- 2/1099- MISC)	from the organization and related organizations
Hon Phillip E Bazemore DIRECTOR	2 00	Х						0	0	0
Dr Michael Blackwell DIRECTOR	2 00	Х						0	0	0
Ms Fordham B Britt DIRECTOR	2 00	Х						0	0	0
HON Lanier M Cansler DIRECTOR	2 00	Х						0	0	0
HON PATRICIA FERGUSON DIRECTOR	2 00	Х						0	0	0
Dr C Lorance Henderson DIRECTOR	2 00	Х						0	0	0
Reverend James R Horton DIRECTOR	2 00	Х						0	0	0
Ms Sheila Hoyle DIRECTOR	2 00	Х						0	0	0
MS MARIE DUNN Inscore DIRECTOR	2 00	Х						0	0	0
MR Derek D Kelly DIRECTOR	2 00	Х						0	0	0
Ms Sue Lynn Ledford DIRECTOR	2 00	Х						0	0	0
Mr Charles Morris DIRECTOR	2 00	Х						0	0	0
Dr Peter J Morris DIRECTOR	2 00	Х						0	0	0
Mr James R Morrison DIRECTOR	2 00	Х						0	0	0
DR M Alec Parker DIRECTOR	2 00	Х						0	0	0
MS MARGUERITE PEEBLES DIRECTOR	2 00	Х						0	0	0
MS EVA C PHILLIPS DIRECTOR	2 00	Х						0	0	0
Mr John Pruette DIRECTOR	2 00	Х						0	0	0
Ms Sue Russell DIRECTOR	2 00	Х						0	0	0
MRS ERIN SPEER SMITH DIRECTOR	2 00	Х						0	0	0
MR CLIFTON H Smith DIRECTOR	2 00	Х						0	0	0
Ms Carole Wilson DIRECTOR	2 00	Х						0	0	0
Mr Ashley O Thrift Chairperson	2 00	х		x				0	0	0
Ms Tannis F Nelson Vice Chairperson	2 00	Х		х				0	0	0
Mr Harold Sellars Secretary	2 00	x		x				0	0	0

## Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Compensated Improvess, and Independent Conductors										
(A) Name and Title	(B) A verage hours per week	1	tin at Institutional Trustee	pply	')	Highest compensated = employee	Former	(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
Mr Robert Shinn Treasurer	2 00	Х		х				0	0	0
Ms Stephanie Fanjul President	40 00			х				140,321	0	19,067
Ms Joyce Baffi Vice President/ASSISTANT SECRETARY	40 00			х				125,208	0	17,245
Ms Connie Holton ASSISTANT TREASURER	40 00			х				102,518	0	15,289
MR JAMES DODSON INFORMATION TECHNOLOGY DIRECTOR	40 00					х		100,506	0	15,277