Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

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

▶ Go to www.irs.gov/Form990 for instructions and the latest information.

Open to Public Inspection

Α	For the	2018 calendar year, or tax year beginning	g 10/01	, 2018, an	d ending	09/	30	, 20 19	
В	Check if a	applicable: C Name of organization ZERO TO	THREE - NATIONA	L CENTER FOR IN	VEANTS T	ODDLERS	D Employe	er identification n	umber
	Address	change Doing business as						52-1105189	
	Name ch	ange Number and street (or P.O. box if	mail is not delivered to s	street address)	Room/suite		E Telephor		
П	Initial retu			*		1	•	202-638-1144	
\Box		n/terminated City or town, state or province, co		n postal code				202-030-1144	
П	Amended	To the total and	,,	, p		11	G Gross re	oninta C	
\exists		on pending F Name and address of principal offi	cer: Matthew E Me	lmod		The same of the sa			1,325,077
	Application	1255 23rd Street NW Suite 350				The compact is provided and a transfer		subordinates? Yes s included? Yes	
_	Tay ayar	npt status: 501(c)(3) 501(c)			7.507			s included? 🔲 Yes ee instructions)	□ No
<u>:</u>	Website:		() (insert no.,	☐ 4947(a)(1) or ☐	527	-	331	100	
K	111111111111111111111111111111111111111	rganization: Corporation Trust Association	iation Other ►	I Van	of formation	H(c) Group			
_	art I	Summary	lation Unter	L Year	of formation	1977	M State	of legal domicile:	DC
	A STATE OF THE PERSON NAMED IN		olon or most signif		7500 70				
ø		Briefly describe the organization's mis							t all
Activities & Governance		babies and toddlers have a strong start		parents, professio	nals and j	policymake	rs the kn	owledge and	
rna		know-how to nurture early development							
SVe		Check this box ▶☐ if the organization					1 1	its net assets.	
ğ		Number of voting members of the gov					3	·	26
S		Number of independent voting member					4		25
itie		Total number of individuals employed					5		209
cţi		Total number of volunteers (estimate i					6		25
A		Total unrelated business revenue from					7a		26,865
<u> </u>	b	Net unrelated business taxable incom-	e from Form 990-T	, line 38			7b		0
						Prior Yea	ar	Current Ye	ear
Revenue		Contributions and grants (Part VIII, line				46,	733,531	36	,422,109
	9	Program service revenue (Part VIII, line	e 2g)	x x x x x x x		4,	030,552	4	,296,925
ě	10	Investment income (Part VIII, column (A), lines 3, 4, and 7	7d)			702,064		911,241
ш	11	Other revenue (Part VIII, column (A), lir	nes 5, 6d, 8c, 9c, 1	0c, and 11e) .			507,743		683,444
	12	Total revenue—add lines 8 through 11	(must equal Part VI	II, column (A), line	12)	51,	973,890	42	,313,719
	13	Grants and similar amounts paid (Part	IX, column (A), line	es 1-3)			0		0
	14	Benefits paid to or for members (Part	IX, column (A), line	4)			0		0
S	15	Salaries, other compensation, employee	benefits (Part IX, c	olumn (A), lines 5-	-10)	21,	149,140	22	,655,186
Expenses	16a	Professional fundraising fees (Part IX,	column (A), line 1	le)			0		0
cbe	b ·	Total fundraising expenses (Part IX, co	olumn (D), line 25)	614,	388		and the same		-
ũ	1	Other expenses (Part IX, column (A), li				24,	957,551	25	,002,525
	0.000	Total expenses. Add lines 13-17 (mus		0.00.00.00.00.00.00.00.00.00.00.00.00.0			106,691		,657,711
	1000000	Revenue less expenses. Subtract line					867,199		,343,992
or es		•				inning of Cur		End of Ye	
ets	20	Total assets (Part X, line 16)			🗀	63.	491,197	57	,581,514
Net Assets or Fund Balances	21						076,935	200	,008,550
Fee	22	Net assets or fund balances. Subtract	line 21 from line 2	0	–		414,262	192	,572,964
	art II	Signature Block					,		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
Un	der penalt	ies of perjury, I declare that I have examined this	return, including accor	npanving schedules a	and stateme	nts, and to th	e best of m	v knowledge and	belief, it is
		and complete. Declaration of preparer (other tha						,	
	4	PORA					2/14	120	
Sig	ın	Signature of officer				Date	9	1	
He		Matthew E Melmed, Executive Dire	ector						
		Type or print name and title							
_	: -1	Print/Type preparer's name	Preparer's signature		Date		Charle F	PTIN	
Pa			3				Check L self-emp		
	eparer	and the second s				Firm'	s EIN ▶		
US	e Only	Firm's address >				Phor			
Ma	v the IR	S discuss this return with the preparer	shown above? (ea	e instructions)	200 400 400 400	Phon	IC IIU.	Yes	i ∏ No
IVIA	y une ma	J discuss this retain with the preparer	51.0WIT above: (56	o manuonona)					00 (0042)

