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Part III

Statement of Program Service Accomplishments

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

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1

Briefly describe the organization’s mission

THE MISSION OF CHILD CARE SERVICES ASSOCIATION (CCSA) IS TO ENSURE THAT AFFORDABLE, ACCESSIBLE, HIGH QUALITY CHILD CARE IS AVAILABLE FOR ALL YOUNG CHILDREN AND THEIR FAMILIES. CCSA'S PRIMARY PURPOSE IS TO PROVIDE SERVICES, RESEARCH, AND ADVOCACY AT THE LOCAL, STATE, AND NATIONAL LEVELS. CCSA, AS THE LOCAL CHILD CARE RESOURCE AND REFERRAL AGENCY, PROVIDES FAMILY SUPPORT SERVICES IN ALAMANCE, CASWELL, DURHAM, FRANKLIN, GRANVILLE, ORANGE, PERSON, VANCE AND WAKE COUNTIES, WHICH INCLUDES HELPING FAMILIES FIND AND IDENTIFY RESOURCES TO PAY FOR QUALITY CHILD CARE. IN ADDITION, CCSA PROVIDES SERVICES FOR CHILD CARE PROVIDERS TO HELP IMPROVE THE QUALITY OF CHILD CARE, INCLUDING SUPPORT, TRAINING, ON-SITE CONSULTATIONS, NUTRITION SERVICES, SALARY SUPPLEMENTS, AND COLLEGE SCHOLARSHIPS. NATIONALLY AND STATEWIDE, CCSA HAS ADDRESSED THE ISSUES OF UNDER-EDUCATION, POOR COMPENSATION, AND HIGH TURNOVER IN THE EARLY CHILDHOOD WORKFORCE THROUGH INNOVATIVE PROGRAMS SUCH AS THE T E A C H EARLY CHILDHOOD P

2

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

☐ Yes ☒ No

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

3

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

☐ Yes ☒ No

If "Yes," describe these changes on Schedule O

4

Describe the organization’s program service accomplishments for each of its three largest program services, 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 \$ 7,616,737 including grants of \$ 6,968,369) (Revenue \$)

CHILD CARE WAGES: THE KEY GOAL OF THE CHILD CARE WAGES PROJECT IS TO IMPROVE EARLY CARE AND EDUCATION SERVICES. OUTCOME 1 - BY JUNE 30, 2016, THE TURNOVER RATE OF CHILD CARE WAGES PARTICIPANTS FOR THE YEAR WILL BE LESS THAN 25% (THE GOAL ESTABLISHED WITHIN SMART START'S PERFORMANCE-BASED INCENTIVE SYSTEM). THIS OUTCOME WAS ACHIEVED. THE TURNOVER RATE FOR WAGES PARTICIPANTS WAS ONLY 14%, WELL BELOW THE SMART START BENCHMARK OF 25%. OUTCOME 2 - BY JUNE 30, 2016, 40% OF ACTIVE WAGES PARTICIPANTS FUNDED AT A TEMPORARY* LEVEL ON THE SUPPLEMENT SCALE WILL SUBMIT DOCUMENTATION DURING THE FISCAL YEAR SHOWING THEY HAVE COMPLETED ADDITIONAL COURSEWORK. WAGES EXCEEDED THIS OUTCOME. IN FY16, 51% OF THE ACTIVE POPULATION FUNDED AT TEMPORARY LEVELS SUBMITTED DOCUMENTATION TO VERIFY THEIR PURSUIT OF CONTINUED EDUCATION. OUTCOME 3 - BY JUNE 30, 2016, 25% OF ACTIVE WAGES PARTICIPANTS FUNDED AT A TEMPORARY* LEVEL ON THE SUPPLEMENT SCALE WILL SUBMIT DOCUMENTATION DURING THE FISCAL YEAR SHOWING THEY HAVE MOVED UP A LEVEL ON THE SCALE. WAGES EXCEEDED THIS OUTCOME. IN FY16, 43% OF THE ACTIVE POPULATION FUNDED AT TEMPORARY LEVELS SUBMITTED DOCUMENTATION TO VERIFY THEY HAD MOVED UP A LEVEL ON THE SUPPLEMENT SCALE. *TEMPORARY LEVELS ON THE WAGES SCALE ARE THOSE BELOW THE ASSOCIATE'S DEGREE PLUS OR INCLUDING AT LEAST 24 BIRTH-TO-FIVE FOCUSED SEMESTER HOURS.

4b

(Code) (Expenses \$ 4,419,550 including grants of \$ 3,074,059) (Revenue \$ 272,129)

T E A C H EARLY CHILDHOOD: THE T E A C H EARLY CHILDHOOD PROJECT PROVIDES UNIQUE EDUCATIONAL SCHOLARSHIPS TO CHILD CARE PROFESSIONALS AS A STRATEGY TO IMPROVE THE EDUCATION, COMPENSATION, AND RETENTION OF NORTH CAROLINA'S EARLY CARE AND EDUCATION WORKFORCE. SCHOLARSHIPS ARE STRUCTURED USING FOUR COMPONENTS (SCHOLARSHIP, EDUCATION, COMPENSATION, AND COMMITMENT) AND ARE AVAILABLE TO FACILITY-BASED TEACHERS, DIRECTORS, AND FAMILY CHILD CARE PROVIDERS WORKING IN NORTH CAROLINA AND TO INDIVIDUALS WHO PERFORM NON-DIRECT SERVICE FUNCTIONS ON BEHALF OF YOUNG CHILDREN AND FAMILIES THROUGHOUT THE STATE'S EARLY CARE AND EDUCATION SYSTEM. THESE SCHOLARSHIPS ENABLE ELIGIBLE PERSONNEL WITH THE OPPORTUNITY TO COMPLETE COURSEWORK LEADING TOWARDS CREDENTIALS AND DEGREES AT ALL OF NORTH CAROLINA'S 58 COMMUNITY COLLEGES AND 20 UNIVERSITIES. PARTICIPANTS ARE EXPECTED TO INCREASE THEIR EDUCATION BY COMPLETING A MINIMUM NUMBER OF CREDITS ANNUALLY AND IN TURN ARE GIVEN RAISES OR BONUSES IN RECOGNITION OF THEIR ACHIEVEMENT. MORE IMPORTANTLY, PARTICIPANTS ARE REQUIRED TO COMMIT TO THE CHILDCARE FIELD, THEIR EMPLOYING CHILD CARE PROGRAM, OR SPONSORING ORGANIZATION FOR SIX MONTHS TO ONE YEAR DURING FY 2015-16. THE T E A C H EARLY CHILDHOOD SCHOLARSHIP PROJECT MET ITS GOALS FOR IMPROVING THE EDUCATION, COMPENSATION, AND RETENTION AMONG ITS PROGRAM PARTICIPANTS IN NORTH CAROLINA AND PRODUCED POSITIVE OUTCOMES AS WERE PROPOSED. THE T E A C H EARLY CHILDHOOD PROJECT PROVIDED CORE, COMPREHENSIVE SCHOLARSHIPS TO 2,277 CHILD CARE TEACHERS, DIRECTORS, AND FAMILY CHILD CARE PROVIDERS IN 98 OF THE STATE'S 100 COUNTIES. ADDITIONALLY, RACE TO THE TOP EARLY LEARNING CHALLENGE GRANT FUNDS WERE USED TO HELP MORE THAN THREE HUNDRED ADDITIONAL INDIVIDUALS COMPLETE COURSEWORK OFFERED AT THE ASSOCIATE, BACHELOR, AND GRADUATE LEVELS. SUCCESSFUL OUTCOMES WERE PRODUCED IN THE AREAS OF INCREASED EDUCATION, INCREASED COMPENSATION, AND RETENTION. FOR EXAMPLE, ON AVERAGE, TEACHERS WHO PARTICIPATED ON THE PROJECT'S MOST UTILIZED SCHOLARSHIP MODEL, THE ASSOCIATE DEGREE SCHOLARSHIP PROGRAM, COMPLETED 14 CREDIT HOURS OF FORMAL EDUCATION, EXPERIENCED A 9% INCREASE IN EARNINGS, AND HAD A 9% TURNOVER RATE MORE THAN 58,708 CHILDREN WERE CARED FOR IN A SETTING THAT SUPPORTED AT LEAST ONE RECIPIENT ON A T E A C H EARLY CHILDHOOD CORE SCHOLARSHIP. THE PROVISION OF SCHOLARSHIPS ENABLED T E A C H RECIPIENTS TO ENROLL IN 15,922 CREDIT HOURS OF EDUCATION AT THE STATE'S COMMUNITY COLLEGES AND SELECTED UNIVERSITIES.

