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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 private foundations)

Do not enter social security numbers on this form as it may be made public

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

OMB No 1545-0047

2014

Open to Public Inspection

A For the 2014 calendar year, or tax year beginning 07-01-2014 , and ending 06-30-2015

B Check if applicable ☐ Address change ☐ Name change ☐ Initial return ☐ Final return/terminated ☐ Amended return ☐ Application pending	C Name of organization NORTH CAROLINA PARTNERSHIP FOR CHILDREN INC		D Employer identification number 56-1850485
	Doing business as		
	Number and street (or P O box if mail is not delivered to street address)	Room/suite	E Telephone number (919) 821-7999
	1100 WAKE FOREST ROAD		
	City or town, state or province, country, and ZIP or foreign postal code RALEIGH, NC 27604		G Gross receipts \$ 102,641,352
F Name and address of principal officer ELLEN PRESTON 1100 WAKE FOREST ROAD RALEIGH, NC 27604			
I Tax-exempt status ☒ 501(c)(3) ☐ 501(c) () ☐ (insert no) ☐ 4947(a)(1) or ☐ 527		H(a) Is this a group return for subordinates? ☐ Yes ☒ No	
J Website: ☐ WWW.NCSMARTSTART.ORG		H(b) Are all subordinates included? ☐ Yes ☐ No If "No," attach a list (see instructions)	
		H(c) Group exemption number ☐	

K Form of organization ☒ Corporation ☐ Trust ☐ Association ☐ Other ☐	L Year of formation 1993	M State of legal domicile NC
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Part I

Summary

Activities & Governance	1	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, AS WELL AS ASSISTANCE FROM PRIVATE GRANTORS		
	2	Check this box ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets		
	3	Number of voting members of the governing body (Part VI, line 1a)		
	4	Number of independent voting members of the governing body (Part VI, line 1b)		
	5	Total number of individuals employed in calendar year 2014 (Part V, line 2a)		
	6	Total number of volunteers (estimate if necessary)		
	7a	Total unrelated business revenue from Part VIII, column (C), line 12		
	7b	Net unrelated business taxable income from Form 990-T, line 34		
Revenue	8	Contributions and grants (Part VIII, line 1h)		
	9	Program service revenue (Part VIII, line 2g)		
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		
	12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)		
Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1–3)		
	14	Benefits paid to or for members (Part IX, column (A), line 4)		
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)		
	16a	Professional fundraising fees (Part IX, column (A), line 11e)		
	b	Total fundraising expenses (Part IX, column (D), line 25) ☐ 50		
	17	Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)		
	18	Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)		
	19	Revenue less expenses Subtract line 18 from line 12		
Net Assets or Fund Balances		Beginning of Current Year	End of Year	
	20	Total assets (Part X, line 16)	3,822,170	3,590,784
	21	Total liabilities (Part X, line 26)	2,092,709	2,121,715
	22	Net assets or fund balances Subtract line 21 from line 20	1,729,461	1,469,069

Part II

Signature Block

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

Sign Here	***** Signature of officer	2016-05-13 Date			
	ELLEN PRESTON FINANCE DIRECTOR Type or print name and title				
Paid Preparer Use Only	Print/Type preparer's name ROBIN MCDUFFIE	Preparer's signature ROBIN MCDUFFIE	Date	Check ☐ if self-employed	PTIN P00098611
	Firm's name ☐ BLACKMAN & SLOOP CPAS PA			Firm's EIN ☐ 56-1304727	
	Firm's address ☐ 1414 RALEIGH RD SUITE 300 CHAPEL HILL, NC 27517			Phone no (919) 942-8700	

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

For Paperwork Reduction Act Notice, see the separate instructions.

Cat No 11282Y

Form 990 (2014)

Part IIISTatement of Program Service Accomplishments

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

☐

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1Briefly describe the organization's mission

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, AS WELL AS ASSISTANCE FROM PRIVATE GRANTORS

2Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?

☐ Yes ☒ No

If "Yes," describe these new services on Schedule O

3Did the organization cease conducting, or make significant changes in how it conducts, any program services?

☐ Yes ☒ No

If "Yes," describe these changes on Schedule O

4Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses Section 501(c)(3) and 501(c)(4) organizations 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 \$ 96,967,109 including grants of \$ 94,271,005) (Revenue \$)
SMART START NORTH CAROLINA'S NATIONALLY-RECOGNIZED EARLY CHILDHOOD INITIATIVE, SMART START, MEASURABLY INCREASES THE HEALTH AND WELL-BEING OF YOUNG CHILDREN, BUILDING THE FOUNDATION FOR ALL FUTURE LEARNING BY - IMPROVING CHILDREN'S EARLY CARE AND EDUCATION PROGRAMS SO THAT THEY ARE SAFE, HEALTHY AND PROVIDE OPPORTUNITIES FOR CHILDREN TO LEARN SKILLS THEY NEED FOR SUCCESS IN SCHOOL - ENSURING THAT CHILDREN ARE SCREENED FOR DEVELOPMENTAL DELAYS - PROVIDING PARENTS WITH TOOLS THAT SUPPORT THEM IN RAISING HAPPY, HEALTHY SUCCESSFUL CHILDREN FOR A STRONG FOUNDATION, CHILDREN NEED HIGH QUALITY EARLY CARE AND EDUCATION PROGRAMS THAT ARE SAFE AND PROVIDE OPPORTUNITIES FOR LEARNING AND STRONG FAMILIES AND ENVIRONMENTS THAT SUPPORT HEALTHY OUTCOMES HIGH QUALITY EARLY EDUCATION YIELDS HIGHER GRADUATION RATES, REDUCED CRIME, HIGHER EARNINGS, LESS RELIANCE ON SOCIAL SERVICES, AND BETTER JOBS SMART START IS A PUBLIC/PRIVATE PARTNERSHIP LED BY THE NORTH CAROLINA PARTNERSHIP FOR CHILDREN, INC (NCPC) THAT CREATES INNOVATIVE SOLUTIONS TO MEASURABLY INCREASE LEARNING AND THE HEALTHY DEVELOPMENT OF CHILDREN BIRTH TO FIVE SEVENTY-SIX COMMUNITY-BASED, LOCAL PARTNERSHIPS SERVE ALL 100 NORTH CAROLINA COUNTIES NCPC ESTABLISHES MEASURABLE STATEWIDE GOALS AND COMMUNITIES DETERMINE THE BEST APPROACH TO ACHIEVING THEM NCPC ALSO ENSURES THAT SMART START LOCAL PARTNERSHIPS FULLY MEET ALL LEGISLATIVELY MANDATED REQUIREMENTS AND OPERATE TO THE HIGHEST STANDARDS OF EFFECTIVENESS, ACCOUNTABILITY, EFFICIENCY AND INTEGRITY SINCE 2000, THERE HAVE BEEN MORE THAN 500 AUDITS, BY STATE AUDITORS AND /OR INDEPENDENT AUDITORS HIRED BY THE STATE, OR NCPC AND SMART START LOCAL PARTNERSHIPS NCPC HAS HAD NO AUDIT FINDINGS FOR THE PAST DECADE MOST RECENTLY (2014 AND 2015) DUKE UNIVERSITY RESEARCHERS FOUND - CHILDREN HAD HIGHER THIRD GRADE READING AND MATH SCORES AND LOWER SPECIAL EDUCATION PLACEMENTS IN COUNTIES THAT RECEIVED MORE FUNDING FOR SMART START WHEN THOSE CHILDREN WERE YOUNGER ADDITIONAL ACCOMPLISHMENTS INCLUDE - IMPROVING QUALITY AND ACHIEVING HIGHER STARS ON NC'S RATED LICENSE THROUGH ONSITE TECHNICAL ASSISTANCE, TRAINING AND SUPPORT FOR CHILD CARE PROFESSIONALS TO OBTAIN HIGHER EDUCATION TODAY 75% OF CHILDREN IN CHILD CARE ATTEND HIGH QUALITY PROGRAMS AS COMPARED TO 33% IN 2001 - IMPROVING EARLY LITERACY BY COLLABORATING WITH STATE LITERACY ORGANIZATIONS, LOCAL PARTNERSHIPS, PRIVATE CHILD CARE PROGRAMS, AND PEDIATRICIANS TO PROMOTE EARLY LITERACY ACROSS THE STATE THROUGH PROGRAMS LIKE RAISING A READER AND REACH OUT AND READ FAMILIES PARTICIPATING IN REACH OUT AND READ WERE 61% MORE LIKELY TO BE READING TO THEIR CHILD EVERY DAY THAN THE COMPARISON GROUP - HELPING PRIVATE CHILD CARE PROGRAMS IMPROVE THE QUALITY OF THEIR CLASSROOMS SO THEY MAY PARTICIPATE IN NC PRE-K AND PARTNER WITH NC PRE-K PROVIDERS TO HELP ELIGIBLE FOUR-YEAR-OLDS ACCESS THE PROGRAM IN FISCAL YEAR 2014-2015 SMART START LOCAL PARTNERSHIPS ADMINISTERED NC PRE-K IN 56 COUNTIES	

