CHANGE OF ACCOUNTING PERIOD

Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

Department of the Treasury Internal Revenue Service

► Do not enter social security numbers on this form as it may be made public 70 Information about Form 990 and its instructions is at www.irs.gov/form990.

Open to Public Inspection

A F	or the	2016 calendar year, or tax year beginning DEC 1, 2016 and ending	SEP 30, 2017	
B c	heck if	C Name of organization	D Employer identifi	cation number
\Box	Addres	Child And Family Opportunities, Inc.		
	Name change	Doing business as	01-0	288757
	Initial	Number and street (or P.O. box if mail is not delivered to street address) Room/su		
	Final return/	P.O. Box 648	· ·	667-2995
	termin		G Gross receipts \$	3,788,856.
	Amend		H(a) Is this a group re	
$\overline{}$	Applic		for subordinates	
	pendir	P.O. Box 648, Ellsworth, ME 04605	H(b) Are all subordinates in	حصا حصا
1 1	ax-exe			list (see instructions)
		e: ▶ www.childandfamilyopp.org	H(c) Group exemptio	
				A State of legal domicile: ME
	irt I	Summary		
	1	Briefly describe the organization's mission or most significant activities: To provi	de early chil	dhood
20		services/promote community health in Hancock		
Па	2	Check this box Fig. 1 if the organization discontinued its operations or disposed of m		
Ş.	3	Number of voting members of the governing body (Part VI, line 1a)	3	8
ö	4	Number of independent voting members of the governing body (Part VI, line 1b)	4	8
οğ	5	Total number of individuals employed in calendar year 2016 (Part V, line 2a)	5	148
itie	-6	Total number of volunteers (estimate if necessary)	6	166
Ę	57 a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.
Ž.	۲. ۲	Net unrelated business taxable income from Form 990-T, line 34	7 <u>a</u> 7b	0.
-4	~ <u>-</u>	To valifold addition that it office the control of	Prior Year	Current Year
P	8	Contributions and grants (Part VIII, line 1h)	3,010,377.	2,433,746.
5	9	Program service revenue (Part VIII, line 2g)	702,235.	620,340.
<u> </u>	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	-27,193.	53,317.
<u>E</u>)	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e CENFN	0.	33,317.
₩	12	Total revenue add ince 9 through 11 (must equal Dest)(I)(Galling (A) line 10)	1 2 COE 410	3,107,403.
Expenses CANNE Beyenue	13			292,457.
T.	14	Grants and similar amounts paid (Part IX, column (A), lines 139) AUG 37 2018	424,607.	$\frac{2JZ_1+37}{3}$
	15	Salaries, other compensation, employee benefits (Part IX, column (A) lines 5-10)	Ž 2,936,148.	2,489,311.
Ses	16a	Professional fundraising fees (Part IX, column (A), line 11e)	2,350,140.	0.
pen	l loa	Total fundraising expenses (Part IX, column (D), line 25)	<u>:</u>	
Ä	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	775,466.	601,612.
	Į.	Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)	4,136,221.	3,383,380.
	1	Revenue less expenses Subtract line 18 from line 12	-450,802.	-275,977.
-S		Nevertue 1033 expenses Gubtract linte 10 from linte 12		End of Year
Net Assets or Fund Balances	20	Total assets (Part X, line 16)	Beginning of Current Year 3,248,754.	3,001,546.
Ass	21	Total liabilities (Part X, line 26)	459,198.	328,836.
E E	22	Net assets or fund balances. Subtract line 21 from line 20	2,789,556.	2,672,710.
	art II	Signature Block	<u> </u>	4,014,110.
		Ities of perjury, I declare that I have examined this return, including accompanying schedules and state	tomonte, and to the heet of me	v knowledge and helief it is
		it, and complete. Declaration of prepare Cother than officer) is based on all information of which prepare		y knowledge and belief, it is
true	, 001160	t, and complete. Declaration of prepare quality in an information of which prepare	52	118
c:~	_	Signature of officer	Date 122	110
Sig		Mark Green, Executive Director	54.0	
Her	е	Type or print name and title		
			Date Check	PTIN
Paid	4	Scott E. Nivus, CPA		
	parer	Firm's name Gibson LeClair, LLC		P00476573 45-0512128
	Only	Firm's address 150 Capitol Street, Suite 3	Firm's EIN ▶	42 A2T7T70
J06	Jin	Augusta, ME 04330	Phone no. (2	07) 623-8401
140	the !!	RS discuss this return with the preparer shown above? (see instructions)	j riiune no. (4	
	y the II			X Yes No Form 990 (2016)
U-061				

	t III Statement of Program Service Accomplishments
rai	
<u>`</u>	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission.
	OUR MISSION - Our mission is to provide comprehensive, high-quality
	and community-based early care and education services for young
	children. We closely partner with parents, building upon their innate
	parenting strengths, providing knowledge, active help and
2	Did the organization undertake any significant program services during the year which were not listed on the
	prior Form 990 or 990-EZ?
_	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 X 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 \$ 1,733,070. including grants of \$) (Revenue \$) Head Start is a free preschool program for children ages 3-to-5 years
	until eligible for kindergarten. It is funded through the Administration for Children and Families (ACF), Office of Head Start
	and the State Department of Health and Human Services. Grantees are
	expected to raise 20% of the cost of the program through local contributions of cash or in-kind goods and services. The federal
	program targets children living at or below the federal poverty rate
	but allows enrollment of children from other income levels under strict
	guidelines. At least 10% of children enrolled must have a diagnosed
	disability.
	disability.
	Early Head Start is a program for infants and toddlers until age three
	(Code) (Expenses \$464,655. including grants of \$272,167.) (Revenue \$)
70	Child and Adult Care Food Program, a program of the U.S. Department of
	Agriculture, supports reimbursement for meals served in CFO's centers
	and through sponsorship agreements with about 48 family child care
	providers in Hancock, Washington, Penobscot and Waldo counties. The
	cost of meals is subsidized through this grant based on a family's
	income or eligibility for Head Start/Early Head Start. In exchange,
	providers agree to assure that meals and snacks meet nutritional
	standards. Technical assistance and training on nutrition and CACFP
	requirements are provided by agency staff.
4c	(Code) (Expenses \$543,557. including grants of \$ 26.) (Revenue \$ 495,299.)
	Child Care - CFO offers child care services through a fee for service
	basis. We accept state subsidies from parents who are eligible. We
	also offer a sliding fee scale based on a family's income. Ninety
	children were served throughout the year. Regardless of funding source,
	all children enrolled in CFO's center-based programs are offered the
	comprehensive services associated with Head Start.
4d	Other program services (Describe in Schedule O)
	(Expenses \$ 252,703. including grants of \$ 20,264.) (Revenue \$ 125,041.)
4e	Total program service expenses ► 2,993,985.
	Form 990 (2016)