4c

(Code) (Expenses \$ 10,525,832 including grants of \$ 6,846,712) (Revenue \$ 993,844)

STATE & LOCAL INITIATIVES: STATEWIDE CCR&R INITIATIVES, CCR&R COUNCIL, AND CONTRACTS MANAGEMENT. FULLY 100% OF REGIONAL LEAD CCR&R AGENCIES INDICATED THAT ASSISTANCE RECEIVED FROM THE R&R COUNCIL WAS HELPFUL AND 100% OF REGIONAL LEAD AGENCIES INDICATED THAT THE CCR&R COUNCIL HAS ENABLED THE IMPROVEMENT OF R&R SERVICES. ALL 14 REGIONAL LEAD AGENCIES SUCCESSFULLY IMPLEMENTED AT LEAST TWO OF THE FOLLOWING THREE CCR&R CORE SERVICES: CONSUMER EDUCATION AND REFERRAL, PROFESSIONAL DEVELOPMENT, AND TECHNICAL ASSISTANCE. ADDITIONALLY, ALL 14 OF THE REGIONAL LEAD AGENCIES AND THE 4 LOCAL CALL CENTERS MET NC CCR&R STANDARDS FOR REFERRAL ASSESSMENT CALLS (RAC). THE TWO STATEWIDE SPECIAL INITIATIVE PROJECTS WERE GREATLY AFFECTED BY STAFF TURNOVER, HOWEVER, 79% OF THE REGIONS MET THEIR INFANT/TODDLER GOALS AND 93% OF THE REGIONS MET THEIR HEALTH/SOCIAL BEHAVIORS GOALS. STATEWIDE GOALS WERE MET IN THESE TWO PROJECTS: THE INFANT/TODDLER ENHANCEMENT INITIATIVE EXCEEDED THEIR GOAL OF 3,700 STATEWIDE TECHNICAL ASSISTANCE CONSULTATIONS BY PROVIDING 4,767 ON-SITE TA CONSULTATIONS IN FY16. UNDER THE STATEWIDE INFANT/TODDLER PROJECT, 599 CONTACT TRAINING HOURS WERE CONDUCTED BENEFITTING 2,969 CHILD CARE PROVIDERS (UNDUPLICATED COUNT). ACROSS NC, TECHNICAL ASSISTANCE WAS PROVIDED TO 313 LICENSED PROGRAMS, 148 CLASSROOMS COMPLETED PARTICIPATION IN THE INFANT/TODDLER QUALITY RATING IMPROVEMENT PROGRAM, RESULTING IN 1,425 CHILD CARE SLOTS DEMONSTRATING IMPROVED QUALITY. THE AVERAGE INCREASE FROM PRE-TO-POST ASSESSMENT WAS 1.73 POINTS. THE HEALTHY SOCIAL BEHAVIORS INITIATIVE EXCEEDED THEIR GOAL OF 3684 STATEWIDE TECHNICAL ASSISTANCE VISITS BY PROVIDING 4,193 TA VISITS IN FY16 AND 719 CONTACT HOURS OF TRAINING. (THE SCHOOL AGE PROJECT NO LONGER FALLS UNDER OUR DOMAIN. SOUTHWESTERN STILL COORDINATES THIS PROJECT, BUT DCDEE PROVIDES THE TA VISITS.) UNDER THE STATEWIDE CORE SERVICES, ALL 14 REGIONS REPORTED THAT AT LEAST 70% OF THE CUSTOMERS SURVEYED INDICATED THAT THEY CHOSE 3, 4, OR 5 STAR CARE. STATEWIDE, 96% OF PARENTS RESPONDING TO FOLLOW-UP SURVEYS INDICATED THAT THEY CHOSE 3, 4, OR 5 STAR CARE. ALL 14 REGIONS REPORTED THAT AT LEAST 70% OF THE CUSTOMERS SURVEYED INDICATED THAT THEY USED QUALITY INDICATORS IN THEIR CHILD CARE SEARCH. STATEWIDE, 98% OF PARENTS RESPONDING TO FOLLOW-UP SURVEYS INDICATED THAT THEY USED QUALITY INDICATORS IN THEIR CHILD CARE SEARCH. AT THE CONCLUSION OF FY16, STATISTICAL DATA FROM DCDEE INDICATES THAT 73% OF ALL CHILDREN ENROLLED IN LICENSED CARE IN THE STATE OF NORTH CAROLINA WERE ENROLLED IN 4- AND 5-STAR CARE. THIS IS A SIGNIFICANT PERCENTAGE OF THE STATE'S CHILDREN IN HIGHER QUALITY CARE. FURTHERMORE, AT THE CONCLUSION OF FY16, ONLY 3.0% OF CHILDREN ENROLLED IN LICENSED CHILD CARE IN NORTH CAROLINA REMAIN ENROLLED IN 1- OR 2-STAR CARE. OTHER TRIANGLE CCR&R SERVICES: TRAINING AND SUPPORT SERVICES. THERE WERE 377 PROFESSIONAL DEVELOPMENT WORKSHOPS CONDUCTED FOR 5,896 (DUPLICATED) CHILD CARE PROFESSIONALS IN THE TRIANGLE AREA. THERE WERE 876.0 IN-SERVICE HOURS RECEIVED BY THE ATTENDEES. THERE WERE 6 PRE-LICENSING WORKSHOPS PRESENTED TO 45 POTENTIAL HOME CHILD CARE PROVIDERS. THERE WERE 44 CEU CLASSES PRESENTED TO OVER 675 (DUPLICATED) EARLY CHILDHOOD PROFESSIONALS. OTHER PROGRAM SERVICES: THE CHILD AND ADULT CARE FOOD PROGRAM (CACFP) SERVED 64 CHILD CARE HOMES AND 19 CENTERS IN THE TRIANGLE. THERE WERE 619,336 MEALS REIMBURSED TO AN AVERAGE OF 987 CHILDREN. THERE WERE 249 MONITORING VISITS MADE TO CHILD CARE PROGRAMS TO REVIEW RECORDS, OBSERVE MEALS, AND PROVIDE TECHNICAL ASSISTANCE AS NEEDED. THE TA DEPARTMENT SERVED A TOTAL OF 193 EARLY CHILDHOOD EDUCATION PROGRAMS/SCHOOL-AGE PROGRAMS IN FISCAL YEAR 2015-2016. CHILD CARE SCHOLARSHIP SERVICES: FY16 DURHAM COUNTY SMART START SCHOLARSHIP PROGRAM (DPFC) - 100% OF CONTRACTED FUNDS FOR SCHOLARSHIPS WAS EXPENDED, TOTALING \$2,820,589. A TOTAL OF 566 FAMILIES WERE SERVED. A TOTAL OF 656 CHILDREN RECEIVED SCHOLARSHIPS. CHILDREN ATTENDED 94 DIFFERENT CHILD CARE FACILITIES. 4.8 WAS THE AVERAGE STAR RATING OF THE CARE UTILIZED BY CHILDREN RECEIVING SERVICES. 292 CHILDREN WERE FUNDED JOINTLY THROUGH THE DURHAM COUNTY NCPREK PROGRAM. 97 CHILDREN RECEIVED A SCHOLARSHIP THROUGH THE EARLY HEAD START SET-ASIDE FUND. 44 CHILDREN RECEIVING SERVICES HAD DOCUMENTED DEVELOPMENTAL NEEDS. 26% OF CHILDREN LIVED IN FAMILIES REPORTING SPANISH AS THEIR PRIMARY LANGUAGE. OTHER FY16 SCHOLARSHIP: 40 CHILDREN WERE SERVED THROUGH THE DURHAM AND ORANGE COUNTY REGULAR SCHOLARSHIP PROGRAMS. 100% OF THESE CHILDREN RECEIVED SERVICES IN A 4 OR 5 STAR FACILITY. A TOTAL OF \$47,109 WAS SPENT IN UNITED WAY AND OTHER DONATED FUNDS FOR THESE SCHOLARSHIPS. 107 CHILDREN RECEIVED ASSISTANCE THROUGH THE UNC SCHOLARSHIP PROGRAM, INCLUDING 31 CHILDREN OF UNC EMPLOYEES, AND 76 CHILDREN OF UNC STUDENTS. A TOTAL OF \$151,884 AND \$337,675 WERE EXPENDED ON SCHOLARSHIPS FROM THE UNC CHILD CARE FEE ASSISTANCE PROGRAM AND UNC STUDENTS FOR CHILD CARE SCHOLARSHIPS FUND, RESPECTIVELY. FY16 SCHOLARSHIP PROGRAM EVALUATION: 210 FAMILIES AND 76 CHILD CARE PROGRAMS WERE SURVEYED AS PART OF THE DEPARTMENT'S ANNUAL PROGRAM EVALUATION PROCESS. FINDINGS INCLUDED THE FOLLOWING: - 91% OF SCHOLARSHIP RECIPIENTS REPORTED THAT SERVICES ENABLED THEM TO SELECT HIGHER QUALITY CARE FOR THEIR CHILDREN. - 64% REPORTED THAT THEIR CHILDREN WERE NOT IN ANY KIND OF LICENSED CARE PRIOR TO ACCESSING A SCHOLARSHIP. - 95% OF RECIPIENTS REPORTED THAT SCHOLARSHIPS ENABLED THEM TO SECURE OR MAINTAIN EMPLOYMENT. - 98% REPORTED OVERALL SATISFACTION WITH CCSA'S SERVICES. - AMONG CHILD CARE PROGRAMS SERVING CCSA SCHOLARSHIP CHILDREN, 97% FELT THAT THE SCHOLARSHIP PROGRAM WAS AN IMPORTANT SERVICE, 96% FELT THE PROGRAM WAS BEING OPERATED EFFECTIVELY, AND 96% FELT THAT CCSA STAFF WERE CONSIDERATE IN THEIR DEALINGS WITH PROGRAMS. CHILD CARE REFERRAL SERVICES: FOR FY16, A TOTAL OF 2,905 FAMILIES RECEIVED CHILD CARE CONSUMER EDUCATION AND REFERRAL SERVICES THROUGH CHILD CARE REFERRAL CENTRAL, THE REGIONAL CALL CENTER OPERATED BY CCSA. - 1,421 WERE DURHAM COUNTY RESIDENTS OR CLIENTS. - 275 WERE ORANGE COUNTY RESIDENTS OR CLIENTS. - 987 WERE WAKE COUNTY RESIDENTS OR CLIENTS. - 222 WERE RESIDENTS OF ALAMANCE, CASWELL, FRANKLIN, GRANVILLE, PERSON, AND VANCE COUNTIES. A TOTAL OF 4,005 CHILDREN WERE IMPACTED BY THESE SERVICES. 24% OF FAMILIES ACCESSED SERVICES THROUGH THE AGENCY'S ONLINE REFERRAL SYSTEM. ENHANCED REFERRAL SERVICES WERE PROVIDED TO 988 FAMILIES. FORTY PERCENT OF REFERRALS WERE TO FAMILIES EARNING LESS THAN \$20,000 PER YEAR. REFERRALS WERE PROVIDED IN SPANISH TO 154 FAMILIES (7% OF ALL COUNSELOR-DELIVERED REFERRALS) AND 11% OF ALL FAMILIES REPORTED BEING OF LATINO/A DESCENT. IN THE DEPARTMENT'S ANNUAL EVALUATION OF FAMILIES SERVED, 686 FAMILIES WERE SURVEYED. 93% OF ALL FAMILIES REPORTED BEING SATISFIED WITH SERVICES, 88% REPORTED FEELING MORE INFORMED AND BETTER ABLE TO SELECT CHILD CARE AS A RESULT OF CCSA SERVICES, AND OVER 99% REPORTED USING THREE OR MORE QUALITY INDICATORS IN THEIR SEARCH FOR CHILD CARE. THE AVERAGE STAR-RATING OF CHILD CARE SELECTED BY FAMILIES RECEIVING REFERRAL SERVICES WAS 4.4. FOR THE YEAR, FAMILY SUPPORT STAFF ALSO CONDUCTED 43 WORKSHOPS AND 110 INFORMATION SESSIONS, AND PARTICIPATED IN 30 COMMUNITY FAIRS THROUGHOUT CCSA'S SERVICE AREA. QUALITY SUPPLEMENTS: IN FY16, THE SECOND YEAR OF IMPLEMENTATION, 117 CHILD CARE PROGRAMS PARTICIPATED IN THE WAKE COUNTY QUALITY SUPPLEMENT PROGRAM. 79% OF PROGRAMS WERE 5-STAR FACILITIES, AND 31% HAD 7 PROGRAM STANDARD POINTS. PROGRAMS RECEIVED AN AVERAGE MONTHLY SUPPLEMENT OF \$899.