4b	(Code) (Expenses \$ 3,159,903 including grants of \$ 1,275,027) (Revenue \$)
THE NORTH CAROLINA PARTNERSHIP FOR CHILDREN (NCPC) CONTINUES TO BUILD UPON THE CAPACITY AND SUCCESSES OF THE PAST SEVERAL YEARS TO FURTHER THE GOALS OF NORTH CAROLINA'S RACE TO THE TOP EARLY LEARNING CHALLENGE (RTT-ELC) REFORM AGENDA LEADERS COLLABORATIVETHE LEADERS COLLABORATIVE IS A PERFORMANCE-DRIVEN LEADERSHIP TRAINING AND DEVELOPMENT APPROACH IN WHICH LEADERS FOCUS ON BUILDING THEIR OWN, AND THE EARLY CHILDHOOD SYSTEM'S CAPACITY TO ACHIEVE THE OVERALL RTT-ELC GOAL TO ASSURE EVERY CHILD ARRIVES AT KINDERGARTEN READY TO SUCCEED FORTY-FOUR LOCAL SMART START LEADERS HAVE COMPLETED THE EIGHT MONTH TRAINING SERIES AND INITIATED COMMUNITY PLANNING PROCESSES TO ADDRESS IDENTIFIED EARLY CHILDHOOD NEEDS TRANSFORMATION ZONENCPC, WORKING WITH OTHER PARTICIPATING STATE AND LOCAL AGENCIES, PROVIDES LEADERSHIP AT THE STATE AND LOCAL LEVEL TO CREATE AND IMPLEMENT A TRANSFORMATION ZONE IN SELECTED TIER 1 COUNTIES IN THE NORTHEASTERN REGION OF THE STATE NCPC PROVIDES COACHES FOR COUNTY PLANNING PROCESSES, BUILDS CAPACITY OF TRANSFORMATION ZONE COUNTIES TO IMPROVE EARLY LITERACY SKILLS OF YOUNG CHILDREN, AND FUNDS CHILD CARE HEALTH CONSULTATION TO IMPROVE THE HEALTH AND SAFETY OF CHILD CARE CENTERS CHILD CARE HEALTH CONSULTATION (CCHC)NCPC, IN PARTNERSHIP WITH OTHER PARTICIPATING AGENCIES, IS STRENGTHENING STATEWIDE CAPACITY AND EFFECTIVENESS FOR CHILD CARE HEALTH CONSULTATION CCHC SUPPORTS EARLY CARE AND EDUCATION PROVIDERS TO ENSURE THAT CHILDREN IN CARE ARE IN SAFE AND HEALTHY ENVIRONMENTS THE WORK OF NCPC HAS SUPPORTED THE DEVELOPMENT OF A PERFORMANCE MODEL FOR ALL CCHC SERVICES AND AN ELECTRONIC APPLICATION THAT CAN COLLECT DATA IN REAL-TIME FOR MORE EFFICIENT AND EFFECTIVE ASSESSMENT OF ENVIRONMENTS ASSURING BETTER CHILD HEALTH AND DEVELOPMENT (ABCD)THE ASSURING BETTER CHILD HEALTH AND DEVELOPMENT PROJECT PROMOTES THE USE OF VALIDATED DEVELOPMENTAL SCREENING TOOLS USED DURING CHILDREN'S WELL-CHILD VISITS WITH THEIR MEDICAL HOME PROVIDERS THE ABCD PROJECT HAS SERVED TO STRENGTHEN COORDINATION OF REFERRAL AND SERVICE DELIVERY BETWEEN MEDICAL PROFESSIONALS, EARLY INTERVENTION PROVIDERS, AND FAMILIES SINCE THE START OF THE PROJECT IN 2013, ABCD COORDINATORS WORKED IN ALL OF NORTH CAROLINA'S 14 COMMUNITY CARE REGIONS, SERVING 246 PRACTICES AND 738 PROVIDERS BASED ON BEST ESTIMATES PROVIDED BY THE MEDICAL PRACTICES, THEY SERVE ROUGHLY 85,000 CHILDREN BIRTH-5 ENROLLED IN MEDICAID CHART REVIEWS REVEALED THAT THE PRACTICES THAT WORKED WITH ABCD COORDINATORS THE LONGEST SCREENED 95 5% OF ALL CHILDREN BIRTH-5 WHO WERE DUE FOR SCREENING, 10% MORE THAN BASELINE DATA ADVISORY GROUPO NCPC IS LEADING THE ASSESSMENT AND ENHANCEMENT OF DATA COLLECTION AND DATA MANAGEMENT CAPABILITIES OF SMART START LOCAL PARTNERSHIPS TO DATE, NCPC HAS ESTABLISHED A GROUP OF COMMON OUTCOMES FOR CORE SMART START SERVICES, A SET OF CONSISTENT MEASURES, AND A DATA REPORTING SYSTEM FOR STATEWIDE USE PLANNING IS UNDERWAY TO LINK SPECIFIED SMART START DATA WITH THE NC EARLY CHILDHOOD INFORMATION DATA SYSTEM	

4c	(Code) (Expenses \$ 1,056,997 including grants of \$ 721,840) (Revenue \$)
THE PRIVATELY-FUNDED SHAPE NC INITIATIVE HAS LAID THE FOUNDATION FOR A COMPREHENSIVE AND COORDINATED EARLY CHILDHOOD OBESITY PREVENTION AND HEALTH PROMOTION NETWORK IN NORTH CAROLINA AN IMPLEMENTATION TEAM OF EXPERTS HAVE COMBINED THREE DISTINCT PROGRAMS THAT FOCUS ON IMPROVING NUTRITION, PHYSICAL ACTIVITY, AND OUTDOOR LEARNING ENVIRONMENTS IN CHILD CARE TO CREATE AN INTEGRATED AND COMPREHENSIVE MODEL THE PROJECT IS IN ITS SECOND PHASE OF FUNDING AND IS FOCUSED ON SPREADING THE WORK STATEWIDE ACTIVITIES ARE IMPLEMENTED BY SMART START LOCAL PARTNERSHIPS AND INCLUDE LOCAL ACTION PLANNING FOR HEALTHY WEIGHT PROMOTION EACH SHAPE NC PARTNERSHIP HAS DESIGNATED MODEL EARLY LEARNING CENTER, A CHILD CARE CENTER THAT, WITH THE SUPPORT OF SHAPE NC TECHNICAL ASSISTANCE AND TRAINING, HAS COMMITTED TO BECOMING A DEMONSTRATION SITE BY ADHERING TO A HIGH LEVEL OF BEST PRACTICE STANDARDS IN NUTRITION, PHYSICAL ACTIVITY AND OUTDOOR LEARNING ENVIRONMENTS TO DATE, SEVEN OUT OF 18 MODEL EARLY LEARNING CENTERS HAVE ACHIEVED DEMONSTRATION SITE STATUS AND NEARLY 150 CHILD CARE CENTERS ARE PARTICIPATING ACROSS THE STATE USING BODY MASS INDEX (BMI), CHILDREN THAT ATTENDED SHAPE NC CENTERS FOR MORE THAN SIX MONTHS ARE MUCH LESS LIKELY TO BE OBESE (9 6%) THAN CHILDREN ATTENDING FOR LESS THAN SIX MONTHS (15 6%)	
See Additional Data	

4d	Other program services (Describe in Schedule O)
	(Expenses \$ 317,320 including grants of \$ 2,013) (Revenue \$ 215,530)

4e	Total program service expenses	101,501,329
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Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A 	1 Yes	
2 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 	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, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II 	4 Yes	
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III 	5	No
6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? 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? If "Yes," complete Schedule D, Part II 	7	No
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 	8	No
9 Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV 	9	No
10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V 	10 Yes	
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI 	11a Yes	
b Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 	11b	No
c Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII 	11c	No
d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX 	11d	No
e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 	11e Yes	
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X 	11f	No
12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII 	12a Yes	
b Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional 	12b	No
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
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b	No
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	No
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	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 (see instructions)	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
20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a	No
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	

Part IV

Checklist of Required Schedules (continued)

21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>	21	Yes	
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>	22		No
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	23		No
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>	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	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>	25b		No
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? <i>If "Yes," complete Schedule L, Part II</i>	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>	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)			
a	A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28b		No
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	32		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 "Yes," complete Schedule R, Part I</i>	33		No
34	Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>	34		No
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	38	Yes	

Part V

Statements Regarding Other IRS Filings and Tax Compliance

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

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable.		
1b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable.		
1c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	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.		
2b	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 (see instructions).	Yes	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?		No
3b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O.		
4a	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)?		No
b	If "Yes," enter the name of the foreign country: See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		No
5b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		No
5c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?		
6a	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 as charitable contributions?		No
6b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
7	Organizations that may receive deductible contributions under section 170(c).		
a	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?		No
7b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		
7c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		No
7d	If "Yes," indicate the number of Forms 8282 filed during the year.		
7e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		No
7f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		No
7g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		
7h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?		
9a	Did the sponsoring organization make any taxable distributions under section 4966?		
9b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		
10	Section 501(c)(7) organizations. Enter:		
10a	Initiation fees and capital contributions included on Part VIII, line 12.		
10b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities.		
11	Section 501(c)(12) organizations. Enter:		
11a	Gross income from members or shareholders.		
11b	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?		
12b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year.		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		
13a	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O.		
13b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans.		
13c	Enter the amount of reserves on hand.		
14a	Did the organization receive any payments for indoor tanning services during the tax year?		No
14b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.		

