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12249 12	/01/2010 5 12 PM
Form	990

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
2009
Open to Public inspection

<u>A</u>	For the 2009 cal	lendar year, or tax year beginning $07/01/09$, and ending $06/30/1$.0		
В	Check if applicable	Please C Name of organization THE EARLY LEARNING COALITION OF		D Emplo	yer identification number
\prod	Address change	use IRS SOUTHWEST FLORIDA INC.			
\equiv	Name change	label or print or Doing Business As		65-	1144775
님	Name change	type. Number and street (or P O box if mail is not delivered to street address)	Room/suite	E Teleph	none number
\sqcup	Initial return	See 5256 SUMMERLIN COMMONS BLVD.	201	239	-267-4105
	Termination	Specific Character and 7/D and	·	G Gross reco	
	Amended return	tions. FORT MYERS FL 33907			
Ξ		F Name and address of principal officer		H(a) le this	a group return for
Ш	Application pending	realite and address of principal officer		affilial	
				H(b) Are all	affiliates
				include	
$\overline{}$	T	IS X 501(c) (3) ◀ (Insert no) 4947(a)(1) or 527		" ""	* attach a list (see instructions)
÷	Tax-exempt statu	IS X 501(c) (3) ◀ (Insert no) 4947(a)(1) or 527		H/6\ C	
_				000	exemption number
	Type of organization		Year of formation 2	000	M State of legal domicile FL
		ummary			
	1	escribe the organization's mission or most significant activities			
ç	SEE	SCHEDULE O			
an					
Activities & Governance		_			
õ	2 Check th	his box $ ightharpoonup$ if the organization discontinued its operations or disposed of more than 2	5% of its net as	sets	
ಹ	3 Number	of voting members of the governing body (Part VI, line 1a)		3	19
98	4 Number	of independent voting members of the governing body (Part VI, line 1b)		4	19
ž	5 Total nur	mber of employees (Part V, line 2a)		5	25
Act	6 Total nur	mber of volunteers (estimate if necessary)		6	10
-	7a Total gro	oss unrelated business revenue from Part VIII, column (C), line 12		7a	
	b Net unre	lated business taxable income from Form 990-T, line 34		7b	0_
			ar a	Current Year	
ē		tions and grants (Part VIII, line 1h)	41,51	0,294	45,988,259
Revenue		service revenue (Part VIII, line 2g)		1 600	030
ě	1	ent income (Part VIII, column (A), lines 3, 4, and 7d)	<u> </u>	1,600	838
_	1	venue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	41,51	7 904	11,630 46,000,727
_		venue – add lines 8 through 11 (must equal Part VIII, column (A), line 12)		0,628	43,298,136
		and similar amounts paid (Part IX, column (A), lines 1–3)	30,39	0,020	73,230,130
	4- 0-1	paid to or for members (Part IX, column (A), line 4)	1 20	5,220	1,115,044
Expenses	15 Salaries,	, other compensation, employee benefits (Part IX, column (A), lines 5–10)	1,23	3,220	1,113,011
Ë	16a Professio	onal fundraising fees (Part IX, column (A), line 11e)			
ă	b lotal fun	ndraising expenses (Part IX, column (D), line 25) ► RECEIVED	1 63	1,352	1,594,276
_	17 Office ex	(penses (Part IX, column (A), lines 11a-11d, 11f-24f)		7,200	46,007,456
		penses Add lines 13–17 (must equal Part IX column (A), line 25) eless expenses. Subtract line 18 from line 12 JAN 9.4. 2011.	41,31	694	-6,729
-	19 Revenue		Beginning of Cu		End of Year
SE SE	20 Total ass	sets (Part X, line 16)		9,618	3,309,456
Net Assets or	24 Total lisk	bilities (Part X, line 26) OGDEN, UT		7,105	3,113,672
Š	21 Total lac	ets or fund balances Subtract line 21 from line 20		2,513	195,784
		ignature Block			
·		ider penalties of pequity, I declare that I have examined this return, including accompanying schedule	s and statements	and to the be	st of my knowledge
	and	d belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all in	formation of which	preparer has	any knowledge
Sic	gn 📗	201		- 1 //	12/2011
	ere /	Signitiare of officer		Date	
		John O Kempo GTON			
	₹	Type or print name and title			
_		Date	Check	, if	Preparer's identifying number
Pa	1171	eparers	1/10 self-		see instructions) P00531414
Pr	eparer's	MOSS, KRUSICK & ASSOCIATES, LLC		EIN D	EQ 201000
Us		ms name (or yours	·	Phone	33 3021012
		dress, and ZIP+4 WINTER PARK, FL 32789-4241			407-644-5811
Ma		ss this return with the preparer shown above? (see instructions)		1 110	X Yes No
Fo	r Privacy Act ar	nd Paperwork Reduction Act Notice, see the separate Page Sons.			Form 990 (2009)
DÃ	Α				=======================================

Part III Statement of Program Service Accomplishments	
Briefly describe the organization's mission	
SEE SCHEDULE O	
2 Did the organization undertake any significant program services during the year which were not listed on	
2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?	Yes X No
If "Yes," describe these new services on Schedule O	163 <u></u> 110
3 Did the organization cease conducting, or make significant changes in how it conducts, any program	
services?	Yes X No
If "Yes," describe these changes on Schedule O	
4 Describe the exempt purpose achievements for each of the organization's three largest program services by expenses	
Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and	
allocations to others, the total expenses, and revenue, if any, for each program service reported	
4a (Code:) (Expenses \$ 23,190,863 including grants of \$ 21,349,402) (Revenue \$	· · · · · · · · · · · · · · · · · · ·
SCHOOL READINESS PROGRAMS - EMPOWERS PARENTS AS A CHILD'S FIRST HELPS THEM PREPARE THEIR CHILDREN TO BE READY FOR SCHOOL. THE PFOCUS ON DEVELOPMENTALLY APPROPRIATE CURRICULUM; APPROPRIATE ST CHILDREN RATIOS TO ENSURE THE SUCCESS OF EACH CHILD; AND THE AB PARENTS TO MAKE AN INFORMED CHOICE ABOUT THE EARLY CHILDHOOD PR	ROGRAMS PAFF TO LLITY FOR OGRAM THAT
BEST FITS THEIR FAMILY'S NEEDS. THE EARLY LEARNING COALITION OF FLORIDA ENHANCES THE QUALITY OF CHILDREN'S LIVES IN THE FLORIDA COLLIER, GLADES, HENDRY AND LEE COUNTIES BY CONTRACTING FOR SUE CHILD CARE SERVICES WITH 417 SCHOOL READINESS PROVIDERS; 303 OF EARLY LEARNING/ EARLY CARE SERVICES FOR INFANTS AND TODDLERS.	COUNTIES OF
4b (Code)(Expenses \$ 21,981,715 including grants of \$ 21,898,185) (Revenue \$ VOLUNTARY PRE-KINDERGARTEN (VPK) - A LEGISLATIVELY MANDATED PROGRAM TO PREPARE EVERY FOUR-YEAR-OLD IN FLORIDA FOR KINDERGARTEN AND FOUNDATION FOR THEIR EDUCATIONAL SUCCESS. THE VPK PROGRAM GIVES CHILD AN OPPORTUNITY TO PERFORM BETTER IN SCHOOL AND THOURGHOUT QUALITY PROGRAMS THAT INCLUDE HIGH LITERACY STANDARDS, ACCOUNTA APPROPRIATE CURRICULA, SUBSTANTIAL INSTRUCTION PERIODS, MANAGEA SIZES, AND QUALIFIED INSTRUCTORS. THE EARLY LEARNING COALITION SOUTHWEST FLORIDA ENHANCES THE QUALITY OF CHILDREN'S LIVES IN TOUNTIES OF COLLIER, GLADES, HENDRY AND LEE COUNTIES BY CONTRACT VOLUNTARY PREKINDERGARTEN SERVICES, THE STATE-WIDE PROGRAM FOR FOUR YEARS OLDS, IN 320 SITES.	BUILD THE EACH LIFE WITH BILITY, BLE CLASS OF THE FLORIDA
4c (Code) (Expenses \$ 50,549 including grants of \$ 50,549) (Revenue \$ OUTREACH & AWARENESS: THE EARLY LEARNING COALITION OF SOUTHWEST FLORDA ENHANCES THE CHILDREN'S LIVES IN THE FLORIDA COUNTIES OF COLLIER, GLADES, HE COUNTIES BY:	
 REVIEWING WHETHER CONTRACTED CHILD CARE PROVIDERS MAINTAIN SATING HEALTHY ENVIRONMENTS FOR CHILDREN BY VERIFYING INSPECTIONS OF FACILITIES WITH THE DEPARTMENT OF CHILDREN AND FAMILIES AND EUNLICENSED FACILITIES. ASSISTING UNLICENSED FACILITIES TO CORRECT IDENTIFIED HEALTH 	' LICENSED BY INSPECTING
4d Other program services (Describe in Schedule O)	
(Expenses \$ including grants of \$) (Revenue \$	
4e Total program service expenses ▶ 45,223,127	888
	Form 990 (2009)