4d

Other program services (Describe in Schedule O)

(Expenses \$ including grants of \$) (Revenue \$)

4e

Total program service expenses ▶ 22,562,119

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	Yes	
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.	1a	3,979	
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable.	1b	0	
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	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.	2a	127	
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions).	2b	Yes	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	Yes	
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O.	3b	Yes	
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)?	4a		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?	5a		No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
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?	6a		No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
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?	7a		No
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		No
d	If "Yes," indicate the number of Forms 8282 filed during the year.	7d		
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		No
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
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?	8		
9a	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter			
a	Initiation fees and capital contributions included on Part VIII, line 12.	10a		
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities.	10b		
11	Section 501(c)(12) organizations. Enter			
a	Gross income from members or shareholders.	11a		
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them).	11b		
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year.	12b		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
a	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.	13a		
b	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.	13b		
c	Enter the amount of reserves on hand.	13c		
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.	14b		

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	16	
1b	Enter the number of voting members included in line 1a, above, who are independent	16	
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	No
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
7b	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	Yes
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
 ►EMMANUEL PAUL VP OF FINANCE AND HR 1829 E FRANKLIN ST BLDG 1000 CHAPEL HILL, NC 27514 (919) 967-3272

Part VII

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

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

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's **current** key employees, if any. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
(1) PEGGY BALL CHAIR	0 30	X		X				0	0	0
(2) JOAN MORAN VICE CHAIR	0 20	X		X				0	0	0
(3) MICHELE MILLER-COX SECRETARY	0 20	X		X				0	0	0
(4) ERICA GREGG PARKER ASSISTANT SECRETARY	0 20	X		X				0	0	0
(5) CHRISTINA GOSHAW HINKLE TREASURER	0 30	X		X				0	0	0
(6) JOHN STERNBERGH ASSISTANT TREASURER	0 30	X		X				0	0	0
(7) ED HOLLOWELL BOARD MEMBER	0 10	X						0	0	0
(8) ADRIANA MARTINEZ BOARD MEMBER	0 10	X						0	0	0
(9) DALPHIA MURPHY BOARD MEMBER	0 20	X						0	0	0
(10) MICHAEL PAGE BOARD MEMBER	0 10	X						0	0	0
(11) ADAM ZOLOTOR BOARD MEMBER	0 10	X						0	0	0
(12) GERRY COBB BOARD MEMBER	0 10	X						0	0	0
(13) KELLY MAXWELL BOARD MEMBER (THR 9/15)	0 30	X						0	0	0
(14) DANIEL HUDGINS BOARD MEMBER (THR 9/15)	0 30	X						0	0	0

Part VII

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual director or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
(15) LISA DE SAXE ZERDEN BOARD MEMBER (THR 9/15)	0 20	X						0	0	0
(16) MARGUERITE MAE DECARLI BOARD MEMBER (THR 9/15)	0 20	X						0	0	0
(17) JO ABERNATHY BOARD MEMBER (FROM 11/15)	0 30	X						0	0	0
(18) SHARON HIRSCH BOARD MEMBER (FROM 11/15)	0 20	X						0	0	0
(19) ALEKSSANDRA HOLOD BOARD MEMBER (FROM 11/15)	0 20	X						0	0	0
(20) KIMBERLY SHAW BOARD MEMBER (FROM 2/16)	0 20	X						0	0	0
(21) ANNA CARTER PRESIDENT	45 00			X				113,647	0	8,430
(22) EMMANUEL PAUL VP OF FINANCE AND HR	45 00			X				98,325	0	9,720
(23) LINDA CHAPPEL VP OF TRIANGLE CCR&R	45 00					X		104,154	0	8,880
1b Sub-Total ▶										
c Total from continuation sheets to Part VII, Section A ▶										
d Total (add lines 1b and 1c) ▶							316,126	0		27,030

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 ▶ 2

	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) Name and business address	(B) Description of services	(C) Compensation
CHILDCARE NETWORK 921 RUBY STREET DURHAM, NC 27704	PROGRAM SERVICES	606,294
SOUTHWESTERN CHILD DEVELOPMENT COMMISSIO PO BOX 250 1528 WEBSTER RD WEBSTER, NC 28788	PROGRAM SERVICES	562,575
SOUTHEASTERN COMMUNITY COLLEGE 4564 CHADBOURN HWY PO BOX 151 WHITEVILLE, NC 28472	PROGRAM SERVICES	434,922
CHILD CARE RESOURCES INC 4600 PARK RD 400 CHARLOTTE, NC 28209	PROGRAM SERVICES	384,683
MARTIN-PITT PARTNERSHIP FOR CHILDREN 111B EASTBROOK DR GREENVILLE, NC 27858	PROGRAM SERVICES	363,329
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 ▶ 27		