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Child And Family Opportunities, Inc. Part IV **Checklist of Required Schedules** Yes No Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? 1 If "Yes," complete Schedule A X Is the organization required to complete Schedule B, Schedule of Contributors? X 2 2 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I X 3 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 X 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 X 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 X 6 Did the organization receive or hold a conservation easement, including easements to preserve open space, 7 the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II X 7 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete 8 Schedule D, Part III X 8 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? X If "Yes," complete Schedule D, Part IV 9 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent 10 endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V 10 X if the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, 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, X Part VI 11a 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 X 11b 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 X 11c 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 e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 11e Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses X the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X 11f 12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete X Schedule D, Parts XI and XII 12a b Was the organization included in consolidated, independent audited financial statements for the tax year? X If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional 12b X Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 13 14a Did the organization maintain an office, employees, or agents outside of the United States? X 14a 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 X or more? If "Yes," complete Schedule F, Parts I and IV Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any

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15

16

17

18

X

X

X

X

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17

18

foreign organization? If "Yes," complete Schedule F, Parts II and IV

column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I

1c and 8a? If "Yes," complete Schedule G, Part II

complete Schedule G, Part III

or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV

Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to

Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,

Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"

Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines

4

•			Yes	No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a	100	X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		 -
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? If "Yes," complete Schedule I, Parts I and II	21		x
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? If "Yes," complete Schedule I, Parts I and III	22	X	}
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			}
	Schedule J	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete	1		
	Schedule K. If "No", go to line 25a	24a		X
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? If "Yes," complete Schedule L, Part I	25a		<u>X</u>
þ	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and	[
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete	1 1		
	Schedule L, Part I	25b		<u>X</u>
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or	1		
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes,"	00		v
~	complete Schedule L, Part II	26		<u>X</u>
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	1 1	}	
	of any of these persons? If "Yes," complete Schedule L, Part III	07		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV	27		
20	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a	j	x
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
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? If "Yes," complete Schedule L, Part IV	28c	}	X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30	- {	X
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes, " complete Schedule N, Part I	31		<u>X</u>
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	1 1	}	
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	1 1	- 1	
	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		<u> X</u>
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and	1	{	
	Part V, line 1	34		<u>X</u>
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		<u>X</u> _
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)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?		Ì	v
	If "Yes," complete Schedule R, Part V, line 2	36		<u>X</u>
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	27	ŀ	Y
- 20	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	37		<u>X</u> _
38	Note. All Form 990 filers are required to complete Schedule O	38	x	
		Form		2016)

Par		<u>, , , , , , , , , , , , , , , , , , , </u>		aye C				
,	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	Γ	1.00	110				
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1		}				
	Oddha agaaraahan amah wili baalum wilibalim adaa faraanahali ayaanaa ka wadaa adaa adaba a							
•	(gambling) winnings to prize winners?	1c	х					
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,	- <u></u>						
	filed for the calendar year ending with or within the year covered by this return 2a 148	1		ĺ				
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	х	1				
_	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	_=-						
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	1	x				
	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O	3b						
	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		X				
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).			Ì				
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X				
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X				
-	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		_ -				
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit							
- Cu	any contributions that were not tax deductible as charitable contributions?	6a		х				
h	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		X				
ь	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b						
-	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required							
	to file Form 8282?	7c		X				
d	If "Yes," indicate the number of Forms 8282 filed during the year							
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		х				
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X				
q	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	Spons oring 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						
9	Spons oring organizations maintaining donor advised funds.							
а	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.							
а	Initiation fees and capital contributions included on Part VIII, line 12							
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities							
11	Section 501(c)(12) organizations. Enter							
а	Gross income from members or shareholders							
b	Gross income from other sources (Do not net amounts due or paid to other sources against	` [1					
	amounts due or received from them)	ļ	}	!				
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			!				
13	Section 501(c)(29) qualified nonprofit health insurance issuers.							
а	Is the organization licensed to issue qualified health plans in more than one state?	13a]					
	Note. See the instructions for additional information the organization must report on Schedule O							
b	Enter the amount of reserves the organization is required to maintain by the states in which the	l	}					
	organization is licensed to issue qualified health plans		}					
С	Enter the amount of reserves on hand							
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X				
b	ff "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b						

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

	Check if Schedule O contains a response or note to any line in this Part VI			\mathbf{X}
Sec	tion 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 8			
	If there are material differences in voting rights among members of the governing body, or if the governing			
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			
b	Enter the number of voting members included in line 1a, above, who are independent 1b			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			
	officer, director, trustee, or key employee?	2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors, or trustees, or key employees to a management company or other person?	3	{	X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6	Did the organization have members or stockholders?	6		X
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		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			
	persons other than the governing body?	7b)	X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
	The governing body?	8a	x	
b	Each committee with authority to act on behalf of the governing body?	8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
_	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		X
Sec	tion 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		X
	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	Х	
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	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X	
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	X	
13	Did the organization have a written whistleblower policy?	13	X	
14	Did the organization have a written document retention and destruction policy?	14	X	
15	Did the process for determining compensation of the following persons include a review and approval by independent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	X	
b	Other officers or key employees of the organization	15b		X
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a		-	
	taxable entity during the year?	16a		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation		- 1	
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's		- 1	
	exempt status with respect to such arrangements?	16b		
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed None			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) a	vailab	le	
	for public inspection. Indicate how you made these available. Check all that apply			
	X Own website Another's website X 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	finan	cial	
	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:			
	Mark Green, Executive Director - 207-667-2995			
	P.O. Box 648, Ellsworth, ME 04605			

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Part VII	Compensation of Office	ers, Directors,	Trustees, Key Employee	s, Highest Con	npensated						
	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, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