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.

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

Section A. Governing Body and Management

		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year		
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O		
b	Enter the number of voting members included in line 1a, above, who are independent		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	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	No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4	Yes
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5	No
6	Did the organization have members or stockholders?	6	No
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a	No
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b	No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following		
a	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	No

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

		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a	No
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	No
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990		
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	Yes
13	Did the organization have a written whistleblower policy?	13	Yes
14	Did 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?		
a	The organization's CEO, Executive Director, or top management official	15a	Yes
b	Other officers or key employees of the organization	15b	Yes
	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	No
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b	

Section C. Disclosure

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

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 made these available. Check all that apply.
☐ Own website ☒ Another's website ☒ Upon request ☐ Other (explain in Schedule O)

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

20 State the name, address, and telephone number of the person who possesses the organization's books and records
ELLEN PRESTON

1100 WAKE FOREST ROAD
RALEIGH, NC 27604 (919) 821-7999

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

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

Form **990** (2014)

Part VII

[illegible]

1b	Sub-Total	▼			
c	Total from continuation sheets to Part VII, Section A	▼			
d	Total (add lines 1b and 1c)	▼	381,679	0	69,173

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ►1

		Yes	No
3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>	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? <i>If "Yes," complete Schedule J for such individual</i>	4	No
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>	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. Report compensation for the calendar year ending with or within the organization's tax year.

(A)	(B)	(C)
Name and business address	Description of services	Compensation
UNC CHAPEL HILL SOUTH BUILDING CB 9100 CHAPEL HILL, NC 27599	CONSULTING, PROJECT SUPPORT, & EVALUATIO	360,285
NC EARLY CHILDHOOD FOUNDATION 907 GLENWOOD AVE RALEIGH, NC 27605	CONSULTING, PROJECT SUPPORT, & EVALUATIO	233,181
COHNREZNICK LLP 7501 WISCONSIN AVE STE 400E BETHESDA, MD 20814	AUDIT SERVICES	161,500

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ▶3

Part VIII

Statement of Revenue

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

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514	
Contributions, Gifts, Grants and Other Similar Amounts	1a	Federated campaigns	1a	5,013			
	b	Membership dues	1b				
	c	Fundraising events	1c				
	d	Related organizations	1d				
	e	Government grants (contributions)	1e	101,278,960			
	f	All other contributions, gifts, grants, and similar amounts not included above	1f	1,134,924			
	g	Noncash contributions included in lines 1a-1f \$					
	h	Total. Add lines 1a-1f		102,418,897			
Program Service Revenue	2a	CONFERENCE REGISTRATIONS	Business Code 900099	215,530	215,530		
	b						
	c						
	d						
	e						
	f	All other program service revenue					
	g	Total. Add lines 2a-2f		215,530			
	Other Revenue	3	Investment income (including dividends, interest, and other similar amounts)		544		544
4		Income from investment of tax-exempt bond proceeds					
5		Royalties					
6a		Gross rents	(i) Real	(ii) Personal			
		b	Less rental expenses				
		c	Rental income or (loss)				
		d	Net rental income or (loss)				
7a		Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other			
		b	Less cost or other basis and sales expenses				
		c	Gain or (loss)				
		d	Net gain or (loss)				
8a		Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c) See Part IV, line 18	a				
		b	Less direct expenses	b			
		c	Net income or (loss) from fundraising events				
9a		Gross income from gaming activities See Part IV, line 19	a				
		b	Less direct expenses	b			
		c	Net income or (loss) from gaming activities				
10a		Gross sales of inventory, less returns and allowances	a				
		b	Less cost of goods sold	b			
		c	Net income or (loss) from sales of inventory				
Miscellaneous Revenue		Business Code					
11a	REBATE	900099	6,360			6,360	
b	MISCELLANEOUS	900099	21			21	
c							
d	All other revenue						
e	Total. Add lines 11a-11d		6,381				
12	Total revenue. See Instructions		102,641,352	215,530	0	6,925	

Part IX

Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns All other organizations must complete column (A)

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.		(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21	96,269,885	96,269,885		
2	Grants and other assistance to domestic individuals See Part IV, line 22				
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	462,324	241,496	220,828	
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	2,553,630	2,057,774	495,856	
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	170,367	137,810	32,557	
9	Other employee benefits	320,529	239,557	80,972	
10	Payroll taxes	234,859	167,637	67,222	
11	Fees for services (non-employees)				
a	Management	410		410	
b	Legal	4,473	590	3,883	
c	Accounting	387,964	379,325	8,639	
d	Lobbying				
e	Professional fundraising services See Part IV, line 17				
f	Investment management fees				
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	1,462,863	1,432,985	29,878	
12	Advertising and promotion	3,880	2,716	1,164	
13	Office expenses	114,968	64,430	50,538	
14	Information technology	93,715	93,715		
15	Royalties				
16	Occupancy	318,338	39,359	278,979	
17	Travel	79,076	72,343	6,733	
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	217,347	195,233	22,114	
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	52,291		52,291	
23	Insurance	12,995	633	12,362	
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)				
a	REPAIRS & MAINTENANCE	95,017	87,459	7,558	
b	DUES & SUBSCRIPTIONS	30,257	12,019	18,188	50
c	FURNITURE & NON-COMPUTE	14,646	6,036	8,610	
d	MISCELLANEOUS	1,910	327	1,583	
e	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	102,901,744	101,501,329	1,400,365	50
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here ☐ if following SOP 98-2 (ASC 958-720)				

Part X

Balance Sheet

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

					(A)		(B)	
					Beginning of year		End of year	
Assets	1	Cash—non-interest-bearing				1,109,170	1	1,700,403
	2	Savings and temporary cash investments				1,567,626	2	631,053
	3	Pledges and grants receivable, net				308,992	3	524,646
	4	Accounts receivable, net				581,131	4	455,634
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L					5	
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L					6	
	7	Notes and loans receivable, net					7	
	8	Inventories for sale or use					8	
	9	Prepaid expenses and deferred charges				122,351	9	132,028
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a	572,247	132,900	10c	147,020	
	b	Less accumulated depreciation	10b	425,227				
	11	Investments—publicly traded securities					11	
	12	Investments—other securities See Part IV, line 11					12	
	13	Investments—program-related See Part IV, line 11					13	
	14	Intangible assets					14	
	15	Other assets See Part IV, line 11					15	
	16	Total assets. Add lines 1 through 15 (must equal line 34)				3,822,170	16	3,590,784
Liabilities	17	Accounts payable and accrued expenses				288,986	17	602,425
	18	Grants payable					18	
	19	Deferred revenue				862,396	19	823,341
	20	Tax-exempt bond liabilities					20	
	21	Escrow or custodial account liability Complete Part IV of Schedule D					21	
	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L					22	
	23	Secured mortgages and notes payable to unrelated third parties					23	
	24	Unsecured notes and loans payable to unrelated third parties					24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D				941,327	25	695,949
	26	Total liabilities. Add lines 17 through 25				2,092,709	26	2,121,715
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here ☒ and complete lines 27 through 29, and lines 33 and 34.							
	27	Unrestricted net assets				1,688,269	27	1,432,555
	28	Temporarily restricted net assets				17,905	28	12,514
	29	Permanently restricted net assets				23,287	29	24,000
	Organizations that do not follow SFAS 117 (ASC 958), check here ☐ and complete lines 30 through 34.							
	30	Capital stock or trust principal, or current funds					30	
	31	Paid-in or capital surplus, or land, building or equipment fund					31	
	32	Retained earnings, endowment, accumulated income, or other funds					32	
	33	Total net assets or fund balances				1,729,461	33	1,469,069
	34	Total liabilities and net assets/fund balances				3,822,170	34	3,590,784

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	102,641,352
2	Total expenses (must equal Part IX, column (A), line 25)	2	102,901,744
3	Revenue less expenses Subtract line 2 from line 1	3	-260,392
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	1,729,461
5	Net unrealized gains (losses) on investments	5	
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	0
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	1,469,069