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	365,795	23,678,663				
	b	Membership dues	1b						
	c	Fundraising events	1c						
	d	Related organizations	1d						
	e	Government grants (contributions)	1e	21,801,783					
	f	All other contributions, gifts, grants, and similar amounts not included above	1f	1,511,085					
	g	Noncash contributions included in lines 1a-1f \$							
	h	Total. Add lines 1a-1f							
Program Service Revenue			Business Code						
	2a	MEAL SERVICE REVENUE	624100	769,797	769,797				
	b	TRAINING PROGRAMS	624100	245,600	245,600				
	c	GRANT REVENUE MATCHING	624100	146,112	146,112				
	d	MISCELLANEOUS PROGRAMS	624100	78,483	78,483				
	e	CONSULTING FEES	624100	25,981	25,981				
	f	All other program service revenue							
	g	Total. Add lines 2a-2f			1,265,973				
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts)		22,029			22,029		
	4	Income from investment of tax-exempt bond proceeds . . .							
	5	Royalties							
	6a	(i) Real		(ii) Personal	-27,990		-27,990		
		Gross rents		156,515					
		Less rental expenses		184,505					
		Rental income or (loss)		-27,990					
	d	Net rental income or (loss)							
	7a	(i) Securities		(ii) Other	-45,636		-45,636		
		Gross amount from sales of assets other than inventory		644,192					
		Less cost or other basis and sales expenses		689,828					
		Gain or (loss)		-45,636					
	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					
		Less cost of goods sold		b					
		Net income or (loss) from sales of inventory . . .							
Miscellaneous Revenue		Business Code							
11a	MISCELLANEOUS INCOME		624100	4,321			4,321		
b									
c									
d	All other revenue								
e	Total. Add lines 11a-11d			4,321					
12	Total revenue. See Instructions			24,897,360	1,265,973	-27,990	-19,286		

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.	6,985,103	6,985,103		
2	Grants and other assistance to domestic individuals. See Part IV, line 22.	9,904,037	9,904,037		
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.	346,456		346,456	
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.	4,381,723	3,806,100	564,924	10,699
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions).				
9	Other employee benefits.	779,736	671,964	105,928	1,844
10	Payroll taxes.	388,155	316,640	70,401	1,114
11	Fees for services (non-employees):				
a	Management.				
b	Legal.				
c	Accounting.				
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.)	170,074	104,051	66,023	
12	Advertising and promotion.	5,943	5,213	405	325
13	Office expenses.	546,313	468,445	76,451	1,417
14	Information technology.				
15	Royalties.				
16	Occupancy.	86,922	938	85,984	
17	Travel.	102,973	98,724	4,249	
18	Payments of travel or entertainment expenses for any federal, state, or local public officials.				
19	Conferences, conventions, and meetings.	133,776	128,255	5,521	
20	Interest.	52,624		52,624	
21	Payments to affiliates.				
22	Depreciation, depletion, and amortization.	179,224		179,224	
23	Insurance.	11,686		11,686	
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	DUES & SUBSCRIPTIONS	158,385	43,505	114,830	50
b	PRINTING AND PUBLICATIO	33,449	26,851	6,526	72
c	REPAIRS & MAINTENANCE	15,957	1,805	14,152	
d	MISCELLANEOUS	5,645	488	5,157	
e	All other expenses				
25	Total functional expenses. Add lines 1 through 24e.	24,288,181	22,562,119	1,710,541	15,521
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720).				

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		694,470	1	1,441,273	
	2	Savings and temporary cash investments		48,159	2	67,213	
	3	Pledges and grants receivable, net		880,887	3	968,468	
	4	Accounts receivable, net		105,120	4	84,328	
	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		74,946	9	90,024	
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a	7,738,378			
	b	Less: accumulated depreciation	10b	3,078,226	4,904,064	10c	4,660,152
	11	Investments—publicly traded securities		929,699	11	906,299	
	12	Investments—other securities. See Part IV, line 11			12		
	13	Investments—program-related. See Part IV, line 11			13		
	14	Intangible assets		2,483	14	2,483	
	15	Other assets. See Part IV, line 11		15,551	15	14,740	
16	Total assets. Add lines 1 through 15 (must equal line 34)		7,655,379	16	8,234,980		
Liabilities	17	Accounts payable and accrued expenses		491,979	17	402,502	
	18	Grants payable		219,108	18	391,567	
	19	Deferred revenue		15,787	19	11,969	
	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		2,558,589	23	2,420,825	
	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		9,947	25	14,748	
	26	Total liabilities. Add lines 17 through 25		3,295,410	26	3,241,611	
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.						
	27	Unrestricted net assets		3,758,555	27	3,790,616	
	28	Temporarily restricted net assets		601,414	28	1,202,753	
	29	Permanently restricted net assets			29		
	Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.						
	30	Capital stock or trust principal, or current funds			30		
	31	Paid-in or capital surplus, or land, building or equipment fund			31		
	32	Retained earnings, endowment, accumulated income, or other funds			32		
	33	Total net assets or fund balances		4,359,969	33	4,993,369	
	34	Total liabilities and net assets/fund balances		7,655,379	34	8,234,980	

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	24,897,360
2	Total expenses (must equal Part IX, column (A), line 25)	2	24,288,181
3	Revenue less expenses Subtract line 2 from line 1	3	609,179
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) . .	4	4,359,969
5	Net unrealized gains (losses) on investments	5	24,221
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	4,993,369

Part XII **Financial Statements and Reporting**

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

		Yes	No
1	Accounting method used to prepare the Form 990 <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		No
b	Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	Yes	
c	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? 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?	Yes	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	Yes	

SCHEDULE A
(Form 990 or 990EZ)

Public Charity Status and Public Support

OMB No 1545-0047

2015

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization
CHILD CARE SERVICES ASSOCIATION

Employer identification number
56-1514058

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 (Form 990 or 990-EZ))

3

☐

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

4

☐

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

5

☐

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

6

☐

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

7

☒

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

8

☐

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

9

☐

An 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

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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 (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)2011	(b)2012	(c)2013	(d)2014	(e)2015	(f)Total
1 Gifts, grants, contributions, and membership fees received (Do not include any unusual grants)	25,022,960	25,062,312	24,671,659	23,997,188	23,678,663	122,432,782
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	25,022,960	25,062,312	24,671,659	23,997,188	23,678,663	122,432,782
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						122,432,782

Section B. Total Support						
Calendar year (or fiscal year beginning in) ►	(a)2011	(b)2012	(c)2013	(d)2014	(e)2015	(f)Total
7 Amounts from line 4	25,022,960	25,062,312	24,671,659	23,997,188	23,678,663	122,432,782
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	151,433	160,448	164,270	177,374	178,544	832,069
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)			12,097	7,437	4,321	23,855
11 Total support. Add lines 7 through 10						123,288,706
12 Gross receipts from related activities, etc (see instructions)					12	6,068,435
13 First five years.If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here					<input type="checkbox"/>	

Section C. Computation of Public Support Percentage			
14	Public support percentage for 2015 (line 6, column (f) divided by line 11, column (f))	14	99.310 %
15	Public support percentage for 2014 Schedule A, Part II, line 14	15	99.370 %
16a	33 1/3% support test—2015. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization ▶ <input checked="" type="checkbox"/>		
b	33 1/3% support test—2014. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization ▶ <input type="checkbox"/>		
17a	10%-facts-and-circumstances test—2015. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization ▶ <input type="checkbox"/>		
b	10%-facts-and-circumstances test—2014. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization ▶ <input type="checkbox"/>		
18	Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions ▶ <input type="checkbox"/>		

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

(Complete only if you checked the box on line 9 of Part I 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)2011	(b)2012	(c)2013	(d)2014	(e)2015	(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)2011	(b)2012	(c)2013	(d)2014	(e)2015	(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 ► <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

15 Public support percentage for 2015 (line 8, column (f) divided by line 13, column (f))	15	
16 Public support percentage from 2014 Schedule A, Part III, line 15	16	

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2015 (line 10c, column (f) divided by line 13, column (f))	17	
18 Investment income percentage from 2014 Schedule A, Part III, line 17	18	

19a 33 1/3% support tests—2015. 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—2014. 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
<div>1</div> <div>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? <i>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.</i></div>		
<div>2</div> <div>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? <i>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.</i></div>		

Section C. Type II Supporting Organizations

	Yes	No
<div>1</div> <div>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)? <i>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).</i></div>		