Name and Title Average hours per week (list any hours for related organizations below line) (1) Walter Kumiega (2) Elizabeth Ehrlenbach Director (3) Dr. H. Lori Schnieders Director (4) Chris Huh Director (4) Chris Huh Director (5) Jim Schatz Director (6) Charles Rudelitch Average hours per hours per than one box, unless person is both from theoux, unless person is both from theox, unless person is both from the compensation from related compensation from the organizations (W-2/1099-MISC) (8) Estimated amount of other compensation from related organizations (W-2/1099-MISC) (8) Average hours per than one box, unless person is both in the organization (W-2/1099-MISC) (8) Average hours per than one box, unless person is both in the organization (W-2/1099-MISC) (8) Average hours per than one box, unless person is both in the organization from the organization (W-2/1099-MISC) (8) Average hours person is both in the organization (W-2/1099-MISC) (8) Elizabeth Ehrlenbach Director (9) Average hours person is both in the organization (W-2/1099-MISC) (1) Walter Kumiega 1.00 X X X D 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0.	Check this box if neither the organization nor any related (A) (B)						.,pe		(D)	(E)	(F)
hours per week (list arry hours for related organizations below line) The the organizations below line) The the organizations (W-2/1099-MISC) W-2/1099-MISC) W-2/1099-M					Pos	itior			l .	}	i e
Comparison Com	ramo ana mo	_							· '		
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Chair		· ·	10 to:	22		}	ated	}	. •	(W-2/1099-MISC)	
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Chair	(1) Walter Kumiega	1.00				Γ					
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1.00 X 0. 0. 0. 0.	Director		X		X				0.	0.	0.
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1.00 X 0.	(4) Chris Huh	1.00									
Director	Director	<u> </u>	X		<u> </u>	_			0.	0.	0.
(6) Charles Rudelitch 1.00 X X 0. 7,772. 0.	(5) Jim Schatz	1.00		Ì)				
Vice Chair X X X 0. 0. 0. (7) Charley Martin-Berry 1.00 X X 0. 0. 0. Secretary X X 0. 0. 0. 0. (8) Charles Harrington 1.00 X 0. 0. 0. 0. Director X 0. 0. 0. 0. 0. 0. (9) Doug Orville 40.00 X 93,909. 0. 7,772. 0. 7,772. (10) Grant Lee 40.00 X 0. 0. 0. 0. Former Interim Executive Director X 0. 0. 0. 0. (11) Mark Green 40.00 0. 0. 0. 0. 0.	Director		X		<u> </u>	L			0.	0.	0.
(7) Charley Martin-Berry 1.00 Secretary X X 0. 0. 0. (8) Charles Harrington 1.00 X 0. 0. 0. Director X 0. 0. 0. 0. (9) Doug Orville 40.00 X 93,909. 0. 7,772. (10) Grant Lee 40.00 X 0. 0. 0. Former Interim Executive Director X 0. 0. 0. 0. (11) Mark Green 40.00 0. 0. 0. 0. 0.	(6) Charles Rudelitch	1.00				1					
X X 0. 0. 0. 0.	Vice Chair		X	;	X	<u> </u>			0.	0.	0.
(8) Charles Harrington 1.00 Director X (9) Doug Orville 40.00 Former Executive Director X (10) Grant Lee 40.00 Former Interim Executive Director X (11) Mark Green 40.00	(7) Charley Martin-Berry	1.00								_	_
Director X 0. 0. 0. (9) Doug Orville 40.00 X 93,909. 0. 7,772. Former Executive Director X 93,909. 0. 7,772. (10) Grant Lee 40.00 X 0. 0. 0. Former Interim Executive Director X 0. 0. 0. 0.		 	X		X	├			0.	0.	0.
(9) Doug Orville Former Executive Director (10) Grant Lee Former Interim Executive Director (11) Mark Green 40.00 X 93,909. 0. 7,772.	• • • • • •	1.00				1			•		•
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(10) Grant Lee Former Interim Executive Director (11) Mark Green 40.00 X 0. 0. 0.	_	40.00	}		٠,	1			03 000		7 770
Former Interim Executive Director X 0. 0. (11) Mark Green 40.00		40.00	├		<u> </u>	\vdash			93,909.	<u> </u>	1,114.
(11) Mark Green 40.00		40.00	}		v				0	0	0
		40 00	-	-	≏			\vdash	<u>U.</u>	· · · · · · · · · · · · · · · · · · ·	<u> </u>
Executive Director		40.00			v				0	n	0
	Executive Director	 		-	<u> </u>	-			<u> </u>		<u> </u>
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Child And Family Opportunities, Inc.

01-0288757

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Form 990 (2016)

Form 990 (2016)

1 .

<u> </u>		Check if Schedule O con	itains a response	or note to any lir	ne in this Part VIII			
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	Revenue excluded from tax under sections 512 - 514
ats	1 a	Federated campaigns	. 1a					
Contributions, Gifts, Grants and Other Similar Amounts	b	Membership dues	1b					
	c	Fundraising events	1c					
	o	Related organizations	1d					
	е	Government grants (contribu	tions) 1e 2,	381,505.				
	f	A11 11	•					
		similar amounts not included abo		52,241.				
Ēδ	g	Noncash contributions included in line						
Sel	_	Total. Add lines 1a-1f	- · · · · · · · · · · · · · · · · · · ·		2,433,746.			
				Business Code				
8	2 a	Client/Program	Fees	624200	495,299.	495,299.		
اه څ	b	·						
용립	c							
e a	d	l						
Program Service Revenue	е							
۲	f	All other program service rev	enue	900099	125,041.	125,041.		
	g	Total, Add lines 2a-2f			620,340.			
	3	Investment income (including	dividends, intere	est, and				
}		other similar amounts)		>	50,531.			50,531.
Î	4	Income from investment of ta	x-exempt bond p	roceeds 🕨				L
ļ	5	Royalties		•				
}			(i) Real	(II) Personal	}	}		}
1	6 a	Gross rents						}
- 1	b	Less. rental expenses]
]	С	Rental income or (loss)	L	İ				1
ł		Net rental income or (loss)					·	
{	7 a	Gross amount from sales of	(i) Securities	(II) Other		1		1
[assets other than inventory	684,239.			{		ĺ
	b	Less: cost or other basis		{		1		
}		and sales expenses	681,453.					ļ
	C	Gain or (loss)	2,786.	l				
- 1	ď	Net gain or (loss)		, _ _	2,786.			2,786.
e l	8 a	Gross income from fundraising	ng events (not	}	1	ł		
2		including \$	of	}		1		
ě		contributions reported on line	e 1c). See	}				
Other Revent		Part IV, line 18	а					
툿	b	Less: direct expenses	b	L				
١		Net income or (loss) from fund		_				
}	9 a	Gross income from gaming a	ctivities. See]		
		Part IV, line 19	а	ļ		}		
	b	· · · · · · · · · · · · · · · · · · ·	. b	L		1		
		Net income or (loss) from gan	-					
	10 a	Gross sales of inventory, less	returns	1		}		
		and allowances	a					
	_	Less: cost of goods sold	p					
	c	Net income or (loss) from sale	es of inventory					
		Miscellaneous Revenu	Je	Business Code		1		
	11 a			ļ	 			
	b							
	c							
	d	All other revenue		Li				
	е	Total. Add lines 11a-11d		>				
	12	Total revenue. See instructions.		<u></u>	3,107,403.	620,340.	0.	
63200	9 11-1	1-16						Form 990 (2016)