Part I	-	_
	Check if Schedule O contains a response or note to any line in this Part III	<u>1</u>
1	Briefly describe the organization's mission:	
	ZERO TO THREE's mission is to ensure that all babies and toddlers have a strong start in life. We provide parents, professionals	
	and policymakers the knowledge and know-how to nurture early development. At ZERO TO THREE we envision a society that has	
	the knowledge and will to support all infants and toddlers in reaching their full potential.	
		_
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?	
	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 b	
	expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others	ì,
	the total expenses, and revenue, if any, for each program service reported.	
		_
4a	(Code:) (Expenses \$13,912,846 including grants of \$0) (Revenue \$0)	
	National Center on Early Childhood Development, Teaching, and Learning (NC ECDTL). NC ECDTL is a federally-funded national	
	training and technical assistance (T/TA) center operating under a five-year grant aimed at impacting the training and technical	
	assistance needs of Head Start and Child Care programs and systems. The goal of NC ECDTL is to identify, develop, and promote	
	the implementation of evidence-based practices that are culturally and linguistically responsive and lead to positive child outcomes	
	across early childhood programs and to support strong professional development systems. ZERO TO THREE is responsible for	
	setting the direction for the center, providing overall project and fiscal management, managing and guiding the work of the center	_
	subcontractors, and delivering T/TA services to Head Start and Child Care constituents. During FY19, NC ECDTL developed	
	resources and training to support the implementation of evidence-based practices and ongoing professional development in Head	
	Start programs and across state systems. Highlighted activities include the development and dissemination of 129 unique	
	resources; translation of 96 documents into Spanish; and delivery of virtual and face-to-face training in every ACF region for	
	approximately 38,000 people. NC ECDTL continues to extend reach and impact for a wide variety of Head Start and child care	
	(Continued on Schedule O, Statement 2)	
4b	(Code:) (Expenses \$ 8,291,589 including grants of \$ 0) (Revenue \$ 311,476)	-
70	HealthySteps. HealthySteps is an evidence-based program of ZERO TO THREE. HealthySteps transforms the promise of pediatric	
	primary care through a unique team-based approach that integrates a HealthySteps Specialist, a child development expert, into	
	the health care team. All children ages 0-3 and their families receive a tiered model of services, from universal screening to	
	risk-stratified supports, including care coordination and onsite intervention, as needed. HealthySteps practices serve as trusted	
	and valuable partners as families foster their children's healthy development. Our national network has grown 23% year-over-year	
	since 2017, significantly outperforming our projected 5%. In 2019, we added 27 new sites, including two new military bases, in 3	
	new states bringing our reach to 164 locations across the country. 250 HealthySteps Specialists implemented the program across	
	the national network, collectively serving more than 200,000 children. Together, the national network of HealthySteps sites aims to	
	reach more than 1 million young children and families annually by 2032. Visit healthysteps.org for more information.	
	(O. I	
4c	(Code:) (Expenses \$ 8,082,179 including grants of \$ 0) (Revenue \$ 1,100)	
	Policy Center. The ZERO TO THREE Policy Center is a non-partisan, research-based resource for federal and state policymakers	
	and advocates on the unique developmental needs of infants and toddlers. The Policy Center brings to bear ZERO TO THREE's	
	research-based expertise on infant-toddler development to ensure public policies reflect best practices and current research in	
	support of our nation's very young children. The Policy Center promotes good health, strong families and positive early learning	
	experiences for all infants and toddlers, with special emphasis on those from overburdened and under-resourced families and	
	communities, in its day-to-day work and through its annual State of Babies Yearbook initiative comparing national and	
	state-by-state data on the well-being of infants and toddlers. ZERO TO THREE's Think BabiesTM campaign aims to bring	
	nationwide attention to what babies and families need to thrive, including quality, affordable child care, time for parents to bond	
	with their babies, healthy emotional development, and strong physical health and nutrition. The campaign's signature event,	
	Strolling ThunderTM, brings babies and families to Washington, DC and state capitals across the country to meet with their	
	elected officials and urge them to invest in babies, toddlers and families.	
4d	Other program services (Describe in Schedule O.) See Schedule O, Statement 3	-
7u		
40		_
4e	Total program service expenses ► 45,687,943	