Part XII Financial Statements and Reporting

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

		Yes	No
1	Accounting method used to prepare the Form 990 ☐ Cash ☒ Accrual ☐ Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both ☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis		No
2b	Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both ☒ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis	Yes	
2c	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	Yes	
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		No
3b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		

Additional Data

Software ID:
Software Version:
EIN: 56-1850485
Name: NORTH CAROLINA PARTNERSHIP FOR CHILDREN INC

Form 990, Part III - Line 4c: Program Service Accomplishments (See the Instructions)

(Code	) (Expenses \$	317,320	including grants of \$	2,013) (Revenue \$	215,530)
OTHER PROGRAMS INCLUDE AN ANNUAL CONFERENCE FOR THOSE DEDICATED TO IMPROVING EARLY EDUCATION SYSTEMS AND PROMOTING CHILDREN'S HEALTHY GROWTH AND DEVELOPMENT INCLUDING EDUCATION EXPERTS, GOVERNMENT AND BUSINESS LEADERS, AND NOT-FOR-PROFITS, AS WELL AS A PUBLIC AWARENESS AND ENGAGEMENT CAMPAIGN THE CONFERENCE ANNUALLY HOSTS APPROXIMATELY 1,200 ATTENDEES FROM ACROSS THE COUNTRY AND ENGAGES THE NATION'S LEADING EXPERTS IN EARLY CHILDHOOD AS SPEAKERS AND FEATURED PANELIST					

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
(1) DR REBECCA AYERS DIRECTOR	2 00	X						0	0	0
(1) MS LORIE C BARNES DIRECTOR	2 00	X						0	0	0
(2) MS SHERRY BRADSHER DIRECTOR	2 00	X						0	0	0
(3) MS CHERYL CAVANAUGH DIRECTOR	2 00	X						0	0	0
(4) MS LISA MABE EADS DIRECTOR	2 00	X						0	0	0
(5) MR ROBERT L EAGLE DIRECTOR	2 00	X						0	0	0
(6) MS MARTHA JANE EBLEN DIRECTOR	2 00	X						0	0	0
(7) MR JOHN ZACHARY EVERHART DIRECTOR	2 00	X						0	0	0
(8) MS JOAN GRAHAM DIRECTOR	2 00	X						0	0	0
(9) MS MARIE DUNN INSCORE DIRECTOR	2 00	X						0	0	0
(10) MR ROB KINDSVATTER DIRECTOR	2 00	X						0	0	0
(11) REV STANLEY A LEWIS DIRECTOR	2 00	X						0	0	0
(12) MS ANNA J MERCER-MCLEAN DIRECTOR	2 00	X						0	0	0
(13) DR PETER J MORRIS DIRECTOR	2 00	X						0	0	0
(14) MS TANNIS NELSON DIRECTOR	2 00	X						0	0	0
(15) MR PAUL POPISH DIRECTOR	2 00	X						0	0	0
(16) MR JOHN PRUETTE DIRECTOR	2 00	X						0	0	0
(17) MR DOUGLAS S PUNGER DIRECTOR	2 00	X						0	0	0
(18) MS SUE RUSSELL DIRECTOR	2 00	X						0	0	0
(19) DR ROSEMARY FERNANDES STEIN DIRECTOR	2 00	X						0	0	0
(20) MS DOROTHEA J WYANT DIRECTOR	2 00	X						0	0	0
(21) DR NANCY H BROWN CHAIR	2 00	X		X				0	0	0
(22) HON PEARL BURRIS-FLOYD VICE CHAIR	2 00	X		X				0	0	0
(23) MR JIM MORRISON SECRETARY	2 00	X		X				0	0	0
(24) MR CHARLES MORRIS TREASURER	2 00	X		X				0	0	0

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
(26) MS CINDY WATKINS PRESIDENT	40 00			X				85,862	0	12,532
(1) MS DONNA WHITE VICE PRESIDENT	40 00			X				94,278	0	18,749
(2) MS LESLIE KARLSSON ASSISTANT SECRETARY (LEFT 1/2015)	40 00			X				110,000	0	20,722
(3) MS ELLEN PRESTON ASSISTANT TREASURER (FROM 9/2014)	40 00			X				91,539	0	17,170

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

OMB No 1545-0047

2014

Open to Public Inspection

Name of the organization NORTH CAROLINA PARTNERSHIP FOR CHILDREN INC	Employer identification number 56-1850485
---	--

Part I

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

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

- 1

☐

A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**
- 2

☐

A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E)
- 3

☐

A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**
- 4

☐

A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state _____
- 5

☐

An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II)
- 6

☐

A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**
- 7

☒

An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II)
- 8

☐

A community trust described in **section 170(b)(1)(A)(vi)** (Complete Part II)
- 9

☐

An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See **section 509(a)(2).** (Complete Part III)
- 10

☐

An organization organized and operated exclusively to test for public safety See **section 509(a)(4).**
- 11

☐

An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See **section 509(a)(3).** Check the box in lines 11a through 11d that describes the type of supporting organization and complete lines 11e, 11f, and 11g
- a

☐

Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization **You must complete Part IV, Sections A and B.**
- b

☐

Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s) **You must complete Part IV, Sections A and C.**
- c

☐

Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions) **You must complete Part IV, Sections A, D, and E.**
- d

☐

Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions) **You must complete Part IV, Sections A and D, and Part V.**
- e

☐

Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization
- f

Enter the number of supported organizations _____
- g

Provide the following information about the supported organization(s)

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

Part II

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)
(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support						
Calendar year (or fiscal year beginning in) ▶	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")	121,408,130	98,077,186	98,877,413	98,905,183	102,418,897	519,686,809
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	121,408,130	98,077,186	98,877,413	98,905,183	102,418,897	519,686,809
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						519,686,809

Section B. Total Support						
Calendar year (or fiscal year beginning in) ▶	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
7 Amounts from line 4	121,408,130	98,077,186	98,877,413	98,905,183	102,418,897	519,686,809
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	43,372	14,717	10,026	2,288	544	70,947
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)	82,847	550	550	11,226	6,381	101,554
11 Total support Add lines 7 through 10						519,859,310
12 Gross receipts from related activities, etc (see instructions)					12	1,039,610

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

Section C. Computation of Public Support Percentage		
14 Public support percentage for 2014 (line 6, column (f) divided by line 11, column (f))	14	99 970 %
15 Public support percentage for 2013 Schedule A, Part II, line 14	15	99 940 %
16a 33 1/3% support test—2014. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization	☒	
b 33 1/3% support test—2013. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization	☐	
17a 10%-facts-and-circumstances test—2014. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization	☐	
b 10%-facts-and-circumstances test—2013. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization	☐	
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions	☐	

Part IIISupport Schedule for Organizations Described in Section 509(a)(2)
(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support						
Calendar year (or fiscal year beginning in) ▶	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support (Subtract line 7c from line 6.)						

Section B. Total Support						
Calendar year (or fiscal year beginning in) ▶	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						
14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here ▶						

Section C. Computation of Public Support Percentage		
15 Public support percentage for 2014 (line 8, column (f) divided by line 13, column (f))	15	
16 Public support percentage from 2013 Schedule A, Part III, line 15	16	

Section D. Computation of Investment Income Percentage		
17 Investment income percentage for 2014 (line 10c, column (f) divided by line 13, column (f))	17	
18 Investment income percentage from 2013 Schedule A, Part III, line 17	18	
19a 33 1/3% support tests—2014. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization ▶		
b 33 1/3% support tests—2013. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization ▶		
20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ▶		

Part IV Supporting Organizations

(Complete only if you checked a box on line 11 of Part I. If you checked 11a of Part I, complete Sections A and B. If you checked 11b of Part I, complete Sections A and C. If you checked 11c of Part I, complete Sections A, D, and E. If you checked 11d of Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

	Yes	No
1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.	1	
2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).	2	
3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.	3a	
b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.	3b	
c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.	3c	
4a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked 11a or 11b in Part I, answer (b) and (c) below.	4a	
b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.	4b	
c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.	4c	
5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document).	5a	
b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b	
c Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c	
6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (a) its supported organizations, (b) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (c) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI .	6	
7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).	7	
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part II of Schedule L (Form 990).	8	
9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI .	9a	
b Did one or more disqualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI .	9b	
c Did a disqualified person (as defined in line 9(a)) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI .	9c	
10a Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer b below.	10a	
b Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings).	10b	
11 Has the organization accepted a gift or contribution from any of the following persons?		
a A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?	11a	
b A family member of a person described in (a) above?	11b	
c A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c	

Part IV Supporting Organizations (continued)

Section B. Type I Supporting Organizations

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

Section C. Type II Supporting Organizations

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

Section D. All Type III Supporting Organizations

	Yes	No
1 Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (1) a written notice describing the type and amount of support provided during the prior tax year, (2) a copy of the Form 990 that was most recently filed as of the date of notification, and (3) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?		
2 Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).		
3 By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.		