Secti	on 501(c)(3) and 501(c)(4) organizations must com			omplete column (A).	
	Check if Schedule O contains a respoi	nse or note to any line in (A)	this Part IX (B)	(C)	
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22	292,457.	292,457.		
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	115,811.	102,711.	12,968.	132.
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	1,854,185.	1,644,449.	207,617.	2,119.
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits	335,697.	297,346.	37,956.	395.
10	Payroll taxes	183,618.	162,647.	20,755.	216.
11	Fees for services (non-employees)				
а	Management			1	
ь	Legal	327.	327.		
С	Accounting	22,564.	378.	22,186.	
d	Lobbying				
e	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
a	Other. (If line 11g amount exceeds 10% of line 25,				
9	column (A) amount, list line 11g expenses on Sch O.)	26,483.	17,050.	9,433.	
12	Advertising and promotion				
13	Office expenses	27,558.	19,232.	7,604.	722.
14	Information technology	36,538.	32,148.	4,102.	288.
15	Royalties				
16	Occupancy	52,609.	49,992.	2,510.	107.
17	Travel	49,720.	47,312.	2,395.	13.
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	1			
19	Conferences, conventions, and meetings				
20	Interest	3,502.	110.	3,392.	
21	Payments to affiliates	-,			
22	Depreciation, depletion, and amortization	81,252.	70,794.	10,152.	306.
23	Insurance	14,658.	6,545.	8,093.	20.
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.)				
_	R&M/Minor equip.	98,975.	87,491.	11,083.	401.
a	Food	64,420.	64,290.	130.	401.
b	Staff Training	36,935.	33,553.	3,377.	5.
C	Educational materials	34,009.	33,998.	11.	<u>J.</u>
d		52,062.	31,155.	20,078.	829.
	All other expenses Total functional expenses. Add lines 1 through 24e	3,383,380.	2,993,985.	383,842.	5,553.
25	Joint costs. Complete this line only if the organization	2,202,300.	4,333,303.	303,044.	٠, ٥٥٥٠
26	reported in column (B) joint costs from a combined	!	}		
	•				
	educational campaign and fundraising solicitation.	1			
	Check here if following SOP 98-2 (ASC 958-720)				5 000 000

Par	7	Balance Sneet			
		Check if Schedule O contains a response or note to any line in this Part X			
			(A) Beginning of year		(B) End of year
	1	Cash · non-interest-bearing	519.	1	673.
Ì	2	Savings and temporary cash investments	10,763.	2	
-	3	Pledges and grants receivable, net	173,966.	3	124,154.
Ì	4	Accounts receivable, net	43,451.	4	37,525.
	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	i i		
		employers and sponsoring organizations of section 501(c)(9) voluntary	I		
v,		employees' beneficiary organizations (see instr) Complete Part II of Sch L		6	
Assets	7	Notes and loans receivable, net		7	
As	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges	23,420.	9	17,759.
	10a	Land, buildings, and equipment, cost or other			
		basis Complete Part VI of Schedule D 10a 3,131,575.			
	b	Less: accumulated depreciation 10b 1,983,471.	1,222,511.	10c	1.148.104.
	11	Investments · publicly traded securities	1,725,826.	11	1,148,104. 1,626,652.
	12	Investments - other securities See Part IV, line 11		12	2702070320
	13	Investments - program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets See Part IV, line 11	48,298.	15	46,679.
	16_	Total assets. Add lines 1 through 15 (must equal line 34)	3,248,754.	16	3,001,546.
	17	Accounts payable and accrued expenses	247,321.	17	150,911.
	18	Grants payable		18	
	19	Deferred revenue	186,877.	19	177,925.
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability Complete Part IV of Schedule D		21	
S	22	Loans and other payables to current and former officers, directors, trustees,			
iţie]	key employees, highest compensated employees, and disqualified persons		- {	
Liabilities	ł	Complete Part II of Schedule L		22	
۳	23	Secured mortgages and notes payable to unrelated third parties	25,000.	23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third			
	}	parties, and other liabilities not included on lines 17-24). Complete Part X of	}]	
	ł	Schedule D		25	
	26	Total liabilities. Add lines 17 through 25	459,198.	26	328,836.
		Organizations that follow SFAS 117 (ASC 958), check here ▶ X and			
ý	}	complete lines 27 through 29, and lines 33 and 34.	}	ł	
nce	27	Unrestricted net assets	2,289,556.	27	2,172,710.
<u>a</u>	28	Temporanly restricted net assets		28	
g p	29	Permanently restricted net assets	500,000.	29	500,000.
Ë	}	Organizations that do not follow SFAS 117 (ASC 958), check here			
ଦ	}	and complete lines 30 through 34.		-	
ts	30	Capital stock or trust principal, or current funds		30	
SSE	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
Net Assets or Fund Balances	32	Retained earnings, endowment, accumulated income, or other funds		32	
ž	33	Total net assets or fund balances	2,789,556.	33	2,672,710.
	34	Total liabilities and net assets/fund balances	3,248,754.	34	3,001,546.

orm	990 (2016) Child And Family Opportunities, Inc.	01	-0288	757	Pa	ge 12
	t 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	3	,10'	7,4	03.
2	Total expenses (must equal Part IX, column (A), line 25)	2	3	, 38:	3,3	80.
3	Revenue less expenses Subtract line 2 from line 1	3		-27	5,9	77.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	2	,789	9,5	56.
5	Net unrealized gains (losses) on investments	5		159	9,1	31.
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	2	,672	2,7	10.
Pa	t XII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII		<u>-</u>			
					Yes	No
1	Accounting method used to prepare the Form 990.					
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	0		}		1
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?			2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a		1 1		1
	separate basis, consolidated basis, or both.			[[1
	Separate basis Consolidated basis Both consolidated and separate basis		i			
þ	Were the organization's financial statements audited by an independent accountant?			2b	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat	e basıs	j ,			}
	consolidated basis, or both					
	X Separate basis Consolidated basis Both consolidated and separate basis					}
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audit	,			}
	review, or compilation of its financial statements and selection of an independent accountant?		_	2c	<u>X</u>	
	If the organization changed either its oversight process or selection process during the tax year, explain in Schr					
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sir	igle Au	ort		17	}
	Act and OMB Circular A-133?			3a	<u>X</u>	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ	red au	dit	_	7.5	}
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits			3b	X	
				Form :	99U	(2016)

SCHEDULE A

Department of the Treasury

Internal Revenue Service

(Form 990 or 990-EZ)

Public Charity Status and Public Support

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

Attach to Form 990 or Form 990-EZ.