Section D. All Type III Supporting Organizations

	Yes	No
<div>1</div> <div>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?</div>		
<div>2</div> <div>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? <i>If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).</i></div>		
<div>3</div> <div>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? <i>If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.</i></div>		

Section E. Type III Functionally-Integrated Supporting Organizations

<div>1</div> <div>Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).</div> <div><div>a</div><div><input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.</div></div> <div><div>b</div><div><input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.</div></div> <div><div>c</div><div><input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions).</div></div>		
<div>2</div> <div>Activities Test. Answer (a) and (b) below.</div>	Yes	No
<div>a</div> <div>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? <i>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.</i></div>		
<div>b</div> <div>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? <i>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.</i></div>		
<div>3</div> <div>Parent of Supported Organizations. Answer (a) and (b) below.</div>		
<div>a</div> <div>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.</div>		
<div>b</div> <div>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.</div>		

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): <input type="checkbox"/>		

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

Section D - Distributions	Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	
4 Amounts paid to acquire exempt-use assets	
5 Qualified set-aside amounts (prior IRS approval required)	
6 Other distributions (describe in Part VI) See instructions	
7 Total annual distributions. Add lines 1 through 6	
8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI) See instructions	
9 Distributable amount for 2015 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-2015	(iii) Distributable Amount for 2015
1 Distributable amount for 2015 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2015 (reasonable cause required--see instructions)			
3 Excess distributions carryover, if any, to 2015			
a			
b			
c			
d From 2013.			
e From 2014.			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2015 distributable amount			
i Carryover from 2010 not applied (see instructions)			
j Remainder Subtract lines 3g, 3h, and 3i from 3f			
4 Distributions for 2015 from Section D, line 7 \$			
a Applied to underdistributions of prior years			
b Applied to 2015 distributable amount			
c Remainder Subtract lines 4a and 4b from 4			
5 Remaining underdistributions for years prior to 2015, if any Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions)			
6 Remaining underdistributions for 2015 Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions)			
7 Excess distributions carryover to 2016. Add lines 3j and 4c			
8 Breakdown of line 7			
a			
b			
c Excess from 2013.			
d From 2014.			
e From 2015.			

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

2015

Open to Public Inspection

If the organization answered "Yes" on 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" on 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" on 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 CHILD CARE SERVICES ASSOCIATION	Employer identification number 56-1514058
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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?	<input type="checkbox"/> Yes <input type="checkbox"/> No
4a	Was a correction made?	<input type="checkbox"/> Yes <input type="checkbox"/> 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?	<input type="checkbox"/> Yes <input type="checkbox"/> 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-
2				
3				
4				
5				
6				

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><thead><tr><th>If the amount on line 1e, column (a) or (b) is:</th><th>The lobbying nontaxable amount is:</th></tr></thead><tbody><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></tbody></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?														
		<input type="checkbox"/> Yes	<input type="checkbox"/> 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) 2012	(b) 2013	(c) 2014	(d) 2015	(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 on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity

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?

b

Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?

c

Media advertisements?

d

Mailings to members, legislators, or the public?

e

Publications, or published or broadcast statements?

f

Grants to other organizations for lobbying purposes?

g

Direct contact with legislators, their staffs, government officials, or a legislative body?

h

Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?

i

Other activities?

j

Total Add lines 1c through 1i

2a

Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?

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?

(a)

Yes

(b)

No

Amount

No

No

No

No

No

Yes

5,000

No

No

No

5,000

No

Part III-A

Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

1

Were substantially all (90% or more) dues received nondeductible by members?

2

Did the organization make only in-house lobbying expenditures of \$2,000 or less?

3

Did the organization agree to carry over lobbying and political expenditures from the prior year?

Yes

No

1

2

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

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

b

Carryover from last year

c

Total

3

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

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?

5

Taxable amount of lobbying and political expenditures (see instructions)

1

2a

2b

2c

3

4

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	GRASSROOTS LOBBYING RELATED TO CHILD CARE ISSUES

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

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

OMB No 1545-0047

2015

Open to Public Inspection

Name of the organization
CHILD CARE SERVICES ASSOCIATION

Employer identification number
56-1514058

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

	(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? <div><input type="checkbox"/> Yes <input type="checkbox"/> No</div>	
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? <div><input type="checkbox"/> Yes <input type="checkbox"/> No</div>	

Part II Conservation Easements. Complete if the organization answered "Yes" on 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)
☐ Protection of natural habitat
☐ Preservation of open space

☐ Preservation of an historically important land area
☐ Preservation of a certified historic structure

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, handling of violations, and enforcing conservation easements during the year
►

7

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

8

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

☐ 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" on 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 on Form 990, Part VIII, line 1
► \$

(ii)

Assets included in Form 990, Part X
► \$

2

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

a

Revenue included on Form 990, Part VIII, line 1
► \$

b

Assets included in Form 990, Part X
► \$

Part III

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

(continued)

3

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

a☐ Public exhibition

b☐ Scholarly research

c☐ Preservation for future generations

d☐ Loan or exchange programs

e☐ Other

4

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

5

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

☐ Yes

☐ No

Part IV

Escrow and Custodial Arrangements.

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

1a

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

☐ Yes

☐ No

b

If "Yes," explain the arrangement in Part XIII and complete the following table

cBeginning balance

dAdditions during the year

eDistributions during the year

fEnding balance

	Amount
1c	
1d	
1e	
1f	

2a

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

☐ Yes

☐ No

b

If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided 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	493,920	426,121	372,205	352,133	212,708
b Contributions		40,970		6,314	138,060
c Net investment earnings, gains, and losses	-4,004	26,829	53,916	13,758	1,365
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance	489,916	493,920	426,121	372,205	352,133

2

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

aBoard designated or quasi-endowment ▶ 100 000 %

bPermanent endowment ▶

cTemporarily restricted endowment ▶

The percentages on lines 2a, 2b, and 2c should equal 100%

3a

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

(i) unrelated organizations

(ii) related organizations

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

b

If "Yes" on 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		194,603		194,603
b Buildings		5,576,190	1,688,949	3,887,241
c Leasehold improvements				
d Equipment		1,443,503	1,147,355	296,148
e Other		524,082	241,922	282,160
Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c)) ▶				4,660,152

Part XI

Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

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

1	Total revenue, gains, and other support per audited financial statements	1	25,106,086
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a	Net unrealized gains (losses) on investments	2a	24,221
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	24,221
3	Subtract line 2e from line 1	3	25,081,865
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	-184,505
c	Add lines 4a and 4b	4c	-184,505
5	Total revenue Add lines 3 and 4c.(This must equal Form 990, Part I, line 12)	5	24,897,360

Part XII

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

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

1	Total expenses and losses per audited financial statements	1	24,472,686
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	184,505
e	Add lines 2a through 2d	2e	184,505
3	Subtract line 2e from line 1	3	24,288,181
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	24,288,181

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	AS OF JUNE 30, 2016 AND 2015, THE BOARD OF DIRECTORS HAS DESIGNATED \$450,172 AND \$453,667, RESPECTIVELY, OF UNRESTRICTED NET ASSETS AS THE RAMSEY TREMALGIA SCHOLARSHIP FUND TO PROVIDE SCHOLARSHIPS TO LOW-INCOME FAMILIES AND GENERAL RESERVE FOR THE ORGANIZATION. AS OF JUNE 30, 2016, THE BOARD OF DIRECTORS HAS DESIGNATED \$39,744 OF UNRESTRICTED NET ASSETS AS THE TEACH ENDOWMENT FUND. SINCE THESE AMOUNTS RESULTED FROM INTERNAL DESIGNATIONS AND ARE NOT DONOR-RESTRICTED, THEY ARE CLASSIFIED AND REPORTED AS UNRESTRICTED NET ASSETS. THE ORGANIZATION RECOGNIZES THAT IN ORDER FOR THE SCHOLARSHIP FUND TO ADEQUATELY PROVIDE FOR ITS PURPOSE, SIGNIFICANT ADDITIONS TO THE ENDOWMENT ARE REQUIRED. THE BOARD OF DIRECTORS WILL SET ASIDE AN ANNUAL AMOUNT, THE VALUE OF WHICH WILL BE DETERMINED AFTER THE ANNUAL AUDIT HAS BEEN COMPLETED AND THE NET INCOME FROM UNRESTRICTED RESOURCES IS KNOWN. ONCE THE ENDOWMENT FUNDS REACH AT LEAST \$500,000, A SPENDING POLICY OF APPROPRIATING FUNDS FOR DISTRIBUTION EACH YEAR WILL BE ESTABLISHED. IN ESTABLISHING THIS POLICY, THE ORGANIZATION WILL CONSIDER THE LONG-TERM EXPECTED INVESTMENT RETURN ON ITS ENDOWMENT WITH AN OBJECTIVE TO MAINTAIN THE PURCHASING POWER OF THE ENDOWMENT ASSETS AS WELL AS TO PROVIDE ADDITIONAL REAL GROWTH THROUGH INVESTMENT RETURN.