Section E. Type III Functionally-Integrated Supporting Organizations

1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions)			
a ☐ The organization satisfied the Activities Test. Complete line 2 below.			
b ☐ The organization is the parent of each of its supported organizations. Complete line 3 below.			
c ☐ The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions).			
2 <u>Activities Test</u> Answer (a) and (b) below.			
a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.			
b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.			
3 <u>Parent of Supported Organizations</u> Answer (a) and (b) below.			
a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in Part VI.			
b Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.			

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

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

Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1	
2	Recoveries of prior-year distributions	2	
3	Other gross income (see instructions)	3	
4	Add lines 1 through 3	4	
5	Depreciation and depletion	5	
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6	
7	Other expenses (see instructions)	7	
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8	

Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year)	1	
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	Total (add lines 1a, 1b, and 1c)	1d	
e	Discount claimed for blockage or other factors (explain in detail in Part VI) _____		
2	Acquisition indebtedness applicable to non-exempt use assets	2	
3	Subtract line 2 from line 1d	3	
4	Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6	Multiply line 5 by .035	6	
7	Recoveries of prior-year distributions	7	
8	Minimum Asset Amount (add line 7 to line 6)	8	

Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1	
2	Enter 85% of line 1	2	
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3	
4	Enter greater of line 2 or line 3	4	
5	Income tax imposed in prior year	5	
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6	
7	☐ Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions)		

Section D - Distributions	Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	
4 Amounts paid to acquire exempt-use assets	
5 Qualified set-aside amounts (prior IRS approval required)	
6 Other distributions (describe in Part VI) See instructions	
7 Total annual distributions. Add lines 1 through 6	
8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI) See instructions	
9 Distributable amount for 2014 from Section C, line 6	
10 Line 8 amount divided by Line 9 amount	

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2014	(iii) Distributable Amount for 2014
1 Distributable amount for 2014 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2014 (reasonable cause required--see instructions)			
3 Excess distributions carryover, if any, to 2014			
a From 2009.			
b From 2010.			
c From 2011.			
d From 2012.			
e From 2013.			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2014 distributable amount			
i Carryover from 2009 not applied (see instructions)			
j Remainder Subtract lines 3g, 3h, and 3i from 3f			
4 Distributions for 2014 from Section D, line 7 \$			
a Applied to underdistributions of prior years			
b Applied to 2014 distributable amount			
c Remainder Subtract lines 4a and 4b from 4			
5 Remaining underdistributions for years prior to 2014, if any Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions)			
6 Remaining underdistributions for 2014 Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions)			
7 Excess distributions carryover to 2015. Add lines 3j and 4c			
8 Breakdown of line 7			
a From 2010.			
b From 2011.			
c From 2012.			
d From 2013.			
e From 2014.			

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

Facts And Circumstances Test

Return Reference

Explanation

SCHEDULE C

(Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

▶ **Complete if the organization is described below. ▶ Attach to Form 990 or Form 990-EZ.**

▶ **Information about Schedule C (Form 990 or 990-EZ) and its instructions is at**

www.irs.gov/form990.

OMB No 1545-0047

2014

Open to Public Inspection

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

- 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

If the organization answered "Yes" to Form 990, Part IV, Line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A Do not complete Part II-B
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B Do not complete Part II-A

If the organization answered "Yes" to Form 990, Part IV, Line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then

- Section 501(c)(4), (5), or (6) organizations Complete Part III

Name of the organization NORTH CAROLINA PARTNERSHIP FOR CHILDREN INC	Employer identification number 56-1850485
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Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

1	Provide a description of the organization's direct and indirect political campaign activities in Part IV	
2	Political expenditures	▶ \$
3	Volunteer hours	

Part I-B Complete if the organization is exempt under section 501(c)(3).

1	Enter the amount of any excise tax incurred by the organization under section 4955	▶ \$
2	Enter the amount of any excise tax incurred by organization managers under section 4955	▶ \$
3	If the organization incurred a section 4955 tax, did it file Form 4720 for this year?	☐ Yes ☐ No
4a	Was a correction made?	☐ Yes ☐ No
b	If "Yes," describe in Part IV	

Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).

1	Enter the amount directly expended by the filing organization for section 527 exempt function activities	▶ \$
2	Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities	▶ \$
3	Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b	▶ \$
4	Did the filing organization file Form 1120-POL for this year?	☐ Yes ☐ No
5	Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments For each organization listed, enter the amount paid from the filing organization's funds Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV	

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds If none, enter -0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-

Part II-A

Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).

- A Check ☐ if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures)
- B Check ☐ if the filing organization checked box A and "limited control" provisions apply

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals												
1a Total lobbying expenditures to influence public opinion (grass roots lobbying)															
b Total lobbying expenditures to influence a legislative body (direct lobbying)															
c Total lobbying expenditures (add lines 1a and 1b)															
d Other exempt purpose expenditures															
e Total exempt purpose expenditures (add lines 1c and 1d)															
f Lobbying nontaxable amount Enter the amount from the following table in both columns															
<table><tr><td>If the amount on line 1e, column (a) or (b) is:</td><td>The lobbying nontaxable amount is:</td></tr><tr><td>Not over \$500,000</td><td>20% of the amount on line 1e</td></tr><tr><td>Over \$500,000 but not over \$1,000,000</td><td>\$100,000 plus 15% of the excess over \$500,000</td></tr><tr><td>Over \$1,000,000 but not over \$1,500,000</td><td>\$175,000 plus 10% of the excess over \$1,000,000</td></tr><tr><td>Over \$1,500,000 but not over \$17,000,000</td><td>\$225,000 plus 5% of the excess over \$1,500,000</td></tr><tr><td>Over \$17,000,000</td><td>\$1,000,000</td></tr></table>		If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	Not over \$500,000	20% of the amount on line 1e	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000	Over \$17,000,000	\$1,000,000		
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:														
Not over \$500,000	20% of the amount on line 1e														
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000														
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000														
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000														
Over \$17,000,000	\$1,000,000														
g Grassroots nontaxable amount (enter 25% of line 1f)															
h Subtract line 1g from line 1a If zero or less, enter -0-															
i Subtract line 1f from line 1c If zero or less, enter -0-															
j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?		☐ Yes ☐ No													

4-Year Averaging Period Under section 501(h)
(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the separate instructions for lines 2a through 2f.)

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) Total
2a Lobbying nontaxable amount					
b Lobbying ceiling amount (150% of line 2a, column(e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
f Grassroots lobbying expenditures					

Part II-B

Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

For each "Yes" response to lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.		(a)		(b)
		Yes	No	Amount
1	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			
a	Volunteers?	Yes		
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?	Yes		
c	Media advertisements?		No	
d	Mailings to members, legislators, or the public?	Yes		
e	Publications, or published or broadcast statements?	Yes		10,765
f	Grants to other organizations for lobbying purposes?		No	
g	Direct contact with legislators, their staffs, government officials, or a legislative body?	Yes		4,664
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?	Yes		
i	Other activities?	Yes		13,993
j	Total. Add lines 1c through 1i.			29,422
2a	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 carry over 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) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, line 3, is answered "Yes."

1	Dues, assessments and similar amounts from members	1	
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		
a	Current year	2a	
b	Carryover from last year	2b	
c	Total	2c	
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	
4	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?	4	
5	Taxable amount of lobbying and political expenditures (see instructions)	5	

Part IV

Supplemental Information

Provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated group list), Part II-A, lines 1 and 2 (see instructions), and Part II-B, line 1. Also, complete this part for any additional information.

Return Reference	Explanation
PART II-B, LINE 1	PROVIDED LEGISLATIVE STRATEGY TO OTHER NOT-FOR-PROFIT ORGANIZATIONS FOR NORTH CAROLINA'S EARLY CHILDHOOD INITIATIVE TO PREPARE CHILDREN FROM BIRTH TO FIVE FOR SCHOOL THROUGH FACILITATION OF MEETINGS WITH STATE LEGISLATORS

Part IV

Explanation

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

► Complete if the organization answered "Yes," to Form 990,
Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.
► Attach to Form 990.
Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2014

Open to Public Inspection

Name of the organization NORTH CAROLINA PARTNERSHIP FOR CHILDREN INC	Employer identification number 56-1850485
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Part I

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

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

Part II

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

1

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

☐ Preservation of land for public use (e g , recreation or education) ☐ Preservation of an historically important land area
☐ Protection of natural habitat ☐ Preservation of a certified historic structure
☐ Preservation of open space

2

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

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

3

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

4

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

5

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

☐ Yes ☐ No

6

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

7

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

8

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

☐ Yes ☐ No

9

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

Part III

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

1a

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

b

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

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

► \$ _____

(ii) Assets included in Form 990, Part X

► \$ _____

2

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

a

Revenue included in Form 990, Part VIII, line 1

► \$ _____

b

Assets included in Form 990, Part X

► \$ _____

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

Cat No 52283D

Schedule D (Form 990) 2014

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

- 3

Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply)
- a

☐ Public exhibition

b

☐ Scholarly research

c

☐ Preservation for future generations

d

☐ Loan or exchange programs

e

☐ Other
- 4

Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII
- 5

During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?