Is the organization described in section 501(c)(3) or 947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	<u>Pa</u>	rt IV Checklist of Required Schedules			
tompites Schedule A. A. Is the organization required to complete Schedule B. Schedule of Contributors? 3 Del the organization engage in direct or indirect political camping activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I 3 Section St7(c)(3) organizations. Did the organization engage in lobbying activities? M "Yes," complete Schedule C, Part II 5 Section St7(c)(4), S01(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 II 5 Did the organization maintain and yoden advised finds or any similar finds or accounts where donors have the right to provide advise on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part II 5 Did the organization maintain and association assement, including easements to preserve open space. The environment, histonic land areas, or histonic retributers? If "Yes," complete Schedule D, Part II 7 Did the organization maintain and association assement, including easements to preserve open space. The environment, histonic land areas, or histonic retributers? If "Yes," complete Schedule D, Part II 8 Did the organization maintain and association association and the environment, histonic land areas, or histonic retributers? If "Yes," complete Schedule D, Part II 9 Did the organization report an amount in Part X, Iine 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt neglatation services? If "Yes," complete Schedule D, Part VI 10 Did the organization report an amount for land, buildings, and equipment in Part X, Iine 10? If "Yes," complete Schedule D, Part VI 11 Did the organization report an amount for investments—program related in Part X, Iine 10? If "Yes," complete Schedule D, Part VI 12 Did the organization report an amount for other labilities in Part X, Iine 15? If "Yes," c				Yes	No
2 X Def the organization engogen of more for unifacts opticitied acmpaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part II Section 801(c)(3) organizations. Did the organizations. Did the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part II Did the organization maintain any other advised funds or any semilar funds or accounts where denotes have been the right to provide advise on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule C, Part II Did the organization receive or hold a conservation easement, moluding easements to preserve open space, the environment, histonic land areas, or histonic structures? If "Yes," complete Schedule D, Part II Did the organization receive or hold a conservation easement, moluding easements to preserve open space, the environment, histonic land areas, or histonic structures? If "Yes," complete Schedule D, Part II Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not isted in Part X, or provide conflictions of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part V II Did the organization report an amount for land, buildings, and equipment in Part X, line 10° If "Yes," complete Schedule D, Part VII Did the organization report an amount for land, buildings, and equipment in Part X, line 10° If "Yes," complete Schedule D, Part VII Did the organization report an amount for lower streams—other securities or Part X, line 10° If "Yes," complete Schedule D, Part VII Did the organization report an amount for other assets related in Part X, line 10° If "Yes," complete Schedule D, Part VIII Did the organization report an amount for lower assets related in Part X, line 10	1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
3 Dut the coganization 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 II 5 Section 801(c)(3) organization. Did the organization engage in lobbying activities? If Yes," complete Schedule C, Part III 5 Section 801(c)(4), 801(c)(5), and 801(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and priory tax? If Yes," complete Schedule C, Part III 5 Section 801(c)(4), 801(c)(5), and 801(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and priory tax? If Yes," complete Schedule C, Part III 5 Did the organization maintain and your oardwace funds or any smintar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts of If Yes," complete Schedule D, Part II 7 Did the organization maintain and ease, or histonic structures? If Yes," complete Schedule D, Part II 8 Did the organization maintain and ease, or histonic structures? If Yes," complete Schedule D, Part II 9 Did the organization maintain and part X, line 21, serve as a custodian for amounts not listed in Part X, or provide cord counseling debt management, credit repair, or debt negotiation services? If Yes," complete Schedule D, Part VI 10 Did the organization develop or through a related organization, or debt propriets Schedule D, Part VI 11 Is the organization answer to any of the following questions "Yes?" If so, complete Schedule D, Part VI 12 Is the organization seport an amount for land, buildings, and equipment in Part X, line 10? If Yes," complete Schedule D, Part VI 13 Did the organization report an amount for investments—other securities in Part X, line 10? If Yes," complete Schedule D, Part VI 14 Did the organization report an amount for investments—other securities in Part X, line 10? If Yes," complete Schedule D, Part VI		complete Schedule A	1	х	
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Schedule C, Part II Section \$91(c)(4) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part III Section \$91(c)(4), 691(c)(5), and \$91(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 Did the organization maintain any donor advested funds or any symiat funds or accounts? If "Yes," complete Schedule D, Part II Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part III Did the organization maintain areas, or historic structures? If "Yes," complete Schedule D, Part III Did the organization maintain collections of works of ant, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 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 III 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 X II Did the organization report an amount for rebedule D, Part X III List the organization report an amount for leads of the part X, line 10 and X III	3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			
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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 task of "I'ves," complete Schedule C, Part III 5 5 7 7 7 7 7 7 7 7	4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete			
notice and reporting requirement and proxy tax? If Yes,** complete Schedule C, Part III 5 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 II 1 Did the organization retered or hold a conservation easement, including easements to preserve open space, the environment, historical trade areas, or historical treasures, or other similar assets? If Yes,** complete Schedule D, Part III 1 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If Yes,** complete Schedule D, Part III 1 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 1 Did the organization area of the following questions. Yes ''' If so, complete Schedule D, Part IV 1 Did the organization's answer to any of the following questions. Yes ''' If so, complete Schedule D, Part V 1 Is the organization's answer to any of the following questions. Yes ''' If so, complete Schedule D, Part V 2 Is the organization's answer to any of the following questions. Yes ''' If so, complete Schedule D, Part V 2 Is the organization report an amount for investments—other securities in Part X, line 10? If Yes,** complete Schedule D, Part V 1 Is the organization report an amount for investments—order securities in Part X, line 10? If Yes,** complete Schedule D, Part V II Is Did the organization report an amount for investments—order related in Part X, line 10? If Yes, 'complete Schedule D, Part X II Is Did the organization report an amount for other assets related in Part X, line 10? If Yes, 'complete Schedule D, Part X II Is Did the organization report an amount for other assets related in Part X, line 10? If Yes, 'complete Schedule D, Part X II Is Di		Schedule C, Part II	4		X
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7 Dut the organization receive or hold a conservation easement, including easements to preserve open space, the environment, histonic land areas, or histonic structures? If "Yes," complete Schedule D, Part III 8 Dut the organization maintain collections of works of art, histonical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 9 Dut the organization organization 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 V 10 Dut the organization depend or an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI 11 X 12 X 13 Is the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VII 10 Did the organization report an amount for investments—other securities in Part X, line 12? If "Yes," complete Schedule D, Part VII 11 Did the organization report an amount for investments—program related 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 VIII 12 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 13 Did the organization report an amount for other liabilities in Part X, line 15? If "Yes," complete Schedule D, Part VIII 14 Did the organization report an amount for other liabilities in Part X, line 15? If "Yes," complete Schedule D, Part X VIIII 15 Did the organization separate in dependent audited financial statements for the tax year? If "Yes," complete Schedule D, Part X VIIII		the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes,"			
the environment, historical and areas, or historic structures? If "Yes," complete Schedule D, Part II 7		complete Schedule D, Part I	6		X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 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 10 Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part VI 11 Is the organization answer to any of the following questions "Yes"? If so, complete Schedule D, Part VI 12 Is the organization report an amount for lined, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VII 13 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 VIII 14 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 VIII 15 Did the organization report an amount for other assets 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 16 Did the organization separate independent audiet financial statements for the tax year? If "Yes," complete Schedule D, Part X 17 Did the organization of subtrily for uncertain tax positions under IFIN 46? If "Yes," complete Schedule D, Part X 18 Did the organization as school described in section 170(b)(1)(A)(ii) If "Yes," complete Schedule D, Part X 19 Did the organization as school described in section 170(b)(1)(A)(ii) If "Yes," complete Schedule E, Part II 20 Did the organization have aggregate revenues or expenses of more than \$15,000 form graintaking, fundraising, business, and program service activities outside the United	7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
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20 Did the organization operate one or more hospitals? If "Yes," complete Schedule H	19	· · · · · · · · · · · · · · · · · · ·			
	20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H		000	