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

2016

Open to Public Inspection

Name of the organization Employer identification number Child And Family Opportunities. 01-0288757 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 12, 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)) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 3 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, 4 city, and state. An organization operated for the benefit of a college or university owned or operated by a governmental unit described in 5 section 170(b)(1)(A)(iv). (Complete Part II) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 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.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: 10 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) An organization organized and operated exclusively to test for public safety. See section 509(a)(4), 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 limes 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12e, 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. 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. 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. 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. 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 Enter the number of supported organizations Provide the following information about the supported organization(s) (iv) is the organization listed (i) Name of supported (ii) EIN (iii) Type of organization (v) Amount of monetary (vi) Amount of other in your governing document? (described on lines 1-10 organization support (see instructions) support (see instructions) Yes No above (see instructions))

Schedule A (Form 990 or 990-EZ) 2016 Child And Family Opportunities, Inc. 01-0288757 Page 2

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.)

Se	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not	}]			}
	ınclude any "unusual grants.")	3.048.227.	3,229,570,	3,031,505,	3,010,377.	2,433,746.	14.753.425.
2	Tax revenues levied for the organ-	[
	ızatıon's benefit and either paid to			{			
	or expended on its behalf					_	
3	The value of services or facilities	1					
	furnished by a governmental unit to	}	}	{			
	the organization without charge						
4	Total. Add lines 1 through 3	3,048,227.	3,229,570,	3,031,505,	3,010,377.	2,433,746.	14,753,425.
5	The portion of total contributions						
	by each person (other than a	[ĺ	į			
	governmental unit or publicly	1	ŀ				
	supported organization) included	}	Ì				
	on line 1 that exceeds 2% of the	1		İ			
	amount shown on line 11,	1	}				
	column (f)]					•
6	Public support. Subtract line 5 from line 4						14 753 425
	ction B. Total Support						14,733,423.
Cale	ndar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
	Amounts from line 4	3.048.227.	3,229,570.	3,031,505,	3,010,377.	2,433,746.	14,753,425,
8	Gross income from interest,						11,700,120,
	dividends, payments received on	{	1	-			
	securities loans, rents, royalties	1	{	1			
	and income from similar sources	46,076.	35,579.	39,889.	20,872.	53.317.	195,733.
9	Net income from unrelated business						2307.000
Ť	activities, whether or not the	į l		Į.			
	business is regularly carried on	}	}	{	j		
10	Other imcome Do not include gain						
	or loss from the sale of capital	ļ		1		ļ	
	assets (Explain in Part VI.)			1	{	}	
11	Total support. Add lines 7 through 10						14,949,158.
	Gross receipts from related activities,	etc (see instructio	ns)			12 3	,716,427.
	First five years. If the Form 990 is for			fourth or fifth tax	ו vear as a section:		7,20,22,0
	organization, check this box and stor			,, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	, your do a 500thon	, 00 ((0)(0)	
Se	ction C. Computation of Publ	ic Support Per	centage				
14	Public support percentage for 2016 (I	ine 6, column (f) div	rided by line 11, co	olumn (f))	}	14	98.69 %
15	Public support percentage from 2015	Schedule A, Part I	I, line 14		1	15	98.93 %
16a	33 1/3% support test - 2016. If the c	organization did not	check the box on	line 13, and line 14	4 is 33 1/3% or m	ore, check this bo	
	stop here. The organization qualifies					•	$\triangleright \mathbf{x}$
t	33 1/3% support test - 2015. If the o	organization did not	check a box on lir	ne 13 or 16a, and li	ne 15 is 33 1/3%	or more, check th	
	and stop here. The organization quali					r	▶□
17a	10% -facts-and-circumstances test	t - 2016. If the orga	inization did not ch	neck a box on line	13, 16a, or 16b, a	nd line 14 is 10%	or more,
	and if the organization meets the "fac						
	meets the "facts-and-circumstances"						▶ □
ŧ	10% -facts-and-circumstances test				•	7a, and line 15 is	10% or
	more, and if the organization meets th						
	organization meets the "facts-and-circ				•		
18	Private foundation. If the organizatio						3 ▶□
						dula A /Form 000	

Schedule A (Form 990 or 990-EZ) 2016 Child And Family Opportunities, Inc. 01-0288757 Page 3
Part | Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 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 **(b)** 2013 Calendar year (or fiscal year beginning in) (a) 2012 (c) 2014 (e) 2016 (d) 2015 (f) Total 1 Gifts, grants, contributions, and membership fees received. (Do not incluide 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 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 **(ந்)** 2013 Calendar year (or fiscal year beginning in) (a) 2012 (c) 2014 (d) 2015 (e) 2016 (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 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on 12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI) 13 Total support. (Add lines 9, 10c, 11, and 12") 14 First five years. If the Form 990, is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here. Section C. Computation of Public Support Percentage 15 Public support percentage, for 2016 (line 8, column (f) divided by line 13, column (f)) % 15 16 Public support percentage from 2015 Schedule A, Part III, line 15 16 % Section D. Computation of Investment Income Percentage 17 Investment income percentage for 2016 (line 10c, column (f) divided by line 13, column (f)) 17 % 18 Investment income percentage from 2015 Schedule A, Part III, line 17 18 % 19a 33 1/3% support fests - 2016. 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 - 2015. 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

15

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Schedule A (Form 990 or 990-EZ) 2016

Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on Part I If you checked 12a of Part I, complete Sections A and B If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V)

Section A. All Supporting Organizations

- 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.
- 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).
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.
- **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.
- 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.
- 4a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.
- **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.
- 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.
- 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).
- **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?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) 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.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- B Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7?
 If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 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.
- **b** Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.
- c Did a disqualified person (as defined in line 9a) 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.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below
 - 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.)