Part XIII **Supplemental Information** *(continued)*

Return Reference	Explanation
PART XII, LINE 2D - OTHER ADJUSTMENTS	RENTAL RELATED EXPENSES NETTED AGAINST REVENUES 184,505

2015

**Open to Public
Inspection**

56-1514058

☒ Yes ☐ No

(h) Purpose of grant or assistance

Schedule I (Form 990) 2015

Part III

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

(a)Type of grant or assistance	(b)Number of recipients	(c)Amount of cash grant	(d)Amount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
(1) WAGES SUPPLEMENT PAYMENTS TO CHILD CARE WORKERS THROUGH THE CHILD CARE WAGES PROJECT	3469	5,954,743			
(2) EDUCATION SCHOLARSHIPS TO CHILD CARE WORKERS UNDER THE TEACH EARLY CHILDHOOD, TEACH MORE AT FOUR, AND TEACH INFANT TODDLER PROGRAMS	2577	3,056,784			
(3) CHILD CARE SUBSIDY, CHILD AND ADULT CARE FOOD PROGRAM (CACFP) AND OTHER RESOURCE AND REFERRAL GRANTS TO CHILD CARE CENTERS	411	892,510			

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	FOR GRANTS WHEREBY CCSA IS THE DIRECT SERVICE PROVIDER, CCSA CONDUCTS AN INTERNAL REVIEW THAT INVOLVES CHECKING THE ELIGIBILITY OF THE RECIPIENT AND THE AMOUNT OF THE PAYMENT AGAINST THE REQUIREMENTS OF THE GRANT. IN ADDITION TO THAT, THERE IS AN ANNUAL MONITORING VISIT BY THE FUNDER TO ENSURE COMPLIANCE WITH THE GRANTS. FOR GRANTS AWARDED WHERE CCSA IS NOT THE DIRECT SERVICE PROVIDER, THERE IS A MONTHLY REVIEW OF FINANCIAL REPORT OF EXPENDITURES AGAINST THE APPROVED BUDGET, A CAREFUL REVIEW OF ALL BUDGET AMENDMENTS BY PROGRAMMATIC AND FISCAL TEAMS, AND A REQUIREMENT THAT AN AUDIT BE CONDUCTED AND SUBMITTED TO CCSA SHOULD THE AMOUNT OF THE AWARD BE EQUAL TO OR GREATER THAN \$750,000, IN ACCORDANCE WITH OMB STANDARDS. FOR AWARDS OF LESS THAN \$750,000, A LIMITED SCOPE MONITORING WILL TAKE PLACE THAT INCLUDES REVIEWING OF THE FOLLOWING TYPES OF COMPLIANCE REQUIREMENTS: ACTIVITIES ALLOWED OR UNALLOWED, ALLOWABLE COSTS/COST PRINCIPLES, ELIGIBILITY, AND REPORTING.

Additional Data

Software ID:
Software Version:
EIN: 56-1514058
Name: CHILD CARE SERVICES ASSOCIATION

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 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
MCNAIR CAROLYN CAMERON 1921 STREBOR STREET DURHAM,NC 27705	01-0925155		5,802				CHILD AND ADULT CARE FOOD PROGRAM
ROBINSON BARBARA O 104 NEWBERRY LANE DURHAM,NC 27703	16-1616486		5,719				CHILD AND ADULT CARE FOOD PROGRAM
CARRBORO UNITED METHODIST CHILD CARE CENTER 200 HILLSBOROUGH RD CARRBORO,NC 27510	26-4256154		28,106				CHILD AND ADULT CARE FOOD PROGRAM

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 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
TRUESDALE BRANDY 2717 PLAINFIELD CIRCLE RALEIGH, NC 27610	26-4277666		9,116				CHILD AND ADULT CARE FOOD PROGRAM
LEARNING TOTS ACADEMY OF APEX 2209 CANDUN DR APEX, NC 27523	27-0611446		16,412				CHILD AND ADULT CARE FOOD PROGRAM
HIGHER CALLING MINISTRIES AND CHILD CARE INC 1916 CARTIER RUBY LN RALEIGH, NC 27610	27-1630029		6,216				CHILD AND ADULT CARE FOOD PROGRAM

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 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
A NEW ADVENTURE 148 AVON AVE WASHINGTON, NC 27889	27-2986930		47,752				CHILD AND ADULT CARE FOOD PROGRAM
HILL MARY T 5907 HADRIAN DRIVE DURHAM, NC 27703	36-4488309		12,267				CHILD AND ADULT CARE FOOD PROGRAM
BELCHER VALERIE 613 WILLIAM VICKERS AVE DURHAM, NC 27701	36-4743540		12,601				CHILD AND ADULT CARE FOOD PROGRAM

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 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
POWELL SHALITA 1000 G3 FARGO ST DURHAM, NC 27707	46-5753925		10,373				CHILD AND ADULT CARE FOOD PROGRAM
PRIESTER SHAKEEMA 3118 FORRESTAL DRIVE DURHAM, NC 27703	47-2142323		11,594				CHILD AND ADULT CARE FOOD PROGRAM
LIL TREASURES DAY CARE 554 N NASH ST HILLSBOROUGH, NC 27278	55-0825820		23,570				CHILD AND ADULT CARE FOOD PROGRAM

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 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
MI ESCUELITA SPANISH IMMERSION PO BOX 579 CARRBORO, NC 27510	56-2124159		14,571				CHILD AND ADULT CARE FOOD PROGRAM
CLINTON LILLIAN 1704 S ROXBORO STREET DURHAM, NC 27707	56-2239836		7,536				CHILD AND ADULT CARE FOOD PROGRAM
NIKITA SANDERS 3601 LONG RIDGE RD DURHAM, NC 27703	56-2253244		5,525				CHILD AND ADULT CARE FOOD PROGRAM

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 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
MCNAIR ALICIA D 1321 TRALEA DRIVE DURHAM, NC 27707	56-2261234		11,870				CHILD AND ADULT CARE FOOD PROGRAM
TINY STEPS-PASITOS 4 BYPASS LANE RD CHAPEL HILL, NC 27517	56-2271435		19,279				CHILD AND ADULT CARE FOOD PROGRAM
ART BEE HOME DAY CARE 3635 SANA COURT DURHAM, NC 27713	66-0606685		8,168				CHILD AND ADULT CARE FOOD PROGRAM

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 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
CABRERA'S PLAYSCHOOL 4 RED SAGE CT DURHAM, NC 27703	71-0927403		5,232				CHILD AND ADULT CARE FOOD PROGRAM
ABUNDANT LOVE CHRISTIAN FAMILY DAYCARE 2210 EAST NC HWY 54 DURHAM, NC 27713	80-0364836		18,946				CHILD AND ADULT CARE FOOD PROGRAM
POOLE BESSIE A 3806 FAYETTEVILLE ST DURHAM, NC 27713	86-1094376		9,224				CHILD AND ADULT CARE FOOD PROGRAM

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 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
TENDER CARE LEARNING CENTER 3617 DUKE HOMESTEAD RD DURHAM, NC 27704	90-0110326		23,313				CHILD AND ADULT CARE FOOD PROGRAM
UMOJA DAY CARE AND LEARNING CENTER INC 2107 SOUTH ALSTON AVE DURHAM, NC 27707	90-1002535		9,827				CHILD AND ADULT CARE FOOD PROGRAM
LAMB KIDS OF RTP 5020 NC HWY 55 DURHAM, NC 27713	26-0419292		181,573				CHILD AND ADULT CARE FOOD PROGRAM & CHILD CARE SUBSIDY

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 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
EARLY START ACADEMY 702 TRENT DRIVE DURHAM, NC 27705	27-2981142		170,615				CHILD AND ADULT CARE FOOD PROGRAM & CHILD CARE SUBSIDY
FIRST PRESBYTERIAN DAY SCHOOL 305 E MAIN STREET DURHAM, NC 27701	56-1049251		84,842				CHILD AND ADULT CARE FOOD PROGRAM & CHILD CARE SUBSIDY
FIRST CHRONICLES DAY CARE 1306 LINCOLN ST DURHAM, NC 27701	56-2174461		8,113				CHILD AND ADULT CARE FOOD PROGRAM & CHILD CARE SUBSIDY