P	art IV Checklist of Required Schedules (continued)			age -
	3		Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations	i		
	in the United States on Part IX, column (A), line 12 If "Yes," complete Schedule I, Parts I and II	21	X	L
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_		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated	- 1		ļ
	employees? If "Yes," complete Schedule J	23	X	<u> </u>
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than		1	
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines		1	
	24b through 24d and complete Schedule K. If "No," go to line 25	24a	<u> </u>	X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b	<u> </u>	<u> </u>
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year	İ	ĺ	
	to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction		1	ļ
	with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a			
	prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or			
	990-EZ? If "Yes," complete Schedule L, Part I	25b		X
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or			
	disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,	ł		
	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		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,			
	Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a	<u> </u>	X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			
	Schedule L, Part IV	28b		X
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 direct or indirect owner? If "Yes," complete Schedule L,			
	Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	X	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			
	Part I	31	L	X
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	<u> </u>	X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33	ļ	X
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	<u>L</u>	X
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		X
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related			
	organization? If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,	1		
	Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and	1		1
	192 Note, All Form 990 filers are required to complete Schedule O	38	l X	ı

In Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of U.S. Information Returns Enter-O-4 not applicable 1 to 0	_Pa	rt V Statements Regarding Other IRS Filings and Tax Compliance						
U.S. Information Returns Enter-C+ in data policable 19							Yes	No
be Enter the number of Forms W/2G included in line 1a. Enter-0-find applicable Ont the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambing) winnings to prize winners? 2a. Enter the number of employees reported on Form W-3. Transmittal of Wage and Tax. Statements, Refe for the actioning year ending with or within the year covered by this return? bif at least one is reported on line 12a, did the organization file all required developed employment fax returns? Note. If the sum of files 1s and 2s in greater than 250, you may be required to e-file this return (see institutions) 3b. If If Yes, This is filed a Form 990-T for this year? If TNo," provide an explanation in Schedule O 4b. As 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)? 5c. Was the organization and account in a foreign country (such as a bank account, securities account)? 5c. Was the organization appray to a prohibited tax sheller transaction at any time during the tax year? 5d. Was the organization appray to a prohibited tax sheller transaction at any time during the tax year? 5d. Ut the "still the Sol of the organization file form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Sheller Transaction? 5c. Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization have annual gross receipts that are normally greater than \$100,000, and did the organization have more accounted to the organization file form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Sheller Transaction? 5c. Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization shell exclusion of the value of the goods or services provided? 5c. Does the organization with the version of the promise departs of the organization a	1a	·		_				
Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gamming (pambling) winnings to prize winners? 2a Enter the number of employees reported on from W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return 2		• •	1			_		
gamma (gambling) winnings to prize winners? 2 Eitel the number of employees reported on Form W-3. Transmittal of Wage and Tax 5 Italements, filed for the calendar year ending with or within the year covered by this return 5 If all least one is reported on line 2a, did the organization file all required development tax returns? 7 Note. If the sum of files 1 and 2a size greater than 25, you may be required to e-file the return (see institutions) 8 If 'Yes, 'has it filed a Form 990-T for this year? If 'No,' provide an explanation in Schedule O 8 3 X 8 If 'Yes, 'has it filed a Form 990-T for this year? If 'No,' provide an explanation in Schedule O 9 3 X 8 If 'Yes,' shart filed a Form 990-T for this year? If 'No,' provide an explanation in Schedule O 9 3 X 9 If 'Yes,' shart filed a Form 990-T for this year? If 'No,' provide an explanation in Schedule O 9 3 X 10 Yes and the dark provided in the organization file and a bank account, or other financial accounts over, a financial account in a foreign country (such as a bank account, securities account, or other financial accounts? 10 Yes 'enter the name of the foreign country is with a bank account. Securities account, or other financial accounts? 11 Yes,' shart file a Form 990-T for this year? If 'No,' provide an explanation in the reparation of the financial Accounts. 12 Yes 'enter the name of the foreign country is with the organization file from 886 The provided the shart year? 13 Yes the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts. 14 Yes,' indicate the number of organization that it was or is a party to a prohibited tax shelter transaction? 15 Yes 'the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts. 16 Yes 'd and year account of the organization that it was or is a party to a prohibited tax shelter transaction? 17 Yes 'thoulted Tax Shelter Transaction? 18 Yes 'thoulted Tax Shelter Transaction?	b	• •				4		
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Statements, filed for the calendar year ending with or within the year covered by this return Note. If the sum of lines 1a and 2e is greater than 250, you may be required to e-file this return? Note. If the sum of lines 1a and 2e is greater than 250, you may be required to e-file this return (see instructions) 3a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return? 3a X 1b If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O 3b			, ,	ı		1c	X	
If a least one is reported on line 2a, did the organization file all required federal employment tax returns? 2b X	2a			_	-			
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f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? g For all contributions of qualified intellectual property, did the organization file Form 8899 as required? h For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required? 8 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? 9 Sponsoring organizations maintaining donor advised funds. a Did the organization make any taxable distributions under section 4966? b Did the organization make a distribution to a donor, donor advisor, or related person? 9 Section 501(c)(7) organizations. Enter a Initiation fees and capital contributions included on Part VIII, line 12 b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b Section 501(c)(12) organizations. Enter a 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) 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b	0		ersona	1 1		_		
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12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? b if "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b	b	Gross income from other sources (Do not net amounts due or paid to other sources against	[]					
b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b		·				4		
		•	1 1) I		12a		
	<u>b</u>	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b	L	· · · · · · · · · · · · · · · · · · ·		000	

Form 990 (2009) THE EARLY LEARNING COALITION OF 65-1144775 Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions Section A. Governing Body and Management

					Yes	No
1a	Enter the number of voting members of the governing body	1a	19			
b	Enter the number of voting members that are independent	1b	19			
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		X
3	Did the organization delegate control over management duties customarily performed by or under the direct					
	supervision of officers, directors or trustees, or key employees to a management company or other person?			_ 3		X
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was	filed?		4		Х
5	Did the organization become aware during the year of a material diversion of the organization's assets?			5		Х
6	Does the organization have members or stockholders?			6		Х
7a	Does the organization have members, stockholders, or other persons who may elect one or more members					
	of the governing body?			7a		X
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?			7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during					
	the year by the following					
а	The governing body?			8a	X	
b	Each committee with authority to act on behalf of the governing body?			8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached					
	at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O			9_		Х

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

			Yes	No
10a	Does the organization have local chapters, branches, or affiliates?	10a		Х
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters,	1		
	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?	11	х	
11a	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	Х	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give	132		
	rise to conflicts?	12b	х	
С	The state of the s			
	describe in Schedule O how this is done	12c	х	ŀ
13	Does the organization have a written whistleblower policy?	13		X
14	Does the organization have a written document retention and destruction policy?	14		Х
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	X	
ь	Other officers or key employees of the organization	15b	X	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (See instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement			
	with a taxable entity during the year?	16a		X
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate			
	its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard			
	the organization's exempt status with respect to such arrangements?	16b		

- List the states with which a copy of this Form 990 is required to be filed
- Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply
 - X Own website X Another's website X Upon request
- 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
- State the name, physical address, and telephone number of the person who possesses the books and records of the 5256 SUMMERLIN COMMONS BLVD organization > COTTER, NGA

FL 33907

239-267-4105

Form 990 (2009)

Form 990 (2009) THE EARLY LEARNING COALITION OF 65-1144775

Page 7

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year. 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. 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, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. List persons in the following order individual trustees or directors, institutional trustees, officers, key employees, highest compensated employees, and former such persons

(A) Name and Title	(B) Average	Posi	tion ((C checl	C) k all '	that a	pply)	(D) Reportable	(E) Reportable	(F) Estimated
	hours per week	Individual trustee or director		Officer		Highest compensated employee		compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations
SEE ATTACHED			ļ					0	0	
KATHLEEN REYNOLD										
CEO NGA COTTER	40.00	-	\vdash	X		-		173,141	<u> </u>	-
CFO	40.00			x				119,838	o	
	40.00							119,036		
		ļ				ļ				
		<u> </u>				-				
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		├_		_	_	<u> </u>				
		_	-		_	_				
							Pan	e 45		