	Yes	No
1_1_	ļ	
		}
2	 	
3a		
3b	<u> </u>	
3c		
4a		
4b		
40		
4c		
5a		
5b_		
5c		
6		
7		
8		
9a		
9b		
9c		
10a		
10b		

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Pai	t IV Supporting Organizations (continued)		T.,	Γ
	Hee the organization accepted a gift or contribution from any of the following persons?	[Yes	No
11_	Has the organization accepted a gift or contribution from any of the following persons? A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)		}	
а	below, the governing body of a supported organization?	110		
.	A family member of a person described in (a) above?	11a 11b	├	
_	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.	11b	 	 -
	tion B. Type I Supporting Organizations	110	J	ــــــ
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to		1.55	1
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			ļ
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or	}		ł
	controlled the organization's activities. If the organization had more than one supported organization,			ļ
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported		1	
	organ izations and what conditions or restrictions, if any, applied to such powers during the tax year	1_1_		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in	}		
	Part VI how providing such benefit carned out the purposes of the supported organization(s) that operated,	1]	
	supervised, or controlled the supporting organization.	2		<u> </u>
<u>Sec</u>	tion C. Type II Supporting Organizations		,	
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors	İ		
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control	1		
	or marnagement of the supporting organization was vested in the same persons that controlled or managed			
<u></u>	the supported organization(s)	1_1_	<u>. </u>	
<u> </u>	tion D. All Type III Supporting Organizations		1	
_	Did this arrangetion provide to each of its supported exampleations, by the last day of the fifth month of the	Γ	Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax]		
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the		1	
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1	ł	
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
~	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how		}	
	the organization maintained a close and continuous working relationship with the supported organization(s).	2	} }	
3	By reason of the relationship described in (2), did the organization's supported organizations have a	 		
_	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3	}	
Sec	tion E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the yea(see instruction	s).		
а	The organization satisfied the Activities Test Complete line 2 below.			
þ	The organization is the parent of each of its supported organizations. Complete line 3 below.			
C	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see	ınstructions	<u>}. </u>	
2	Activities Test. Answer (a) and (b) below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of	1	1	
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify		! !	
	those supported organizations and explain how these activities directly furthered their exempt purposes,		{	
	how the organization was responsive to those supported organizations, and how the organization determined	1	1	
	that these activities constituted substantially all of its activities.	2a		
b			1	
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the			
	reasons for the organization's position that its supported organization(s) would have engaged in these			
	activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer (a) and (b) below.	1 1		
а				
	trustees of each of the supported organizations? Provide details in Part VI.	3a	\vdash	
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b	L	0040

Par	t V Type III Non-Functionally Integrated 509(a)(3) Supporting			01-0288/5/ Page 6
1	Check here if the organization satisfied the Integral Part Test as a qualifyin			Part VI) See instructions A
•	other Type III non-functionally integrated supporting organizations must co			, art vily occ mon actions, re
Secti	on 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	7-7		
	collection of gross income or for management, conservation, or	1 1		
	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		
Secti	on B ~ Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see	1		
	instructions for short tax year or assets held for part of year)			
а	Average monthly value of securities	1a		
	Average monthly cash balances	1b		
	Fair market value of other non-exempt-use assets	1c		
	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other	7		
	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,	7		
	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	Minim um Asset Amount (add line 7 to line 6)	8		
Sect	on 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	Distrib utable 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-functional	y integrate	ed Type ill supporting org	anization (see

instructions)

Sche Par	t V Type III Non-Functionally Integrated 509			01-0288757 Page 7
Ļ—-	on D - Distributions	startor supporting org	amzations (continued)	Current Year
<u>3601</u> 1	Amounts paid to supported organizations to accomplish exe	emnt nurnoses		Current rear
2	Amounts paid to perform activity that directly furthers exemp			
_	organizations, in excess of income from activity	pr purpodes or supported		
3	Administrative expenses paid to accomplish exempt purpos	es of supported organization	ns	
_ 5 _	Amounts paid to acquire exempt-use assets			
_ - -	Qualified set-aside amounts (prior IRS approval required)			
_ _	Other distributions (describe in Part VI) See instructions			
	Total annual distributions. Add lines 1 through 6			
8	Distributions to attentive supported organizations to which to	he organization is responsiv		
•	(provide details in Part VI). See instructions	organization to reopension	-	
9	Distributable amount for 2016 from Section C, line 6			
10	Line 8 amount divided by Line 9 amount			
		(i)	(ii)	(iti)
		Excess Distributions	Underdistributions	Distributable
Secti	on E - Distribution Allocations (see instructions)		Pre-2016	Amount for 2016
1	Distributable amount for 2016 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2016 (reason-			
-	able cause required-explain in Part VI). See instructions			
3	Excess distributions carryover, if any, to 2016.			
а				
b				
	From 2013			
	From 2014			
	From 2015			
	Total of lines 3a through e			
	Applied to underdistributions of prior years			
	Applied to 2016 distributable amount			
i	Carryover from 2011 not applied (see instructions)			
i	Remainder Subtract lines 3g, 3h, and 3i from 3f			
4	Distributions for 2016 from Section D,			
	line 7. \$			
a	Applied to underdistributions of prior years			
b	Applied to 2016 distributable amount			
	Remainder, Subtract lines 4a and 4b from 4			
5	Remaining underdistributions for years prior to 2016, if			
	any. Subtract lines 3g and 4a from line 2. For result greater			
	than zero, explain in Part VI See instructions			
6	Remaining underdistributions for 2016. Subtract lines 3h			
	and 4b from line 1. For result greater than zero, explain in			
	Part VI. See instructions			
7	Excess distributions carryover to 2017. Add lines 3j			
_	and 4c		<u> </u>	
8	Breakdown of line 7:			
а				
	Excess from 2013			
c	Excess from 2014			
	Excess from 2015			
	Excess from 2016			

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.)
Part II, Short Year Explanation:
Short year for change in accounting period.
~

SCHEDULE D

(Form 99O)

Department of the Treasury internal Revertue 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.lrs.gov/form990.

2016
Open to Public Inspection

Name of the organization

Child And Family Opportunities, Inc.