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BRIGHT BEGINNINGS 2515 E HWY 54 DURHAM, NC 27713	80-0663537		28,568				CHILD AND ADULT CARE FOOD PROGRAM & CHILD CARE SUBSIDY
LEARNING TOTS ACADEMY INC 1900 SEDWICK RD DURHAM, NC 27713	26-2067049		60,776				CHILD AND ADULT CARE FOOD PROGRAM & CHILD CARE SUBSIDY
BRYSON CHRISTIAN MONTESSORI 6701 GARRETT RD DURHAM, NC 27707	56-1713751		375,067				CHILD AND ADULT CARE FOOD PROGRAM & CHILD CARE SUBSIDY

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KEARNEY TERESA 363 S LYNNBANK RD HENDERSON, NC 27537	87-0794226		6,397				CHILD AND ADULT FOOD PROGRAM
SOUTHWESTERN CHILD DEV COM PO BOX 250 WEBSTER, NC 28788	23-7181553	501(C)3	394,093				CHILD CARE RESOURCE & REFERRAL SERVICES
SOUTHEASTERN COMMUNITY COLLEGE PO BOX 151 WHITEVILLE, NC 28472	56-0815200		391,464				CHILD CARE RESOURCE & REFERRAL SERVICES

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CHILD CARE RESOURCES INC - CHARLOTTE 4600 PARK ROAD SUITE 400 CHARLOTTE, NC 28209	56-1514058	501(C)3	435,676				CHILD CARE RESOURCE & REFERRAL SERVICES
DOWN EAST PARTNERSHIP FOR CHILDREN PO BOX 1245 ROCKY MOUNT, NC 27802	56-1859313	501(C)3	236,083				CHILD CARE RESOURCE & REFERRAL SERVICES
PERSON CTY PARTNERSHIP FOR CH PO BOX 1791 ROXBORO, NC 27573	56-1872882	501(C)3	11,403				CHILD CARE RESOURCE & REFERRAL SERVICES

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ALAMANCE PARTNERSHIP FOR CHILDREN INC 2322 RIVER RD BURLINGTON, NC 27217	56-1884459	501(C)3	40,263				CHILD CARE RESOURCE & REFERRAL SERVICES
MARTIN-PITT PARTNERSHIP FOR CHILDREN 111-B EASTBOOK DRIVE GREENVILLE, NC 27858	56-1913394	501(C)3	360,476				CHILD CARE RESOURCE & REFERRAL SERVICES
FRANKLIN GRANVILLE VANCE SMART START INC PO BOX 142 HENDERSON, NC 27536	56-2045172	501(C)3	33,100				CHILD CARE RESOURCE & REFERRAL SERVICES

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

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ALBEMARLE ALLIANCE FOR CHILDREN AND FAMILIES 1403 PARKVIEW DRIVE ELIZABETH CITY, NC 279096533	56-2088109	501(C)3	242,338				CHILD CARE RESOURCE & REFERRAL SERVICES
LITTLE ENGINE ACADEMY BRAGTOWN LLC 2713 N ROXBORO RD DURHAM, NC 27704	26-3045658		13,596				CHILD CARE SUBSDIY
WEAVER DAIRY COMMUNITY 124 WEAVER DAIRY RD CHAPEL HILL, NC 27514	56-2036228		11,337				CHILD CARE SUBSDIY

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

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LITTLE PEOPLE DAY CARE CENTER INC 1020 S MIAMI BLVD HWY 70 EAST STE 117 DURHAM, NC 27703	01-0735991		154,431				CHILD CARE SUBSIDY
SPANISH FOR FUN ACADEMY 1001 S COLUMBIA ST CHAPEL HILL, NC 27514	02-0551351		45,783				CHILD CARE SUBSIDY
BRIGHT HORIZONS CHILDRENS CENTERS LLC 1012 SLATER RD DURHAM, NC 27703	04-2949680		15,538				CHILD CARE SUBSIDY

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ESTES CHILDREN'S COTTAGE LLC 200 N ESTES DRIVE CHAPEL HILL, NC 27514	04-3838824		6,569				CHILD CARE SUBSIDY
GREAT HORIZONS PRESCHOOL 5755 N ROXBORO RD DURHAM, NC 27712	16-1700728		12,134				CHILD CARE SUBSIDY
HARVEST LEARNING CENTER 7518 MONTIBILLO PARKWAY DURHAM, NC 27713	20-1775548		36,138				CHILD CARE SUBSIDY

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CHILDREN'S CAMPUS SOUTHPOINT 7317 FAYETTEVILLE RD DURHAM, NC 27713	20-2610878		60,430				CHILD CARE SUBSIDY
KIDS LEARNING CENTER 4210 HWY 55 DURHAM, NC 27713	20-5272135		10,012				CHILD CARE SUBSIDY
TEACH A LOT INC 123 HILLSPRING LANE DURHAM, NC 27713	26-0343063		16,057				CHILD CARE SUBSIDY

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D&S BRANNON ENTERPRISES LLC 1326 HILL STREET DURHAM, NC 27707	26-1231397		9,309				CHILD CARE SUBSIDY
JUMPING JACKS ACADEMY 3325 GUESS RD DURHAM, NC 27705	26-2742914		70,477				CHILD CARE SUBSIDY
CHILD CARE MATTERS INC 825 A NORTH ESTES DRIVE CHAPEL HILL, NC 27514	26-3994822		24,398				CHILD CARE SUBSIDY

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THE LITTLE SCHOOL 301 COLLEGE PARK RD HILLSBOROUGH, NC 27278	27-1453280		10,717				CHILD CARE SUBSIDY
THE LEARNING GARDEN 3816 SW DURHAM DRIVE DURHAM, NC 27707	27-1589381		21,114				CHILD CARE SUBSIDY
LEARNING AND BEYOND LLC 5300 FAYETTEVILLE ST DURHAM, NC 27713	27-1815228		18,359				CHILD CARE SUBSIDY

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TCHUM 3 LLC 515 E WINMORE AVE CHAPEL HILL, NC 27516	27-3701120		23,927				CHILD CARE SUBSIDY
SHINING STARZ ACADEMY INC 323 CRAWFORD ROAD HILLSBOROUGH, NC 27278	33-1208662		7,798				CHILD CARE SUBSIDY
APPLE LEARNING 1162 MARTIN LUTHER KING JR BLVD CHAPEL HILL, NC 27514	45-4499088		13,517				CHILD CARE SUBSIDY

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7 HILLS LEARNING LLC 501 EAST BARBEE CHAPEL ROAD CHAPEL HILL, NC 27517	46-1367823		30,814				CHILD CARE SUBSIDY
PRESLEYBROOKE ACADEMY INC 1577 MUNNS ROAD CREEDMOOR, NC 27522	46-5356292		7,975				CHILD CARE SUBSIDY
LITTLE WONDERS CHILD CARE SERVICES LLC PO BOX 21102 DURHAM, NC 27703	47-1286315		16,238				CHILD CARE SUBSIDY

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LAKEWOOD COMMUNITY PRESCHOOL 1912 CHAPEL HILL RD DURHAM, NC 27707	47-3338679		128,468				CHILD CARE SUBSIDY
PATTIE G BROWN ENTERPRISES DBA BROWN'S EARLY LEARNING SCHOOL 2724 ATLANTIC ST DURHAM, NC 27707	51-0420486		58,872				CHILD CARE SUBSIDY
SCARBOROUGH NURSERY SCHOOL 309 N QUEEN ST DURHAM, NC 27701	56-0543233		13,443				CHILD CARE SUBSIDY

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CHAPEL HILL DAY CARE CENTER 401 KILDAIRE ROAD CHAPEL HILL, NC 27516	56-0891967		12,148				CHILD CARE SUBSIDY
COMMUNITY SCHOOL FOR PEOPLE UNDER 6 102 HARGRAVES STREET CARRBORO, NC 27510	56-0961645	501(C)3	27,616				CHILD CARE SUBSIDY
TODDLER'S ACADEMY INC 2811 BEECHWOOD DR DURHAM, NC 27707	56-1124558		15,098				CHILD CARE SUBSIDY

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PBLA INC 203 GRAY RD CHOCOWINITY, NC 27817	56-1126550		236,593				CHILD CARE SUBSIDY
LITTLE LEARNERS DAY CARE CENTER 711 BERWYN AVE DURHAM, NC 27704	56-1256125		7,623				CHILD CARE SUBSIDY
STITH LORRAINE J 618 HOPE AVE DURHAM, NC 27707	56-1301919		18,618				CHILD CARE SUBSIDY

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TOTSLAND PRESCHOOL 644 WEST OLD COUNTY ROAD BELHAVEN, NC 27810	56-1317252		104,097				CHILD CARE SUBSIDY
CREATIVE SCHOOLS INC 2139 VALLEYGATE DRIVE SUITE 203 FAYETTEVILLE, NC 28304	56-1469260		15,774				CHILD CARE SUBSIDY
THE LEARNING CENTER-CHOCOWINITY 884 HWY 33 E CHOCOWINITY, NC 27817	56-1623388		6,000				CHILD CARE SUBSIDY