DAA

Form 990 (2009)

Pa	rt V	III Statement of Reve	nue					
					(Å) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
र र	1a	Federated campaigns	1a		,	7 1 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7	····	
E E		Membership dues	1b					
56		Fundraising events	1c					
ar a		Related organizations	1d	· · · · · · · · · · · · · · · · · · ·		j		
9.E		Government grants (contributions)		45,035,245				
Sign		All other contributions, gifts, grants,	'* -	13,033,213				
풀릴	1	and similar amounts not included above	امدا	953,014				
	_		1f					
aga		Noncash contributions included in lines 1a-	1f \$	68,541	45 000 050			
Program Service Revenue Contributions, gifts, grants and other similar amounts	<u> </u>	Total. Add lines 1a-1f		<u> </u>	45,988,259			
Ž	_			Busn. Code			······································	
ě	2a							
وه ا	b			ļ				
.કું	С			ļ <u>.</u>				
လိ	d							
E	е							
ē.	f	All other program service reve	nue			.,	 	
<u>-</u>	g	Total. Add lines 2a-2f		<u> </u>				
Ì	3	Investment income (including	dıvıdends, i	nterest, and				
		other similar amounts)		>	838			838
	4	Income from investment of tax	exempt bo	ond proceeds 🕨				
	5	Royalties		•				
		(ı) Real		(ii) Personal				
	6a	Gross Rents						
	b	Less rental exps						
	С	Rental inc or (loss)				}		
	d	Net rental income or (loss)		•				
		Gross amount from (i) Securities	9	(ii) Other		-		
		sales of assets other than inventory						
	b	Less cost or other						
		basis & sales exps						
	c	Gain or (loss)						
		Net gain or (loss)		•		<u> </u>		
		Gross income from fundraising eve	nts				· · · · · · · · · · · · · · · · · · ·	
venue		(not including \$						
		of contributions reported on line 1c	\					
Other Re		See Part IV, line 18	a					
her	h	Less direct expenses	<u></u>					
ŏ		Net income or (loss) from fund		inte		İ	-	
		Gross income from gaming activitie		and P				
	36	See Part IV, line 19	1					
	.	Less direct expenses	a b					
		Net income or (loss) from garr	- " └	es Þ				
			ing activitie					
	iva	Gross sales of inventory, less	_]					
		returns and allowances	a					
		Less cost of goods sold	b[
	<u>c</u>	Net income or (loss) from sale						
	4.	Miscellaneous Revenue		Busn Code	c 700	6 303		
	11a	•			6,703	6,703		
	b	FINGERPRINTING REVENU	JE		4,927	4,927	 	
	C	A.G		<u> </u>		······································		-
		All other revenue		l				
		Total Add lines 11a-11d		.	11,630			
	12	Total Revenue. See instruction	ns	<u> </u>	46,000,727	11,630	0	838

Part IX **Statement of Functional Expenses**

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

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

Do	not include amounts reported on lines 6b,	(A) Total expenses	(B) Program service	(C) Management and	(D) Fundraising
<u>7b,</u>	8b, 9b, and 10b of Part VIII.	Town expenses	expenses	general expenses	expenses
1	Grants and other assistance to governments and				
	organizations in the U.S. See Part IV, line 21	43,298,136	43,298,136		
2	Grants and other assistance to individuals in				
	the U.S. See Part IV, line 22			4)444	
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,			ì	
	trustees, and key employees	128,600	72,304	56,296	
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	860,862	465,336	395,526	
8	Pension plan contributions (include section 401(k)	ļ			
	and section 403(b) employer contributions)				
9	Other employee benefits	45,949	36,516	9,433	
10	Payroll taxes	79,633	52,764	26,869	<u>-</u>
11	Fees for services (non-employees)				
а	Management				
b	Legal				
С	Accounting				
d	Lobbying				
e	Professional fundraising services See Part IV, line 17				
f	Investment management fees				
g	Other				
12	Advertising and promotion	14,016	14,016		
13	Office expenses	1,563	1,563		
14	Information technology				
15	Royalties				
16	Occupancy			100	
17	Travel	15,214	15,021	193	
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	1,952	1,897	55	
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	20,198	11,109	9,089	
23	Insurance				,,
24	'				
	covered above (Expenses grouped together				
	and labeled miscellaneous may not exceed			1	
	5% of total expenses shown on line 25 below)	E30 0F1	520 253		
a	MATCH	538,251	538,251 259,882	164,857	
b	CONSULTANTS & SUPPLIES	424,739 407,795	292,007	115,788	
c	SHARED COSTS	122,112	119,628	2,484	
d	CONTRACT SERVICES	47,319	43,616	3,703	·····
8	OTHER EXPENSES	1,117	1,081	3,703	
	All other expenses	46,007,456	45,223,127	784,329	
25		40,007,430	33,463,141	107,343	
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 campaign and	Pag	- 48		
DAA	fundraising solicitation	rayı	<u> </u>		Form 990 (2009)
					- •

			(A)	\neg	(B) ,				
			Beginning of year		End of year				
	Cash—non-interest bearing	-	210,896	1	164,307				
	2 Savings and temporary cash investments	<u> </u>	0 655 564	_2					
;	Pledges and grants receivable, net	-	2,673,864	3	2,533,464				
1 1		-	230,969	4	422,684				
!		vables from current and former officers, directors, trustees, key yees, and highest compensated employees. Complete Part II of							
		plete Part II of							
	Schedule L	<u> </u>		5					
'	Receivables from other disqualified persons (as defined								
	4958(f)(1)) and persons described in section 4958(c)(3)(B) Complete	1						
,	Part II of Schedule L	_		6					
i i	Notes and loans receivable, net	<u> </u>		7	· · · · · · · · · · · · · · · · · · ·				
	Inventories for sale or use	<u> </u>		8					
۱,	Prepaid expenses and deferred charges		36,986	9	107,295				
11	Da Land, buildings, and equipment cost or								
	other basis Complete Part VI of Schedule D	10a 220,831							
	b Less accumulated depreciation	10b 157,497	68,532	10c	63,334				
1	Investments—publicly traded securities			11					
1:	Investments—other securities See Part IV, line 11	<u> </u>		12					
1:	Investments—program-related See Part IV, line 11			13					
14	Intangible assets	L		14					
1:	Other assets See Part IV, line 11	L	18,371	15	18,372				
1	Total assets. Add lines 1 through 15 (must equal line 34	1)	3,239,618	16	3,309,456				
1	7 Accounts payable and accrued expenses		2,924,022	17	3,025,411				
1	Grants payable	Ĺ		18					
1	Deferred revenue		12,302	19	23,987				
2	Tax-exempt bond liabilities			20					
3 2	Escrow or custodial account liability. Complete Part IV of	f Schedule D		21					
2 2	Payables to current and former officers, directors, truste	es, key							
1	employees, highest compensated employees, and disqu	ualified	,						
	persons Complete Part II of Schedule L			22					
2	3 Secured mortgages and notes payable to unrelated third	d parties		23					
2	Unsecured notes and loans payable to unrelated third pa	arties		24					
2	5 Other liabilities Complete Part X of Schedule D		100,781	25	64,274				
2	Total liabilities. Add lines 17 through 25		3,037,105	26	3,113,672				
3	Organizations that follow SFAS 117, check here ▶ X	and							
3	complete lines 27 through 29, and lines 33 and 34.	-							
2	7 Unrestricted net assets		202,513	27	195,784				
1 2	3 Temporarily restricted net assets			28					
2	Permanently restricted net assets			29					
2 2 2	Organizations that do not follow SFAS 117, check her	re ▶ 🗍							
	and complete lines 30 through 34.								
, 3		j		30					
វ្ត 3		t fund		31					
ź 3				32					
3 3 3 3	-	Ī	202,513	33	195,784				
3		ľ	3,239,618		3,309,456				

Form **990** (2009)

	990 (2009) THE EARLY LEARNING COALITION OF 65-1144775		Pa	ge 12
Pa	rt XI Financial Statements and Reporting			·
			Yes	No
1	Accounting method used to prepare the Form 990 Cash X Accrual Other			ĺ
	If the organization changed its method of accounting from a prior year or checked "Other," explain in			1
	Schedule O			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		X
b	Were the organization's financial statements audited by an independent accountant?	2b	X	
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of			
	the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain in			
	Schedule O			ĺ
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were			ĺ
	issued on a consolidated basis, separate basis, or both.			ĺ
	X Separate basis Consolidated basis Both consolidated and separate basis			ĺ
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in			ĺ
	the Single Audit Act and OMB Circular A-133?	3a	X	L
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	X	
		Form	990	(2009)