☐ Yes

☐ No

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

- 1a

Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?

☐ Yes

☐ No
- b

If "Yes," explain the arrangement in Part XIII and complete the following table
- | | |
|----|--------|
| | Amount |
| 1c | |
| 1d | |
| 1e | |
| 1f | |

c

Beginning balance

d

Additions during the year

e

Distributions during the year

f

Ending balance
- 2a

Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?

☐ Yes

☐ No
- b

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

☐

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

	(a)Current year	(b)Prior year	b (c)Two years back	(d)Three years back	(e)Four years back
1a Beginning of year balance	23,377	23,287	23,095	23,113	21,184
b Contributions	1,612		497	250	2,313
c Net investment earnings, gains, and losses	11	444	695	732	616
d Grants or scholarships	1,000	354	1,000	1,000	1,000
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance	24,000	23,377	23,287	23,095	23,113

- 2

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

Board designated or quasi-endowment
- b

Permanent endowment
- c

Temporarily restricted endowment 100 000 %

The percentages in lines 2a, 2b, and 2c should equal 100%
- 3a

Are there endowment funds not in the possession of the organization that are held and administered for the organization by
- (i) unrelated organizations

3a(i)

No

(ii) related organizations

3a(ii)

No
- b

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

3b
- 4

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

Part VI Land, Buildings, and Equipment. Complete if the organization answered 'Yes' to Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b)Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements				
d Equipment		572,247	425,227	147,020
e Other				
Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c).)				147,020

Part XI

Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

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

1	Total revenue, gains, and other support per audited financial statements	1	102,641,352
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a	Net unrealized gains (losses) on investments	2a	
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII)	2d	
e	Add lines 2a through 2d	2e	0
3	Subtract line 2e from line 1	3	102,641,352
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII)	4b	
c	Add lines 4a and 4b	4c	0
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5	102,641,352

Part XII

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

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

1	Total expenses and losses per audited financial statements	1	102,901,744
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIII)	2d	
e	Add lines 2a through 2d	2e	0
3	Subtract line 2e from line 1	3	102,901,744
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII)	4b	
c	Add lines 4a and 4b	4c	0
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	5	102,901,744

Part XIII

Supplemental Information

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

Return Reference	Explanation
PART V, LINE 4	THE ENDOWMENT FUNDS INCLUDED IN PART V ARE TO BE USED TO PROVIDE AN ANNUAL AWARD TO ONE OF THE SMART START NOT-FOR-PROFITS THAT THE NORTH CAROLINA PARTNERSHIP FOR CHILDREN OVERSEES

[illegible]

Schedule I
(Form 990)

Department of the Treasury
Internal Revenue Service

Name of the organization
NORTH CAROLINA PARTNERSHIP FOR CHILDREN INC

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.

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

OMB No 1545-0047

2014

Open to Public
Inspection

Employer identification number
56-1850485

Part I General Information on Grants and Assistance

1

Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?

☒ Yes ☐ No

2

Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

(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
See Additional Data Table							

2

Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

78

3

Enter total number of other organizations listed in the line 1 table

Part III

Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" to Form 990, Part IV, line 22.
Part III can be duplicated if additional space is needed.

(a)Type of grant or assistance	(b)Number of recipients	(c)Amount of cash grant	(d)Amount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance

Part IV

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

Return Reference	Explanation
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 GRANTEEES, 76 (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 GRANTEEES GENERALLY HAVE BIENNIAL AUDITS (FINANCIAL AND COMPLIANCE) BY AN INDEPENDENT CERTIFIED PUBLIC ACCOUNTING FIRM ACCORDINGLY, NCPC TYPICALLY COORDINATES ITS MONITORING EFFORT WITH THAT OF THE AUDITORS AND, THEREFORE, ALSO MONITORS THESE GRANTEEES 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, 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 NCPC'S EXECUTIVE MANAGEMENT IS PROVIDED WITH A SUMMARY OF GRANTEE MONITORING RESULTS
SCHEDULE I, PART II, LINE 1	THE NCPC RECEIVED \$20,516 IN FUNDS FROM THE NORTH CAROLINA STATE EMPLOYEES COMBINED CAMPAIGN (SECC) SUCH AGENCY FUNDS WERE PASSED ON TO THE RECIPIENTS LISTED ON LINE 1 HOWEVER, GRANTS MADE WITH AGENCY FUNDS ARE NOT INCLUDED IN THE AMOUNTS LISTED ON LINE 1

Additional Data

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 Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code 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
ALAMANCE PARTNERSHIP FOR CHILDREN2322 RIVER ROAD BURLINGTON,NC 27217	56-1884459	501(C)(3)	870,003				NC YOUNG CHILDREN
ALBEMARLE SMART START PARTNERSHIP INC1403 PARKVIEW DRIVE ELIZABETH CITY,NC 279096533	56-2088109	501(C)(3)	1,781,648				NC YOUNG CHILDREN
ALEXANDER COUNTY PARTNERSHIP FOR CHILDRENPO BOX 1661 TAYLORSVILLE,NC 28681	56-1995412	501(C)(3)	350,845				NC YOUNG CHILDREN

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code 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
ALLEGHANY PARTNERSHIP FOR CHILDREN INCPO BOX 1643 SPARTA,NC 28675	56-1928008	501(C)(3)	126,253				NC YOUNG CHILDREN
ANSON COUNTY PARTNERSHIP FOR CHILDREN117 SOUTH GREENE STREET WADESBORO,NC 281709998	56-1987729	501(C)(3)	381,791				NC YOUNG CHILDREN
ASHE COUNTY PARTNERSHIP FOR CHILDREN626 ASHE CENTRAL SCHOOL ROAD UNIT 1 1 JEFFERSON,NC 28640	56-1892216	501(C)(3)	300,414				NC YOUNG CHILDREN

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code 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
AVERY COUNTY SMART START A PARTNERSHIP FOR CHILDRENPO BOX 1387 BURNSVILLE,NC 28714	56-1892570	501(C)(3)	194,150				NC YOUNG CHILDREN
BEAUFORTHYDE PARTNERSHIP FOR CHILDREN979 WASHINGTON SQUARE MALL WASHINGTON,NC 27889	56-1992257	501(C)(3)	607,145				NC YOUNG CHILDREN
BLADEN SMART START-A PARTNERSHIP FOR CHILDREN INCPO BOX 2255 ELIZABETHTOWN,NC 28337	56-2048384	501(C)(3)	355,789				NC YOUNG CHILDREN

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code 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
BLUE RIDGE PARTNERSHIP FOR CHILDREN INCPO BOX 1387 BURNSVILLE,NC 28714	56-1921260	501(C)(3)	307,076				NC YOUNG CHILDREN
BUNCOMBE COUNTY PARTNERSHIP FOR CHILDREN INC2229 RIVERSIDE DRIVE ASHEVILLE,NC 28804	56-1942178	501(C)(3)	1,711,006				NC YOUNG CHILDREN
BURKE COUNTY SMART START INCPO BOX 630 MORGANTON,NC 28680	56-1852721	501(C)(3)	1,197,045				NC YOUNG CHILDREN

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code 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
CABARRUS COUNTY PARTNERSHIP FOR CHILDRENPO BOX 87 KANNAPOLIS, NC 28082	56-2088223	501(C)(3)	2,165,216				NC YOUNG CHILDREN
CALDWELL COUNTY SMART START A PARTNERSHIP FOR YOUNG CHILDRENP O BOX 2128 LENOIR, NC 28645	20-1090467	501(C)(3)	813,688				NC YOUNG CHILDREN
CARTERET COUNTY PARTNERSHIP FOR CHILDREN3328-A BRIDGES STREET MOREHEAD CITY, NC 28557	56-2273396	501(C)(3)	662,049				NC YOUNG CHILDREN

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code 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
CASWELL COUNTY PARTNERSHIP FOR CHILDRENPO BOX 664 YANCEYVILLE,NC 27379	56-2070459	501(C)(3)	232,837				NC YOUNG CHILDREN
CATAWBA COUNTY PARTNERSHIP FOR CHILDRENPO BOX 3123 HICKORY,NC 286033123	58-2139195	501(C)(3)	1,473,648				NC YOUNG CHILDREN
CHATHAM COUNTY PARTNERSHIP FOR CHILDREN200 SANFORD HIGHWAY SUITE 4 PITTSBORO,NC 27312	56-1885127	501(C)(3)	735,545				NC YOUNG CHILDREN