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THE ECONOMIC DEVELOPMENT LEARNING CENTER 884 HWY 33E CHOCOWINITY, NC 27817	56-1623388		33,758				CHILD CARE SUBSIDY
NEW LIFE CHRISTIAN CENTER INC 7415 FAYETTEVILLE RD DURHAM, NC 27713	56-1661138		8,352				CHILD CARE SUBSIDY
OCRACOCKE CHILD CARE PO BOX 284 OCRACOCKE, NC 27960	56-1769766		8,000				CHILD CARE SUBSIDY

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WESTMINISTER SCHOOLS INC 110 KINGSTON DRIVE CHAPEL HILL, NC 27514	56-1933908		40,195				CHILD CARE SUBSIDY
CHAPEL HILL KEHILLAH 1200 MASON FARM RD CHAPEL HILL, NC 27514	56-1976536		23,307				CHILD CARE SUBSIDY
TREASURES OF JOY INC 3500 S ALSTON AVE PO BOX 13526 DURHAM, NC 27713	56-1991365		85,423				CHILD CARE SUBSIDY

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YATES BAPTIST CHILD DEVELOPMENT CENTER 2819 CHAPEL HILL RD DURHAM, NC 27707	56-1998354		6,871				CHILD CARE SUBSIDY
ASKORP INC DBA PRIMARY COLORS EARLY LEARNING CENTER 3008 DIXON RD DURHAM, NC 27707	56-2089271		171,181				CHILD CARE SUBSIDY
TRIANGLE DAY CARE CENTER 1301 RIDDLE RD DURHAM, NC 27713	56-2097524		171,844				CHILD CARE SUBSIDY

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SMITH VANESSA 805 CAMDEN AVE DURHAM, NC 27701	56-2113995		10,607				CHILD CARE SUBSIDY
MCLOUGHLIN CLAUDIA 806 CHRISTOPHER RD CHAPEL HILL, NC 27514	56-2151245		6,091				CHILD CARE SUBSIDY
21ST CENTURY CHILD CARE INC 108 E PILOT ST DURHAM, NC 27707	56-2174088		7,170				CHILD CARE SUBSIDY

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BEAUTIFUL BEGINNINGS CHILD CARE CENTER PO BOX 21397 DURHAM, NC 27703	56-2194699		100,425				CHILD CARE SUBSIDY
VICTORIOUS DAY CARE & PRESCHOOL ACADEMY 2116 PAGE ROAD DURHAM, NC 27703	56-2224945		24,675				CHILD CARE SUBSIDY
ALL MY CHILDREN CHILD CARE CENTER 5307 PARTRIDGE ST DURHAM, NC 27704	56-2239129		9,619				CHILD CARE SUBSIDY

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KING'S KIDS CHILD DEVELOPMENT CENTER 1914 NC HWY 55 DURHAM, NC 27707	56-2257644		43,370				CHILD CARE SUBSIDY
BUTTERFLY KISSES ACADEMY 3627 GUESS RD DURHAM, NC 27705	56-2331611		17,023				CHILD CARE SUBSIDY
WHITE ROCK CHILD DEVELOPMENT CENTER 3400 FAYETTEVILLE STREET DURHAM, NC 27707	56-6001764		55,052				CHILD CARE SUBSIDY

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CHAPEL HILL COOP PRES INFTOD 106 PUREFOY ROAD CHAPEL HILL, NC 27514	56-6022921	501(C)3	27,976				CHILD CARE SUBSIDY
KIDDIE WORLD CHILD DEVELOPMENT CENTER INC 548 HWY US 13/17 SOUTH WINDSOR, NC 27983	58-1839453		35,725				CHILD CARE SUBSIDY
CHAPEL HILL TRAINING OUTREACH PROJECT INC 800 EASTOWNE DRIVE CHAPEL HILL, NC 27514	58-2046321		9,242				CHILD CARE SUBSIDY

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KINDER CARE LEARNING CENTERS LLC 203 KILMAYNE DRIVE CARY, NC 27511	63-0941966		5,956				CHILD CARE SUBSIDY
CHILD DEVELOPMENT SCHOOLS 921 RUBY STREET DURHAM, NC 27704	63-0986576		610,343				CHILD CARE SUBSIDY
CHRISTIAN PREP ACADEMY 1405 E NC HWY 54 DURHAM, NC 27713	68-0633631		123,403				CHILD CARE SUBSIDY

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BULLOCK LISA 3815 BOOKER AVE DURHAM, NC 27713	75-3002156		6,268				CHILD CARE SUBSIDY
GILFILLAN YVETTE 3009 CARDINAL LAKE DRIVE DURHAM, NC 27704	80-0240372		9,189				CHILD CARE SUBSIDY
DEBERRY LOLITA K 904 STENNIS WAY DURHAM, NC 27703	01-0696312		20,390				CHILD CARE SUBSIDY & FOOD PROGRAM

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FAULKS ROBERTA A 4 INEZ CT DURHAM, NC 27713	56-1813404		8,515				CHILD CARE SUBSIDY & FOOD PROGRAM
MEREDITH COLLEGE 3800 HILLSBOROUGH STREET RALEIGH, NC 276075298	56-0530242	501(C)3	15,300				CHILD CARE TEACH PROGRAM
VICTORY VILLIAGE DAY CARE DBA THE UNIVERSITY CHILD CARE CENTER 130 FRIDAY CENTER DR CHAPEL HILL, NC 27517	56-0586172	501(C)3	57,451				CHILD DAY SUBSIDY

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CARE-O-WORLD - CHOCOWINITY 203 GRAY ROAD CHOCOWINITY, NC 27817	56-1126550		18,300				QUALITY ENHANCE
UNIVERSITY OF NORTH CAROLINA AT WILMINGTON 601 S COLLEGE ROAD WILMINGTON, NC 28403	56-1258660	501(C)3	382,656				TEACH EARLY CHILDHOOD PROGRAM
UNIVERSITY OF NC AT GREENSBORO PO BOX 26170 GREENSBORO, NC 274026170	56-6001468	501(C)3	166,542				TEACH EARLY CHILDHOOD PROGRAM

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

2015**Open to Public
Inspection**Name of the organization
CHILD CARE SERVICES ASSOCIATION**Employer identification number**

56-1514058

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 11	THE DIVISION VPS PROVIDE ACCOMPLISHMENTS FOR THE YEAR TO THE VP OF FINANCE AND HR. ONCE THE 990 IS COMPILED, THE PRESIDENT AND VP OF FINANCE AND HR REVIEW IT AND THEN DISCUSS IT WITH THE AUDIT AND FINANCE COMMITTEE. THE 990 IS THEN SHARED WITH MANAGEMENT AND THE BOARD OF DIRECTORS. ONCE IT HAS BEEN REVIEWED AND APPROVED, THE RETURN IS FILED.
FORM 990, PART VI, SECTION B, LINE 12C	THE CONFLICT OF INTEREST POLICY MUST BE SIGNED ANNUALLY AND ANY CONFLICTS MUST BE DISCLOSED AT THAT TIME.

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 15	IN FY 2012, TO DETERMINE THE REASONABLENESS OF THE EXECUTIVE DIRECTOR'S COMPENSATION, THE VP OF FINANCE AND HR CONDUCTED AN ANALYSIS OF PREVAILING WAGES FOR EXECUTIVE DIRECTORS IN SIMILAR SIZE ORGANIZATIONS WITHIN THE GEOGRAPHIC AREA. THE INFORMATION WAS PROVIDED TO THE BOARD EXECUTIVE COMMITTEE, WHICH SETS THE SALARY FOR THE PRESIDENT. ALL OTHER SALARIES ARE SET BY THE PRESIDENT USING SALARIES AND BENEFITS DATA BY SIMILAR ORGANIZATIONS AND POSITIONS.
FORM 990, PART VI, SECTION C, LINE 19	DOCUMENTS ARE AVAILABLE AT THE ORGANIZATION'S OFFICE UPON REQUEST.

990 Schedule O, Supplemental Information

Return Reference	Explanation
PART XI, FINANCIAL STATEMENTS AND REPORTING, LINE 2C	OVERSIGHT COMMITTEE THE FINANCE AND AUDIT COMMITTEE IS RESPONSIBLE FOR THE OVERSIGHT OF THE AUDIT OF ITS FINANCIAL STATEMENTS AND SELECTION OF AN INDEPENDENT ACCOUNTANT THIS HAS NOT CHANGED FROM THE PRIOR YEAR