SCHEDULE A (Form 990 or 990-EZ)

(rom 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

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

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

OMB No 1545-0047

2009

Open to Public Inspection

——————————————————————————————————————	RNING COALITION	N OF				1		ntification number	
SOUTHWEST FLOR		may set a	amanlat	o this				4775	
Part Reason for Public Charity Sta					part.)	see II	istruc	ions.	
The organization is not a private foundation because it	•	•		•					
A school described in a set of 470/b/(A)/A/(A)		n section	170(0)(1)(A)(I).					
A school described in section 170(b)(1)(A)(ii	• •	4: 470/	*LV4V4V4						
A hospital or a cooperative hospital service of									
4 A medical research organization operated in	conjunction with a hospital d	escribed	ın sectio	n 170(b)(1)(A)(ii	ii). Ente	er the ho	ospital's name,	
city, and state									
An organization operated for the benefit of a section 170(b)(1)(A)(iv). (Complete Part II)	college or university owned	or operate	ed by a g	overnme	ental uni	descri	bed in		
6 A federal, state, or local government or gove	urnmental unit described in ea	etion 17	0/6\/4\/A	Max					
7 X An organization that normally receives a sub					from the	00000	al public		
described in section 170(b)(1)(A)(vi). (Comp		iii a gove	minema	unit or	nonn the	genera	ii public		
8 A community trust described in section 170(·	11.5							
9 An organization that normally receives (1) m		-	contribut	one ma	mhorch	n foos	and ar		
receipts from activities related to its exempt (_		
support from gross investment income and u	•		-	-					
acquired by the organization after June 30, 1		•			,	usines.	303		
10 An organization organized and operated excl	, ,, ,	• •		•					
11 An organization organized and operated excl	•	•				out the	-		
purposes of one or more publicly supported of	•				•			1	
509(a)(3). Check the box that describes the t	=								
a Type I b Type II	c Type III-Functiona		•	d		e III–Ot	her		
By checking this box, I certify that the organization				- 1					
persons other than foundation managers and		-						1	
509(a)(1) or section 509(a)(2)	· · · · · · · · · · · · · · · · · ·	,							
f If the organization received a written determine	nation from the IRS that it is	a Type I.	Type II.	or Type	III suppo	ortina			
organization, check this box		,,,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,						
g Since August 17, 2006, has the organization	accepted any gift or contribu	ition from	any of th	ne					
following persons?			-						
(i) A person who directly or indirectly control	ols, either alone or together v	vith perso	ns descr	ibed in (п)			Yes	No
and (iii) below, the governing body of the	e supported organization?							11g(i)	
(ii) A family member of a person described	ın (ı) above?							11g(iı)	
(iii) A 35% controlled entity of a person desc	cribed in (i) or (ii) above?							11g(iii)	
h Provide the following information about the s	supported organization(s)								
(i) Name of supported (ii) EIN	(iii) Type of organization	(IV) is the o	rganization	(v) Did y	rou notify	(vi)	is the	(vii) Amount of	-
organization	(described on lines 1-9	in col (i) lis			nization in of your	organizat	non in col ized in the	support	
	above or IRC section (see instructions))	governing	documenty		port?		\$?		
		Yes	No	Yes	No	Yes	No		
		_							
		·							
				i .					
									

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

Schedule A (Form 990 or 990-EZ) 2009

Sche 5	dule A (Form 990 or 990-EZ) 2009 THE	S EARLY LE	ARNING CO	ALITION O	F 65	-1144775	Page 2
Pa	Support Schedule for O (Complete only if you che	rganizations De	escribed in Se	ections 170(b)(8 of Part I.))
Sec	tion'A. Public Support						
Cal	endar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	31,906,506	38,026,251	40,073,174	41,516,294	45,988,259	197,510,484
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3	31,906,506	38,026,251	40,073,174	41,516,294	45,988,259	197,510,484
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6	Public support. Subtract line 5 from line 4			<u> </u>			197,510,484
	tion B. Total Support	,					
Ca	endar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
7	Amounts from line 4	31,906,506	38,026,251	40,073,174	41,516,294	45,988,259	197,510,484
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	2,302	2,006	16,975	1,600	838	23,721
9	Net income from unrelated business activities, whether or not the business is regularly carried on					0	
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)					11,630	11,630
11	Total support. Add lines 7 through 10						197,545,835
12	Gross receipts from related activities, etc	(see instructions)				12	28,605
13	First five years. If the Form 990 is for the	organization's first,	second, third, fou	rth, or fifth tax year	as a section 501	(c)(3)	
	organization, check this box and stop her	e					•
Sec	tion C. Computation of Public St	upport Percent	age				
14	Public support percentage for 2009 (line 6	6, column (f) divided	by line 11, column	n (f))		14	99.98%
15	Public support percentage from 2008 Sch	edule A, Part II, line	: 14			15	99.99%
16a	33 1/3 % support test—2009. If the organ	nization did not chec	k the box on line	13, and line 14 is 3	3 1/3 % or more,	check this box	
	and stop here. The organization qualifies		_				▶ [X
b	33 1/3 % support test—2008. If the organ	nization did not chec	k a box on line 13	or 16a, and line 15	5 is 33 1/3 % or m	ore, check this	
	box and stop here. The organization qual	ifies as a publicly su	ipported organizat	ion			▶ [_]
17a	10%-facts-and-circumstances test200	•					
	more, and if the organization meets the "f			•	•		
	organization meets the "facts-and-circums		•				▶ ∐
b	10%-facts-and-circumstances test—200	=					
	more, and if the organization meets the "fo				•		▶ □
40	organization meets the "facts-and-circums						I H

Schedule A (Form 990 or 990-EZ) 2009

Sche	dule A (Form 990 or 990-EZ) 2009 THE	EARLY LE	ARNING CO	ALITION (OF 65	-1144775	Page 3
	rt III Support Schedule for Or						
	(Complete only if you che	cked the box	on line 9 of Pa	rt I.)		·	
	tion A. Public Support						
Cal	endar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")						
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						·
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received						
	from other than disqualified persons that						
	exceed the greater of \$5,000 or 1% of the				j	1	
	amount on line 13 for the year						
C	Add lines 7a and 7b					<u> </u>	
8	Public support (Subtract line 7c from line 6)						
	tion B. Total Support				····	·	
Ca	lendar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9	Amounts from line 6						
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
C	Add lines 10a and 10b					 	· · · · · · · · · · · · · · · · · · ·
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
13	Total support. (Add lines 9, 10c, 11, and 12)						
14	First five years. If the Form 990 is for the	organization's first	, second, third, for	urth, or fifth tax ye	ar as a section 50	1(c)(3)	
	organization, check this box and stop here						<u> </u>
Sec	tion C. Computation of Public Su	pport Percent	tage				,
15	Public support percentage for 2009 (line 8	, column (f) divided	d by line 13, colum	ın (f))		15	%
16	Public support percentage from 2008 Scho					16	%
Sec	tion D. Computation of Investme	nt Income Per	centage		_		
17	Investment income percentage for 2009 (In	ine 10c, column (f)	divided by line 13	, column (f))		17	%_
18	Investment income percentage from 2008	•				18	%
19a							. \square
	17 is not more than 33 1/3 %, check this b	•	-				▶ ∐
þ	33 1/3 % support tests—2008. If the orga						⊾ □
	line 18 is not more than 33 1/3 %, check to						ZH
20	Private foundation. If the organization did	пот check a box c	on line 14, 19a, or	I SD, CNECK this bo	x and see instruct	ions	

Schedule A (Form 990 or 990-EZ) 2009 THE EARLY LEARNING COALITION OF 65-1144775 Page 4

Part IV Supplemental Information. Complete this part to provide the explanations required by Part II, line 10;

Part II, line 17a or 17b; and Part III, line 12. Provide any other additional information. See instructions

PART II, LINE 10 - OTHER INCOME DETAIL

OTHER

\$

11,630

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.