Employer identification number 01-0288757

Schedule D (Form 990) 2016

Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the Part I organization answered "Yes" on Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year Aggregate value of contributions to (during year) 2 Aggregate value of grants from (during year) 3 Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or education) Preservation of a historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last 2 day of the tax year Held at the End of the Tax Year Total number of conservation easements 2a Total acreage restricted by conservation easements 2b Number of conservation easements on a certified historic structure included in (a) 2c Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register 2d Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax Number of states where property subject to conservation easement is located Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? 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. Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Part iii 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 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide 2 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 Assets included in Form 990, Part X

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

		nd Family			0:-:1	01 - 02	8875	7 Pa	age 2
Par									
3	Using the organization's acquisition, accessi	on, and other record	s, check any of the	following that are a	significant	use of its	collectio	n items	S
	(check all that apply):		г 1.						
а	Public exhibition	d		hange programs					
b	Scholarly research	е	L Other						
C	Preservation for future generations								
4	Provide a description of the organization's co					ose in Par	t XIII.		
5	During the year, did the organization solicit of				ar assets	_	-		1
·=-	to be sold to raise funds rather than to be m						Yes		No
Par	t IV Escrow and Custodial Arran		te if the organizatio	n answered "Yes" o	n Form 990	D, Part IV,	line 9, oi	r	
	reported an amount on Form 990, Pa		 _						
1a	Is the organization an agent, trustee, custod	ian or other intermed	iary for contribution	is or other assets no	t included	Γ	- 1		1
	on Form 990, Part X?	• •				L	_ Yes	<u> </u>	No
b	If "Yes," explain the arrangement in Part XIII	and complete the fol	lowing table:						
							Amoun	<u>t</u>	
	Beginming balance				1c				
	Additions during the year				1d				
е	Distributions during the year				_1e				
f	Ending balance				1f				
	Did the organization include an amount on F				•		_ Yes	╘	No
_	If "Yes," explain the arrangement in Part XIII.					_ •		لــــا	
Par	t V Endowment Funds. Complete				$\overline{}$				
		(a) Current year	(b) Prior year	(c) Two years back	(d) Three	ears back	(e) Four	r years t	<u>pack</u>
1a	Beginraing of year balance	694,734.	619,871.	611,593.	5	69,215.	ļ	525	<u>924.</u>
b	Contributions .						ļ		
C	Net investment earnings, gains, and losses	95,063.	77,366,	12,349.		46,370.	ļ	47	<u>917.</u>
d	Grants or scholarships						ļ		
е	Other expenditures for facilities				1				
	and programs								
f	Admin istrative expenses		2,503.	4,071,		3,992,		4	<u>626.</u>
g	End of year balance	789,797,	694,734.	619,871,	6	11,593.		569	<u>215.</u>
2	Provide the estimated percentage of the curr	rent year end balanc	e (line 1g, column (a	i)) held as [.]					
а	Board designated or quasi-endowment		_%						
	Permanent endowment	%							
С	Temporarily restricted endowment ▶	%							
	The percentages on lines 2a, 2b, and 2c sho								
За	Are there endowment funds not in the posse	ssion of the organiza	ition that are held ai	nd administered for	the organiz	ation	r	 -	
	by [.]							Yes	No
	(i) unrelated organizations						3a(i)		<u>X</u>
	(ii) related organizations						3a(ii)		X
þ	If "Yes" on line 3a(ii), are the related organization	· ·					3b		
4_	Describe in Part XIII the intended uses of the		wment funds.						
Pai	t VI Land, Buildings, and Equipm								
	Complete if the organization answere								
	Description of property	(a) Cost or of			Accumulate		(d) Bool	k value)
		basis (investin			epreciation	$-oldsymbol{\perp}$			
1a	Land	<u> </u>		7,361.				7,36	
	Buildings	<u> </u>	$\frac{2,61}{}$	<u>6,433.</u> <u>1,</u>	601,2	23.	1,01	<u>5,21</u>	LO.
	Leasehold improvements			5 504	226	10		= = =	
d	Equipment			7,781.	382,2	48.	1	5,53	<u> 33.</u>
	Other					_	1 1/1		
-	LAJJUGOO TA HAYAUGA TA (Columb (d) muct o	aud Larm DDA Dart	v aatumaa (D) lina 1	/IA 1				- 11	1/1

Schedule D (Form 990) 2016

Schedule D (Form 990) 2016 Child And F Part VII Investments - Other Securities.	amily Opport	unities, In	c. 01	-0288757 Page 3
Complete if the organization answered "Yes"				
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of vi	aluation Cost or end	d-of-year market value
(1) Financial derivatives	 			
(2) Closely-held equity interests				
(3) Other	<u> </u>			
(A)		 		
(B)	<u> </u>			
(C)				
(D)		 		
(E)		 		
(F) (G)				
(H)		 		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)		+	· · · · · · · · · · · · · · · · · · ·	
Part VIII Investments - Program Related.	——————————————————————————————————————			
Complete if the organization answered "Yes" (a) Description of investment				1 - 4
	(b) Book value	(c) Method of Va	luation Cost or end	l-of-year market value
<u>(1)</u>				
(2)				
(3)				
(4)		+		
<u>(5)</u> (6)		+		
(7)				
(8)				
(9)		 		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ▶ Part IX Other Assets. Complete if the organization answered "Yes"	on Form 990. Part IV lin	a 11d See Form 990 J	Part V line 15	
	Description	e i id See Point 990, i	art A, line 15	(b) Book value
(1)				
(2)				
(3)	· · · · · · · · · · · · · · · · · · ·	·		
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
Total. (Column (b) must equal Form 990, Part X, col. (B) line	15.)			
Part X Other Liabilities.	5 000 D 1871	44 446 5		
Complete if the organization answered "Yes" (a) Description of liability	on Form 990, Part IV, lin	e 11e or 11f. See Form (b) Book value	990, Part X, line 25	:
<u></u>		(b) BOOK Value		
(1) Federal income taxes				
(2)				
(3)				
(4)				
(5)				
<u>(6)</u>				
(7)				
(8)				
Total. (Column (b) must equal Form 990, Part X, col. (B) line	25)			
1 otal. (Column to minist equal 1 of the 350, Part X, col. (b) line		to the organization's fi	nancial etetemorte t	hat rangets the

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Schedule D (Form 990) 2016

organization's liability for uncertain tax positions under FIN 48 (ASC 740) Check here if the text of the footnote has been provided in Part XIII