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code 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
CHILDREN & YOUTH PARTNERSHIP FOR DARE COUNTY INCPO BOX 2539 KILL DEVIL HILLS,NC 27948	56-1885539	501(C)(3)	320,859				NC YOUNG CHILDREN
CHILDREN'S COUNCIL OF WATAUGA COUNTY INC 225 BIRCH STREET SUITE 3 BOONE,NC 28607	58-1416331	501(C)(3)	247,784				NC YOUNG CHILDREN
CLEVELAND COUNTY PARTNERSHIP FOR CHILDREN INCPO BOX 455 KINGS MOUNTAIN,NC 28086	56-1875246	501(C)(3)	964,752				NC YOUNG CHILDREN

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code 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
COLUMBUS COUNTY PARTNERSHIP FOR CHILDREN INC109 WEST MAIN STREET WHITEVILLE,NC 28472	56-1966108	501(C)(3)	445,962				NC YOUNG CHILDREN
CRAVEN SMART START INC 2111F NEUSE BLVD NEW BERN,NC 28560	56-2105879	501(C)(3)	1,000,539				NC YOUNG CHILDREN
DOWN EAST PARTNERSHIP FOR CHILDRENPO BOX 1245 ROCKY MOUNT,NC 27802	56-1859313	501(C)(3)	2,457,865				NC YOUNG CHILDREN

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code 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
DUPLIN COUNTY PARTNERSHIP FOR CHILDRENPO BOX 989 KENANSVILLE,NC 28349	56-1892438	501(C)(3)	1,110,515				NC YOUNG CHILDREN
DURHAM'S PARTNERSHIP FOR CHILDREN1201 S BRIGGS AVENUE SUITE 210 DURHAM,NC 27703	56-1892432	501(C)(3)	5,061,785				NC YOUNG CHILDREN
FRANKLIN GRANVILLE VANCE SMART START INC PO BOX 142 HENDERSON,NC 27536	56-2045172	501(C)(3)	1,441,084				NC YOUNG CHILDREN

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code 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
GUILFORD COUNTY PARTNERSHIP FOR CHILDREN INC122 NORTH ELM STREET SUITE 1010 GREENSBORO,NC 27401	56-1982976	501(C)(3)	3,061,881				NC YOUNG CHILDREN
HARNETT COUNTY PARTNERSHIP FOR CHILDREN INC170 PINE STATE ST LILLINGTON,NC 27546	56-2079125	501(C)(3)	874,403				NC YOUNG CHILDREN
HERTFORD-NORTHAMPTON SMART START PARTNERSHIP FOR CHILDREN INCPO BOX 504 MURFREESBORO,NC 27855	56-1865237	501(C)(3)	479,122				NC YOUNG CHILDREN

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code 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
HOKE COUNTY PARTNERSHIP FOR CHILDREN AND FAMILIES PO BOX 1209 RAEFORD,NC 28376	56-1898931	501(C)(3)	777,331				NC YOUNG CHILDREN
IREDELL COUNTY PARTNERSHIP FOR YOUNG CHILDREN INC734 SALISBURY ROAD STATESVILLE,NC 28677	56-2005160	501(C)(3)	1,227,671				NC YOUNG CHILDREN
JONES COUNTY PARTNERSHIP FOR CHILDRENPO BOX 186 TRENTON,NC 28585	56-1857162	501(C)(3)	218,291				NC YOUNG CHILDREN

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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LEE COUNTY PARTNERSHIP FOR CHILDREN143 CHATHAM STREET SANFORD,NC 27330	56-2009097	501(C)(3)	1,001,898				NC YOUNG CHILDREN
LENOIRGREENE COUNTY PARTNERSHIP FOR CHILDREN1465 HIGHWAY 258 NORTH KINSTON,NC 28504	56-1898462	501(C)(3)	1,583,044				NC YOUNG CHILDREN
MADISON COUNTY PARTNERSHIP FOR CHILDREN AND FAMILIES INCPO BOX 1657 MARS HILL,NC 28754	56-2040118	501(C)(3)	262,830				NC YOUNG CHILDREN

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MARTINPITT PARTNERSHIP FOR CHILDREN INC111-B EASTBROOK DRIVE GREENVILLE,NC 27858	56-1913394	501(C)(3)	1,357,454				NC YOUNG CHILDREN
MECKLENBURG PARTNERSHIP FOR CHILDREN601 EAST 5TH STREET SUITE 500 CHARLOTTE,NC 28202	56-1853108	501(C)(3)	7,509,424				NC YOUNG CHILDREN
MONTGOMERY COUNTY PARTNERSHIP FOR CHILDREN404-A NORTH MAIN STREET TROY,NC 27371	58-2185898	501(C)(3)	470,778				NC YOUNG CHILDREN

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ONSLOW COUNTY PARTNERSHIP FOR CHILDREN INC900 DENNIS ROAD JACKSONVILLE,NC 28546	56-2058409	501(C)(3)	4,389,199				NC YOUNG CHILDREN
ORANGE COUNTY PARTNERSHIP FOR YOUNG CHILDREN120 PROVIDENCE RD SUITE 101 CHAPEL HILL,NC 27514	56-1844192	501(C)(3)	1,096,559				NC YOUNG CHILDREN
PAMLICO PARTNERSHIP FOR CHILDREN INC702A MAIN STREET BAYBORO,NC 285150612	56-1874658	501(C)(3)	132,807				NC YOUNG CHILDREN

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PARTNERS FOR CHILDREN & FAMILIES INC (MOORE COUNTY)7720 NC HWY 22 SUITE C CARTHAGE,NC 28327	58-2139259	501(C)(3)	921,791				NC YOUNG CHILDREN
PARTNERSHIP FOR CHILDREN OF CUMBERLAND COUNTY INC 351 WAGONER DRIVE SUITE 200 FAYETTEVILLE,NC 283034608	56-1845926	501(C)(3)	3,977,466				NC YOUNG CHILDREN
PARTNERSHIP FOR CHILDREN OF JOHNSTON COUNTY INC1406-A S POLLOCK STREET SELMA,NC 27576	56-2063680	501(C)(3)	1,403,402				NC YOUNG CHILDREN

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PARTNERSHIP FOR CHILDREN OF LINCOLNGASTON COUNTIES INC120 ROECHLING STREET DALLAS,NC 28034	31-1539832	501(C)(3)	2,010,132				NC YOUNG CHILDREN
PARTNERSHIP FOR CHILDREN OF THE FOOTHILLS338 WITHROW ROAD FOREST CITY,NC 28043	56-2014947	501(C)(3)	1,012,949				NC YOUNG CHILDREN
PERSON COUNTY PARTNERSHIP FOR CHILDRENPO BOX 1791 ROXBORO,NC 27573	56-1872882	501(C)(3)	437,616				NC YOUNG CHILDREN

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RANDOLPH COUNTY PARTNERSHIP FOR CHILDREN349 SUNSET AVENUE ASHEBORO,NC 27203	31-1612024	501(C)(3)	1,078,474				NC YOUNG CHILDREN
REACH OUT AND READ INC56 ROLAND STREET SUITE 100D BOSTON,MA 02129	04-3481253	501(C)(3)	44,867				EARLY LITERACY/BOOKS
REGION A PARTNERSHIP FOR CHILDREN116 JACKSON STREET SYLVA,NC 28779	56-1869575	501(C)(3)	1,216,572				NC YOUNG CHILDREN

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RICHMOND COUNTY PARTNERSHIP FOR CHILDRENPO BOX 1944 ROCKINGHAM,NC 28380	31-1575604	501(C)(3)	742,459				NC YOUNG CHILDREN
ROBESON COUNTY PARTNERSHIP FOR CHILDREN210 EAST 2ND STREET LUMBERTON,NC 28358	56-1940920	501(C)(3)	1,566,513				NC YOUNG CHILDREN
ROCKINGHAM COUNTY PARTNERSHIP FOR CHILDREN INCPO BOX 325 WENTWORTH,NC 273750325	56-1974269	501(C)(3)	706,479				NC YOUNG CHILDREN

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SAMPSON COUNTY PARTNERSHIP FOR CHILDREN211 WEST MAIN STREET CLINTON,NC 283284049	31-1603397	501(C)(3)	1,029,870				NC YOUNG CHILDREN
SCOTLAND COUNTY PARTNERSHIP FOR CHILDREN AND FAMILIES INCPO BOX 586 LAURINBURG,NC 28352	56-2094816	501(C)(3)	392,389				NC YOUNG CHILDREN
SMART START OF BRUNSWICK COUNTY INC 5140 SELLERS STREET SHALLOTTE,NC 28470	56-1885097	501(C)(3)	636,349				NC YOUNG CHILDREN