Open to Public Inspection

OMB No 1545-0047

Employer identification number Name of the organization THE EARLY LEARNING COALITION OF 65-1144775 SOUTHWEST FLORIDA INC. Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if Part I 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) 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 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 can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or pleasure) Preservation of an historically important land area Protection of natural habitat Preservation of certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Tax Year a Total number of conservation easements 2a 2b b Total acreage restricted by conservation easements c Number of conservation easements on a certified historic structure included in (a) 2c 2d d Number of conservation easements included in (c) acquired after 8/17/06 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during 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 Yes No violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year Amount 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 Yes No 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? 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. 1a If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items b If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items (i) Revenues included in Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items

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

b Assets included in Form 990, Part X

Schedule D (Form 990) 2009 THE EARLY	LEARNING CO	DALITION OF	65-11	44775	Page 2
Part III Organizations Maintaining (Collections of Ar	t, Hi <mark>storical Trea</mark> s	sures, or Other	Similar Asse	ets (continued)
3 Using the organization's acquisition, accession collection items (check all that apply)	, and other records, cl	heck any of the following	ng that are a signific	ant use of its	
a Public exhibition	d 🗌 Loa	n or exchange progran	ns		
b Scholarly research	e Oth		•		
c Preservation for future generations	· _ ·	·			-
4 Provide a description of the organization's colle	ections and explain ho	w they further the orga	nızatıon's exempt pı	urpose in	
Part XIV 5 During the year, did the organization solicit or re	eceive donations of ar	rt, historical treasures,	or other similar		
assets to be sold to raise funds rather than to be	e maintained as part	of the organization's co	ollection?		Yes No
Part IV Escrow and Custodial Arrar IV, line 9, or reported an amo			ation answered	"Yes" to For	m 990, Part
1a Is the organization an agent, trustee, custodian			her assets not		
included on Form 990, Part X?					Yes No
b If "Yes," explain the arrangement in Part XIV ar	nd complete the follow	ung table			
b ii 103, explain the altangement iii i art XIV al	to complete the renest	mig toolo			Amount
c Reginning halance				1c	
c Beginning balance				1d	
d Additions during the year				1e	
e Distributions during the year				1f	
f Ending balance	000 Dart V Ivaa 31	2		<u> </u>	——————————————————————————————————————
2a Did the organization include an amount on For	m 990, Part X, line 21	•			Yes No
b If "Yes," explain the arrangement in Part XIV Part V Endowment Funds. Comple	to if organization	answered "Ves"	to Form 990 Pa	art IV line 10	
Part V Endowment Funds. Comple			(c) Two years back		
	(a) Current year	(b) Pnor year	(c) Two years back	(d) Three years t	back (e) rour years back
1a Beginning of year balance			<u> </u>	 	
b Contributions				 	
c Net investment earnings, gains,					
and losses					
d Grants or scholarships		ļ		ļ	
Other expenditures for facilities					
and programs					
f Administrative expenses					
g End of year balance		<u> </u>			
2 Provide the estimated percentage of the year e	end balance held as				
a Board designated or quasi-endowment ▶	%				
b Permanent endowment ▶ %					
c Term endowment ▶ %					
3a Are there endowment funds not in the possess	ion of the organization	n that are held and adn	ninistered for the		
organization by					Yes No
(i) unrelated organizations					3a(i)
(ii) related organizations					3a(ii)
b If "Yes" to 3a(ii), are the related organizations i	isted as required on S	Schedule R?			3b
4 Describe in Part XIV the intended uses of the o	•				
Part VI Investments—Land, Buildir			0, Part X, line 1	0.	
Description of investment	(a) Cost or other bas			cumulated	(d) Book value
	(investment)	basis (other	r) dep	reciation	
1a Land					
b Buildings					
c Leasehold improvements					
d Equipment	· · · · · · · · · · · · · · · · · · ·	220	,831	157,497	63,334
e Other					
Total. Add lines 1a through 1e (Column (d) must eq	ual Form 990, Part X,	column (B), line 10(c))	•	63,334

Schedule D (Form 990) 2009

Schedule D (Form 990) 2009 THE EARLY LEARNING CO.		65-1144775	Page 3
Part VII Investments—Other Securities. See Form 990			
(a) Description of security or category	(b) Book value	(c) Method o	,
(including name of security)		Cost or end-of-ye	ar market value
Financial derivatives		· · · · · · · · · · · · · · · · · · ·	
Closely-held equity interests		<u>-</u>	
Other			 · -
	·		
			· · · · · · · · · · · · · · · · · · ·
			
		······································	
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)			
Part VIII Investments—Program Related. See Form 990			
(a) Description of investment type	(b) Book value	(c) Method o	
		Cost or end-of-year	ar market value
			
	 -	·. ··· ··· ···	
	_	· · · · · · · · · · · · · · · · · · ·	
			· · · · · · · · · · · · · · · · · · ·
			· · · · · · · · · · · · · · · · · · ·
Total. (Column (b) must equal Form 990, Part X, col. (B) line 13.)			
Part IX Other Assets. See Form 990, Part X, line 15			
(a) Description			(b) Book value
			· ····
	<u>-</u> .		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)		•	
Part X Other Liabilities. See Form 990, Part X, line 25)		
1 (a) Description of liability	(b) Amount		
Federal income taxes			
PAYROLL LIABILITIES	64,274		
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)	64,274		
2. FIN 48 Footnote. In Part XIV. provide the text of the footnote to the organi		its that reports the	

Sche	dule D (Form 990) 2009 THE EARLY LEARNING COALITION		<u>65-114477</u>		Page 4
Pa	rt XI Reconciliation of Change in Net Assets from Form 990 t	to Audi	ted Financial Staten	nents	;
1	Total revenue (Form 990, Part VIII, column (A), line 12)			1	46,000,727
2	Total expenses (Form 990, Part IX, column (A), line 25)			2	46,007,456
3	Excess or (deficit) for the year Subtract line 2 from line 1			3	-6,729
4	Net unrealized gains (fosses) on investments			4	
5	Donated services and use of facilities			5	
	Investment expenses			6	
6 7	Prior period adjustments			7	<u> </u>
8	Other (Describe in Part XIV)			8	
9	Total adjustments (net) Add lines 4 through 8			9	
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and	4 0		10	-6,729
	rt XII Reconciliation of Revenue per Audited Financial Statem		ith Revenue per Re		57.25
	Total revenue, gains, and other support per audited financial statements	TOTAL TA	indi itovolido poi ito	1	46,087,828
1	Amounts included on line 1 but not on Form 990, Part VIII, line 12				20/00//020
2	Net unrealized gains on investments	2a	}		
	Donated services and use of facilities	2b	87,101	1	
b		2c	07,101	1	
C	Recoveries of prior year grants	2d		1	
d	Other (Describe in Part XIV)	20		20	87 101
	Add lines 2a through 2d			3	87,101 46,000,727
3	Subtract line 2e from line 1	ſ		`	40,000,727
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	1			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a 4b		1	ļ
b	Other (Describe in Part XIV)	40	L	4c	
	Add lines 4a and 4b			5	46,000,727
5		monte l	Mith Evnances nor		'n
		mema	With Expenses per	1	46,094,557
1	Total expenses and losses per audited financial statements			···	40,034,337
2	Amounts included on line 1 but not on Form 990, Part IX, line 25	ء ا	87,101		
a	Donated services and use of facilities	2a 2b	07,101	1	
þ	Prior year adjustments	2c		1	
c	Other losses	2d		1 .	
đ	Other (Describe in Part XIV)	_ 20	L . <u>.</u>	29	87 101
e	Add lines 2a through 2d			3	87,101 46,007,456
3	Subtract line 2e from line 1	ſ	l	-	10,001,130
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a 4b	<u> </u>	1 :	
D	Other (Describe in Part XIV)	(40	L	٠ 🕹	
_ C	Add lines 4a and 4b			4c	46,007,456
	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)		· · · · · · · · · · · · · · · · · · ·	<u> </u>	10,001,130
	art XIV Supplemental Information	lines 1s	and A. Dart IV. lines 4h		
	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III				
	2b, Part V, line 4, Part X, line 2, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII,	, illies zu	and 40 Also complete		
this	part to provide any additional information				
					. – – – – –
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Sched	lule (D (Fo	orm 9	990)	200	9	TH	IE	E	ARI	ΓX	LE	AR	NI.	NG	CO	AL	IT	10	N (OF_	 _ 6	5 - 1	14	477	75					Page 5
Par	rt XI	V	Su	pp	em	ent	tal I	nfc	orm	atio	on ((cor	ntinu	ied))		-														

																														•	
	_	_	_	_	_	_		_	_	_	_	_			- –	_	_	_	_	_	- -	 _		-	_	_	_			_	
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SCHEDULE (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

Part

Complete if the organization answered "Yes" on Form 990, Part IV, lines 21 or 22. Governments, and Individuals in the United States Grants and Other Assistance to Organizations,

▶ Attach to Form 990.