	dule D (Form 990) 2016 Child And Family Opportuni		01-	0288757 Page 4
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a			••
4	Total revenue, gains, and other support per audited financial statements			3,646,859.
1	Amounts included on line 1 but not on Form 990, Part VIII, line 12.		1	3,040,033.
2	Net unrealized gains (losses) on investments	2a _ 159,131.		
a			-	
b	Donated services and use of facilities	2b 380,325.	-	
С	Recoveries of prior year grants	2c	∤ ∫	
d	Other (Describe in Part XIII.)	2d	-	
е			2e	539,456.
3	Subtract line 2e from line 1		3	3,107,403.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	I f	1	
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	1	
b	Other (Describe in Part XIII.)	4b]]	
C	Add lines 4a and 4b		4c	0.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		5	3,107,403.
Pa	rt XII Reconciliation of Expenses per Audited Financial Statem	ents With Expenses per	Retu	rn.
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.	<u> </u>		
1	Total expenses and losses per audited financial statements		1	3,763,705.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25.			
а	Donated services and use of facilities	2a 380,325.		
b	Prior year adjustments	2b	1	
c	Other losses	2c	1	
d	Other (Describe in Part XIII.)	2d	1	
e	Add lines 2a through 2d		2e	380,325.
3	Subtract line 2e from line 1		3	3,383,380.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1.			3733373331
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
a b	Other (Describe in Part XIII)	4b	1	
0	Add lines 4a and 4b	401	40	n
-	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)		4c 5	3,383,380.
5 Pa	rt XIII Supplemental Information.		3	3,303,300.
ч—-	ide 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: Dort	V line 2 Port VI
	2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any add		4, Fait	A, 11116 Z, Fait AI,
Pa:	rt X, Line 2:			
Th	e Corporation is exempt from federal income	e tax under Sect	ion	501(c)(3)
<u>ot</u>	the Internal Revenue Code. In addition,	the Corporation	qua.	lifies for
<u>th</u>	e charitable contribution deduction under	Section 170(b)(1)(a)	and has
<u>be</u>	en classified as an organization other than	n a private foun	<u>dat</u>	ion under
Se	ction 509(a)(1). Management believes it h	as no uncertain	tax	positions
<u>wi</u>	th the Internal Revenue Service that requi	re disclosure in	its	s financial
st	atements. The Corporation's federal Return	n of Organizatio	n Ex	kempt from
In	come Tax (Form 990) for 2016, 2015, and 20	14 are subject t	o ez	<u>kamination</u>
bу	the IRS, generally for three years after	they were filed.		

Schedule D	Cupplemental I	nformation (continued	"	itumities,	1110. 01	-U288/5/ Page 5
Part Alli	Supplemental	mormation (continued	<u>1)</u>			
						
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			<u> </u>			
						

SCHEDULE (Form 990) Department of the Treasury Internal Revenue Service

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

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

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

▶ Attach to Form 990.

OMB No 1545-0047

Open to Public Inspection

Name of the organization Child And	Child And Family Opportunities Inc.	AR THG			-	Employer identification number 01-0288757
Part I General Information on Grants and Assistance	and Assistance	722				
1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection	to substantiate the amount of the grant	ts or assistance, the	grantees' eligibility	for the grants or ass	istance, and the select	:
criteria used to award the grants of assistance? 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.	istance?	otel out a specific	30			A Yes No
ar II	Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990. Part IV, line 21, for any	tic Governments, C	omplete if the ords	Inization answered "Y	es" on Form 990. Part	IV. line 21. for any
recipient that received more than	recipient that received more than \$5,000. Part II can be duplicated if additional space is needed	litional space is need	per			
1 (a) Name and address of organization or government	(b) EIN (c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
 Enter total number of section 501(c)(3) and government organizations Enter total number of other organizations listed in the line 1 table 	tions	listed in the line 1 table				

Schedule I (Form 990) (2016)

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

(f) Description of noncash assistance (e) Method of valuation (book, FMV, appraisal, other) The Day Care Center recipients of USDA food reimbursements each have signed Reports and monitoring are made as required and necessary to Part IV Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information. 0.Actual Cost agreements and provide services which conform to federal and state (d) Amount of non-cash assistance 292,457 (c) Amount of cash grant 20 (b) Number of assure compliance with grant requirements. recipients Day Care Homes Provider CACFP USDA Meal (a) Type of grant or assistance Part I, Line 2: requirements. Reimbursements

Schedule I (Form 990) (2016)

27

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Page 2

01-0288757

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.

Child And Family Opportunities, Inc.

Schedule I (Form 990) (2016)

Part III

SCHEDULE 0 (Form 990 or 990-EZ)

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

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Child And Family Opportunities,

Employer identification number 01-0288757

Form 990, Part III, Line 1, Description of Organization Mission:
encouragement, mentoring opportunities for community-based
intergenerational support and learning experiences. We build
collaborative relationships with others in our communities who impact
the lives of young children and their families. We advocate for
policies and resources to support young children and their families.
OUR VISION - We envision a future in Downeast Maine where all children
and their families are able to thrive through the support and
encouragement of a strong web of parents, families, and other engaged
adults. Parents are empowered to make healthy choices for themselves
and their families. Within our programs and with others we create a
community environment in which families and children flourish.
Form 990, Part III, Line 4a, Program Service Accomplishments:
and is also funded through the Federal office of ACF. Child and Family
Opportunities receives its Early Head Start funding through a contract
with the State of Maine. Eligibility guidelines are the same as the
Federal Head Start program.
Our funded enrollment for the Head Start programs served a total of 259
children in our center-based services.
Form 990, Part III, Line 4d, Other Program Services:
For a complete list of services and locations, please see our website
at www.childandfamilyopp.org.

Form 990, Part VI, Section B, Line 15a:

Anti-Fraud policy procedures.

The Human Resource Manager and the Personnel Committee of the Board of
Directors review compensation data at least every three years for

Name of the organization Child And Family Opportunities, Inc.	Employer identification number 01-0288757								
comparable positions at organizations in the area. Specis	Eic data sources								
may include:									
> Specific market rate report for each position at a non-	-profit								
organization in Maine with a budget of approximately \$5 million.									
> Wage comparability studies conducted by CFO and other	regional Head Start								
agencies									
> Maine Association of Non-Profits Annual Wage Study - "Non-Profit Wages									
and Benefits in Northern New England"									
CFO seeks not to lead or lag the market but rather offer	compensation at								
about the 50th percentile for similar organizations with	an operating								
budget of \$5 million. This approach allows CFO to compete for highly									
qualified individuals and still maintain salary costs wit	hin an affordable								
range.									
Form 990, Part VI, Section C, Line 19:									
CFO grants access to copies of all required forms/data by	request as								
follows:									
> By providing for visual inspections of required documen	its to anyone								
personally appearing at the organization's administrative	offices during								
normal working hours and making such a request;									
> By responding to all written requests within 7 days by	mailing copies of								
the requested forms;									
> CFO may meet the federal requirements to make its forms	widely available								
by posting all required forms on the CFO website and refe	rring all								
requesters to this site within 7 days of receipt of any r	equest for copies.								
Additionally, CFO posts information required to be availa	ble under IRS								
section 501(c)(3) on GuideStar.									

	Schedule O (Form 990 or 990-EZ) (2016) Page								Page 2
Name o	f the orgar		hild And	d Family	Opportu	nities,	Inc.	Employer ide	ntification number
				·					
Form	990,	Part :	XI, Line	e 2c_	-				
No,	the p	rocess	has no	t change	ed from t	he prior	year.		
									
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