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SMART START OF DAVIDSON COUNTY INC 306 EAST US HIGHWAY 64 LEXINGTON,NC 27292	56-1859989	501(C)(3)	2,645,808				NC YOUNG CHILDREN
SMART START OF DAVIE COUNTY INC1278 YADKINVILLE ROAD MOCKSVILLE,NC 27028	31-1600557	501(C)(3)	287,841				NC YOUNG CHILDREN
SMART START OF FORSYTH COUNTY7820 NORTH POINT BOULEVARDSTE 200 WINSTONSALEM,NC 27106	56-1899564	501(C)(3)	4,366,175				NC YOUNG CHILDREN

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SMART START OF HENDERSON COUNTY INC 722 5TH AVENUE WEST HENDERSONVILLE, NC 28739	56-2092325	501(C)(3)	733,676				NC YOUNG CHILDREN
SMART START OF NEW HANOVER COUNTY3534-F SOUTH COLLEGE ROAD WILMINGTON,NC 28412	56-1951952	501(C)(3)	1,434,581				NC YOUNG CHILDREN
SMART START OF PENDER COUNTY INCPO BOX 429 BURGAW,NC 284250429	56-2044085	501(C)(3)	435,061				NC YOUNG CHILDREN

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SMART START OF TRANSYLVANIA COUNTY PROFESSIONAL PLAZA 93 N BROAD STREET SUITES D E BREVARD,NC 28712	31-1489864	501(C)(3)	194,629				NC YOUNG CHILDREN
SMART START OF YADKIN COUNTY INCPO BOX 39 YADKINVILLE,NC 27055	56-1864667	501(C)(3)	461,403				NC YOUNG CHILDREN
SMART START ROWAN INC 1329 JAKE ALEXANDER BOULEVARD SOUTH SALISBURY,NC 28147	56-1890324	501(C)(3)	1,821,077				NC YOUNG CHILDREN

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STANLY COUNTY PARTNERSHIP FOR CHILDRENPO BOX 2165 ALBEMARLE,NC 28002	56-1851138	501(C)(3)	734,186				NC YOUNG CHILDREN
STOKES PARTNERSHIP FOR CHILDRENPO BOX 2319 KING,NC 270212319	56-1888024	501(C)(3)	457,956				NC YOUNG CHILDREN
SURRY COUNTY EARLY CHILDHOOD PARTNERSHIP PO BOX 7050 MT AIRY,NC 27030	56-1938073	501(C)(3)	650,730				NC YOUNG CHILDREN

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THE CHOWANPERQUIMANS SMART START PARTNERSHIP409 OLD HERTFORD ROAD EDENTON,NC 27932	31-1622057	501(C)(3)	454,758				NC YOUNG CHILDREN
THE HALIFAX-WARREN SMART START PARTNERSHIP FOR CHILDREN INCPO BOX 339 ROANOKE RAPIDS,NC 27870	56-1847375	501(C)(3)	522,100				NC YOUNG CHILDREN
THE PARTNERSHIP FOR CHILDREN OF WAYNE COUNTY INC800 NORTH WILLIAM STREET GOLDSBORO,NC 27530	56-2054262	501(C)(3)	909,196				NC YOUNG CHILDREN

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TYRRELL-WASHINGTON PARTNERSHIP FOR CHILDREN INC125-B WEST WATER STREET PLYMOUTH,NC 27962	56-1862036	501(C)(3)	269,184				NC YOUNG CHILDREN
WAKE COUNTY SMARTSTART4901 WATERS EDGE DRIVE SUITE 101 RALEIGH,NC 27606	56-1949415	501(C)(3)	7,651,786				NC YOUNG CHILDREN
WILKES COMMUNITY PARTNERSHIP FOR CHILDRENPO BOX 788 NORTH WILKESBORO,NC 28659	56-1875083	501(C)(3)	658,018				NC YOUNG CHILDREN

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WILSON COUNTY PARTNERSHIP FOR CHILDRENPO BOX 2661 WILSON,NC 278942661	56-1942537	501(C)(3)	1,254,503				NC YOUNG CHILDREN
ALLIANCE FOR CHILDREN PO BOX 988 MONROE,NC 28111	56-2052395	501(C)(3)	1,364,603				NC YOUNG CHILDREN
HYDE COUNTY BOARD OF EDUCATIONPO BOX 217 SWAN QUARTER,NC 27885	56-6001052	GOVERNMENT	25,000				NC YOUNG CHILDREN

efile GRAPHIC print - DO NOT PROCESS		As Filed Data -		DLN: 93493137020026	
SCHEDULE O (Form 990 or 990-EZ) Department of the Treasury Internal Revenue Service		Supplemental Information to Form 990 or 990-EZ Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information. ▶ Attach to Form 990 or 990-EZ. ▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.			OMB No 1545-0047
					2014 Open to Public Inspection
Name of the organization NORTH CAROLINA PARTNERSHIP FOR CHILDREN INC				Employer identification number 56-1850485	

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 4	
FORM 990, PART VI, SECTION B, LINE 11	THE AUDIT COMMITTEE OF THE BOARD OF DIRECTORS IS PROVIDED WITH THE FORM 990 FOR REVIEW
FORM 990, PART VI, SECTION B, LINE 12C	THE NORTH CAROLINA PARTNERSHIP FOR CHILDREN, INC (NCPC) RECOGNIZES THAT EFFECTIVE GOVERNA NCE 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 I N ITS INTEGRITY , WHICH IS GROUNDED IN FAIR AND RESPONSIBLE DECISION-MAKING THE BOARD OF D IRECTORS OF NCPC BELIEVES IT IS IN THE BEST INTEREST OF NCPC TO ESTABLISH A CLEAR AND CONC ISE CONFLICT OF INTEREST POLICY THE CONFLICT OF INTEREST POLICY IS INTENDED TO PROMOTE TH E 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 O FFICERS 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 ACKNOWLEDGE THA T HE OR SHE HAS DONE SO THE POLICY IS MONITORED AND ENFORCED THROUGH THE FOLLOWING ACTION S 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 CONFLIC T EXISTS, THE MATTER SHALL BE RESOLVED BY A VOTE OF THE BOARD OF DIRECTORS EXCLUDING THE P ERSON(S) CONCERNING WHOSE SITUATION THE DOUBT HAS ARISEN C ALL APPOINTED BOARD MEMBERS S HALL 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 F ROM THE NCPC'S DISBURSEMENT OF FUNDS SHALL ABSTAIN FROM PARTICIPATING IN ANY DECISION OR D ELIBERATIONS BY NCPC REGARDING THE DISBURSEMENT OF FUNDS D THE PERSON KNOWN TO HAVE A CO NFLICT OF INTEREST MAY NOT VOTE ON THE CONTRACT OR TRANSACTION AND MUST LEAVE THE ROOM DUR ING THE VOTE UNLESS LEAVING THE ROOM BRINGS ATTENDANCE BELOW THE LEVEL OF A QUORUM THE OF FICIAL MINUTES SHALL REFLECT THAT THE CONFLICT OF INTEREST WAS DISCLOSED AND PERSON (S) WIT H THE CONFLICT WERE NOT PRESENT DURING THE VOTE AND DID NOT VOTE ON THE MATTER
FORM 990, PART VI, SECTION B, LINE 15	SALARIES AND WAGES OF ALL EMPLOYEES ARE SET IN ACCORDANCE WITH A FORMAL PAY PLAN WHICH INC LUDES 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 PL AN PUBLISHED BY THE MANAGEMENT ASSOCIATIONS OF AMERICA IT IS UPDATED PERIODICALLY BY BENC HMARKING PAY RATES AGAINST DATA FROM CAPITAL ASSOCIATED INDUSTRIES OF RALEIGH, NC, WHICH C ONDUCTS ANNUAL SALARY SURVEYS, AND OCCUPATION SPECIFIC AND LOCATION-SPECIFIC DATA FROM THE OCCUPATIONAL EMPLOYMENT AND WAGES STATISTICS PROGRAM OF THE EMPLOYMENT SECURITY DIVISION OF THE NC DEPARTMENT OF COMMERCE ADDITIONAL BENCHMARKING DATA ARE OBTAINED FROM THE N C STATE OFFICE OF HUMAN RESOURCES, THE WAKE COUNTY DEPARTMENT OF HUMAN RESOURCES, AND THE N C STATE UNIVERSITY DEPARTMENT OF HUMAN RESOURCES
FORM 990, PART VI, SECTION C, LINE 19	THESE DOCUMENTS ARE AVAILABLE UPON REQUEST, AND THE FINANCIAL STATEMENTS ARE ALSO AVAILABL E ON THE WEBSITE OF THE NORTH CAROLINA OFFICE OF STATE AUDITOR ADDITIONALLY , THE GOVERNAN CE STRUCTURE, BOARD COMMITTEE ROLES, AND MEETING DATES ARE POSTED ON OUR WEBSITE