Q F

THE EARLY LEARNING COALITION

General Information on Grants and Assistance SOUTHWEST FLORIDA INC.

Open to Public Inspection 2009

> Employer identification number 65-1144775

OMB No 1545-0047

s the select	the amount of the gance?	rants or as	sistance, the grantees's in the United States	the grants or assistance, the grantees' eligibility for the grants or assistance, and se of grant funds in the United States	or assistance, and		X Yes	2
Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use Part IV and Schedule I-1 (Form 990) if additional space is needed	overnments an ecipient that re)) if additional s	id Organ ceived n pace is i	izations in the Ur nore than \$5,000. needed	nited States. Com Check this box if r	olete If the org	anization ansv nt received mo	wered Tes to ore than \$5,000. Use	
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance	
COMMUNITY COORDINATED 350 WEST COLONIAL DRIVE							VPK / SR	
			40,463,721					
REDLANDS CHRISTIAN								
402 WEST MAIN STREET IMMOKALEE FL 34142			2,834,415				VOLUNIARY PRE-K	
Page 62								
							,	
								-
2 Enter total number of section 501(c)(3) and government organizations	t organizations							

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

3 Enter total number of other organizations

Schedule I (Form 990) 2009

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Schedule I (F	Schedule I (Form 990) 2009 THE EARLY LEARNING COALI	PARNING COALIT	TION OF 6	65-1144775		Page 2
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 Part IV and Schedule I-1 (Form 990) if additional space is needed.	to Individuals in the (Form 990) if addition	e United States. Con onal space is needed	nplete if the organiza	tion answered "Yes" to For	m 990, Part IV, line 22.
Ū	(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
Part IV	Supplemental Information. Complete this part to		provide the information	on required in Part I,	provide the information required in Part I, line 2, and any other additional information	onal information

Page 63

Schedule I (Form 990) 2009

SCHEDULE J

(Form 990)

Department of the Treasury Internal Revenue Service

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

Complete if the organization answered "Yes" to Form 990,

Part IV, line 23.

▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

Open To Public Inspection

THE EARLY LEARNING COALITION OF Name of the organization SOUTHWEST FLORIDA INC. Part I **Questions Regarding Compensation**

Employer identification number 65-1144775

			Yes	No_
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form			
	990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items			
	First-class or charter travel Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (e.g., maid, chauffeur, chef)			
b	If any of the boxes on line 1a is checked, did the organization follow a written policy regarding payment			
_	or reimbursement or provision of all of the expenses described above? If "No," complete Part III to		}	
	explain	1b		L
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all			
	officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	2		
3	Indicate which, if any, of the following the organization uses to establish the compensation of the			
ŭ	organization's CEO/Executive Director Check all that apply			
	X Compensation committee Written employment contract			
	Independent compensation consultant X Compensation survey or study		1	
	X Form 990 of other organizations X Approval by the board or compensation committee			
	Tomi 350 of other organizations			
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing			
	organization or a related organization			
а	a Receive a severance payment or change-of-control payment?	4a	<u> </u>	X
t	b Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b	<u> </u>	X
c	Participate in, or receive payment from, an equity-based compensation arrangement?	4c	ļ	X
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III			
	Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5–9.			
_	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any			
•	compensation contingent on the revenues of			
	a The organization?	5a		х
	b Any related organization?	5b	†	X
•	If "Yes" to line 5a or 5b, describe in Part III			
6	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any			
٠	compensation contingent on the net earnings of			
	a The organization?	6a	1	x
	b Any related organization?	6b		X
٠	If "Yes" to line 6a or 6b, describe in Part III			
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed			1
•	payments not described in lines 5 and 6? If "Yes," describe in Part III	7		x
Ω	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was			
•	subject to the initial contract exception described in Regs section 53 4958-4(a)(3)? If "Yes," describe			
	in Part III	8		x
9				
•	Regulations section 53 4958-6(c)?	9		

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

Schedule J (Form 990) 2009

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Part II

Schedule J (Form 990) 2009

65-1144775 THE EARLY LEARNING COALITION OF

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

Page 2

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)(i)-(iii) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a

	-	Amobacean (a)	25 M. Oool rolpes C MISC	contranent	C) Potroment and	aldexetand (0)	(E) Total of columns	(F) Compareston
		(D) Dieakgown	or vv-z and/or 1099-mist	compensation	(c) Remement and	(D) NOTITAXABLE	(E) Total of Columns	(r) compen
(A) Name	-	(i) Base compensation	(i) Base (ii) Bonus & incentive (iii) Other compensation reportable compensation compensation	(iii) Other reportable compensation	omer deferred compensation	Denefits	(a)-(ı)(a)	Form 990 or Form 990-EZ
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Schedule J (Form 990) 2009

Page 3

Schedule J (Form 990) 2009 THE EARLY LEARNING COALITION OF 65-1144775

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

Department of the Treasury

Internal Revenue Service

SCHEDULE M (Form 990)

Noncash Contributions

► Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.

Attach to Form 990

OMB No 1545-0047

2009

Open To Public Inspection

THE EARLY LEARNING COALITION OF Name of the organization Employer identification number SOUTHWEST FLORIDA INC. 65-1144775 Part I Types of Property (a) (b) (c) (d) Check if **Number of Contributions** Revenues reported on Method of determining applicable Form 990, Part VIII, line 1g revenues Art-Works of art Art-Historical treasures 2 Art-Fractional interests 3 4 Books and publications 5 Clothing and household goods 6 Cars and other vehicles 7 Boats and planes 8 Intellectual property Securities-Publicly traded 9 10 Securities-Closely held stock 11 Securities-Partnership, LLC, or trust interests 12 Securities-Miscellaneous 13 Qualified conservation contribution-Historic structures Qualified conservation contribution-Other Real estate-Residential 15 16 Real estate—Commercial 17 Real estate-Other Collectibles 18 19 Food inventory Drugs and medical supplies 20 21 Taxidermy 22 Historical artifacts 23 Scientific specimens 24 Archeological artifacts 68,541 X Other ▶(SUPPLIES 1 25 26 Other ▶ (27 Other ► (28 Other ▶ (29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement 29 Yes No 30a During the year, did the organization receive by contribution any property reported in Part I, lines 1–28 that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period? 30a X b If "Yes," describe the arrangement in Part II Does the organization have a gift acceptance policy that requires the review of any non-standard X contributions? 31 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash X contributions? 32a If "Yes," describe in Part II 33 If the organization did not report revenues in column (c) for a type of property for which column (a) is checked,

describe in Part II

Schedule M (Form 990) 2009 THE EARLY LEARNING COALITION OF 65-1144775

Part II Supplemental Information. Complete this part to provide the information required by Part I, lines 30b,

Page 2

32b, and 33. Also complete this part for any additional information.

SCHEDULE O

(Form 990)

Department of the Treasury

Supplemental Information to Form 990

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

Attach to Form 990.

'2009 Open to Public Inspection

OMB No. 1545-0047

Internal Revenue Service

Name of the organization

THE EARLY LEARNING COALITION OF SOUTHWEST FLORIDA INC.

Employer identification number 65 ~ 1144775

FORM 990 - ORGANIZATION'S MISSION OR MOST SIGNIFICANT ACTIVITIES
THE ORGANIZATION'S PRIMARY EXEMPT PURPOSE IS TO ENHANCE THE
QUALITY OF CHILDREN'S LIVES BY PROVIDING FAMILIES, EARLY
CHILDHOOD EDUCATORS, CARE-GIVERS AND COMMUNITY PARTNERS IN
COLLIER, GLADES, HENDRY AND LEE COUNTIES, WITH
OPPORTUNITIES TO POSITIVELY IMPACT THE FUTURE. THE EARLY
LEARNING PROGRAMS HAVE HIGH QUALITY STANDARDS,
COMPREHENSIVE SERVICES, SEAMLESS DELIVERY SYSTEMS WITH
DIVERSE SETTINGS, AND WELL-EDUCATED, COMPETENT STAFF. THE
DELIVERY SYSTEMS FOR SCHOOL READINESS PROGRAMS IS COMPRISED
OF CHILD CARE PROVIDERS AND OF SCHOOL-BASED SITES OPERATED
BY PUBLIC AND NONPUBLIC SCHOOLS.

FORM 990, PART III, LINE 4C - THIRD ACHIEVEMENT HAZARDS FOR CHILDREN IN THEIR CARE.

- · DETERMINING THE QUALITY OF PROGRAMS OFFERED BY CONTRACTED CHILD CARE
 PROVIDERS BY EVALUATING THEM ON A NATIONALLY KNOWN RELIABLE AND VALID
 ASSESSMENT, THE ENVIRONMENT RATING SCALES.
- · OFFERING PROFESSIONAL DEVELOPMENT TO EARLY LEARNING/EARLY CARE

 PROFESSIONALS SO THAT THEY MAY ENGAGE IN CONTINUOUS QUALITY IMPROVEMENT

 INITIATIVES TO UPGRADE THEIR PROGRAMS.
- ENROLLING CHILDREN IN CONTRACTED PROGRAMS THAT HAVE BEEN INSPECTED FOR HEALTH AND SAFETY ISSUES AND ASSESSED FOR THE QUALITY OF THEIR PROGRAMS.
- · SCREENING CHILDREN FOR HEARING AND VISION CONCERNS.
- SCREENING CHILDREN TO DETERMINE IF THEY ARE DEVELOPING TYPICALLY, AND

Employer identification number

65-1144775

PROVIDING SUPPORT FOR CHILDREN WHO SCORE BELOW THE TYPICALLY DEVELOPING RANGE.

- · ASSESSING STUDENT LEARNING BY DOING PRE AND POSTS TESTS WITH CHILDREN TO

 DETERMINE ADVANCES IN THEIR SKILL AND KNOWLEDGE AS A RESULT OF

 PARTICIPATION IN THE SUBSIDIZED CHILD CARE PROGARM KNOW AS SCHOOL

 READINESS.
- · SUPPORTING CHILDREN'S LITERACY DEVELOPMENT THROUGH THE LITERACY BUDDIES

 PROGRAM BY PAIRING CHILDREN IN CARE WITH COMMUNITY VOLUNTEERS WHO AGREED

 TO RECEIVE THREE LETTER FROM THE CHILD REQUESTING A PARTICULAR BOOK OR A

 BOOK ABOUT A PARTICULAR SUBJECT.

FORM 990, PART VI, LINE 11A - ORGANIZATION'S PROCESS TO REVIEW FORM 990 FORM 990 IS SENT TO FINANCE COMMITTEE MEMBERS FOR REVIEW PRIOR TO FILING.

FORM 990, PART VI, LINE 12C - ENFORCEMENT OF CONFLICTS POLICY

IF A CONFLICT ARISES, BOARD MEMBER SHALL DISCLOSE ORALLY THE NATURE OF THE

CONFLICT AND ABSTAIN FROM DISCUSSION AND VOTING ON THE MATTER AND COMPLETE

A CONFLICT OF INTEREST FORM.

FORM 990, PART VI, LINE 15A - COMPENSATION PROCESS FOR TOP OFFICIAL
CEO POSITION IS BASED ON COMPARABLE CEO/EXECUTIVE DIRECTOR POSITION OF
OTHER EARLY LEARNING COALITIONS AND NOT-FOR-PROFIT ORGANIZATIONS IN THE
SERVICE AREA WITH SIMILAR DUTIES AND SIMILAR SIZE AND BUDGETS. ASSIGNED HR
STAFF WILL CONTACT THE ORGANIZATIONS FOR COMPARABILITY DATA AND/OR USE THE
INTERNET TO QUERY FOR INFORMATION. IN ADDITION, HR STAFF WILL GO TO
GUIDESTAR.COM TO REVIEW FORM 990 SUBMITTED BY OTHER EARLY LEARNING
COALITIONS AND NOT-FOR-PROFIT ORGANIZATIONS TO REVIEW COMPARABLE POSITION

Page 2

Name of the organization

THE EARLY LEARNING COALITION OF

Employer identification number 65 - 1144775

COMPENSATION. HR STAFF MAY PROCEED WITH A COMPENSATION SURVEY OR STUDY AND/OR REQUEST FOR AN INDEPENDENT CONSULTANT FOR ASSISTANCE. HR STAFF RECOMMENDS COMPENSATION TO THE EXECUTIVE COMMITTEE.

FORM 990, PART VI, LINE 15B - COMPENSATION PROCESS FOR OFFICERS

DIRECTOR/MANAGER POSITIONS ARE BASED ON COMPARABLE POSITIONS OF OTHER EARLY

LEARNING COALITIONS AND NOT-FOR-PROFIT ORGANIZATIONS IN THE SERVICE AREA

WITH SIMILAR DUTIES. ASSIGNED HR STAFF WILL CONTACT THE ORGANIZATIONS FOR

COMPARABILITY DATA AND/OR USE THE INTERNET TO QUERY FOR INFORMATION. IN

ADDITION, HR STAFF WILL FO TO GUIDESTAR.COM TO REVIEW FORM 990 SUBMITTED BY

THE EARLY LEARNING COALITIONS TO REVIEW COMPARABLE POSITION COMPENSATION.

HR STAFF RECOMMENDS COMPENSATION TO THE CEO.

FORM 990, PART VI, LINE 19 - GOVERNING DOCUMENTS DISCLOSURE EXPLANATION
THE ORGANIZATION'S GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND
FINANCIAL STATMENTS ARE ON THE ORGANIZATION'S WEBSITE. THESE DOCUMENTS ARE
ALSO AVAILABLE UPON REQUEST.

12249 THE EARLY LEARNING COALITION OF 65-1144775 FYE: 6/30/2010	Federal Statements	tements		12/1/2010 5:12 PM
Form (90, Part IX, Line 24f	Form 990, Part IX, Line 24f - All Other Expenses		ra .
Description	Total Expenses	Program Service	Management & General	Fund Raising
UTILITIES & TELEPHONE \$ TOTAL \$	1 1	\$ 1,081	\$ 36	\$ \$
Ρ				
Page 72				

EARLY LEARNING COALITION OF SOUTHWEST FLORIDA, INC. BOARD MEMBERS 2009-2010

Name Board Memberler	Board Memberlemployee	Employer	Employer Address	Cety	d ₂	Voting Member	Compensation	Loans/advances
Canteld Kathym	Board Member	Egies Next Christian Academy				No.		8
Dawnon Donce	Board Member	American Momentum Bank	301 5th Ave S	Naples	34118	Yes	•	O _N
Donner Rick	Board Member	Donner and Co	6309 Corporate Ct #115	Fort Myers	33919	Yes	•	Q.
England Dan	Board Member	Lee Mental Health Center	2718 SE 18th Court	Cape Coral	33904	Yes	•	S _S
Euch Jan	Board Member	Consultant				Yes	•	9
Freedmen Howard	Board Member	Retired	8769 Hideaway Harbor Court	Napies	34120	Yes	•	Q V
Gallagher Colleen	Board Member	Community Coordinated Cars for Children (4C)	3500 W Colonial Dr	Orlando	32808	No	•	Q.
Gercie Elzebeth 8	Board Member	Discovery Day Academy	431 East Avenida Del Rio	Clewiston	33440	92	•	o Z
Gaspern Cindi	Board Member	Hyati Regency				Yes	•	N _O
Hanner judith	Board Member	Lee County Health Dept	3920 Michigan Ave	Fort Myers	33916	Yes		2
Lafountam Jeanne	Board Member	Lee Co Schools	3650 Michigan Ave Suite 4	Fort Myers	33916	ON	•	o Z
Manister Berbera	Board Member	Redlands Christian Migram Association (RCMA)	402 W Main Street	Immokalee	34142	92	•	9
Parrish Alice	Board Member	DCF	P O 80x 60085	Fort Myers	33906	Yes	•	o Z
Patemo Joe	Board Member	SWFL Workforce Development Board	9530 Marketplace Rd Unit 104	Fort Myers	33912	Yes	•	2
Poppe Gerry	Board Member	Waterman Broadcasting	3719 Central Avenue	Fort Myers	33901	Yes	•	9
Puddetbot, Tana	Board Member	Early Steps-Heatth Planning Council				9	•	2
Remington John	Board Member	AVA Builder	1175 1st Avenue	Naples	34102	Yes		9
Seri Pater	Board Member	Synergy Networks				Yes	•	9
Schaeffer Elama 9	Board Member	ECC	8099 College Pkwy	Fort Myers	33919	Yes		o <u>v</u>