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Form 99	90 (2018)			Page
Part	V Checklist of Required Schedules			
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"		Yes	No
2	complete Schedule A	2	~	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3	*	~
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	,	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		v
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		,
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		v
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		v
9	Did the organization report an amount in Part X, line 21, for escrew or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV.	9		v
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	~	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	~	
þ	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		~
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		v
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	~	\vdash
f 40-	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	~	
12a	Schedule D, Parts XI and XII	12a	~	
b 13	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	12b		V
14a	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13 14a	~	<u>ا ا</u>
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV.	14b	~	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		_
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV.	16		~
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		,
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II.	18		~
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		~
20 a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		V

b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?

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

20b

Form 99	3 (2018)			Page 4
Part	V Checklist of Required Schedules (continued)			
	•		Yes	No
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		v
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	v	
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 Schedule K. If "No," go to line 25a	24a		,
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		<u> </u>
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		<u> </u>
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		~
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		v
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II	26		,
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27	*******	v
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):	And And	and the same	*****
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		~
Ь	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		,
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	v	
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		~
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		,
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		•
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		,
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		,
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		,
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		~
ь	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? If "Yes," complete Schedule R, Part V, line 2	36		~
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		,
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O.	38	,	
Part				
	Check if Schedule O contains a response or note to any line in this Part V			

					Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a	125			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	0			
С	Did the organization comply with backup withholding rules for reportable payments t	to ven	dors and			
	reportable gaming (gambling) winnings to prize winners?			1c	~	

Part '	V Statements Regarding Other IRS Filings and Tax Compliance (continued)			
			Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax		··	-
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 209		-	-
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b	1	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	ĺ
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b	~	\vdash
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over,			\vdash
та	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		.
ь	If "Yes," enter the name of the foreign country:		· · ·	<u> </u>
_	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a	ĺ	1
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		V
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			\vdash
Va	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		-
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			Ť
U	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).	a Shipper	_	A Secretary
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods	- W 1		Arrest Se
а	and services provided to the payor?	7a		,
b	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	,,,		\vdash
С	required to file Form 8282?	7c		·
d	If "Yes," indicate the number of Forms 8282 filed during the year	TO BE THE		a present
-	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e	- the co	
e f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		~
	If the organization received a contribution of qualified intellectual property, did the organization rile Form 8899 as required?	7g		V
g h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	79 7h	_	~
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the		<u> </u>	+
0	sponsoring organization have excess business holdings at any time during the year?	8		شد.
9	Sponsoring organizations maintaining donor advised funds.	<u> </u>		
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
ь	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	1 4 4	٠	
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . 10b	1		
11	Section 501(c)(12) organizations. Enter:			
	Gross income from members or shareholders			ĺ
b	Gross income from other sources (Do not net amounts due or paid to other sources	1		
Ь	against amounts due or received from them.)		1	
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
,	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b	1.24		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
a	Is the organization licensed to issue qualified health plans in more than one state?	13a	 	†
_	Note. See the instructions for additional information the organization must report on Schedule O.	1.00		1
b	Enter the amount of reserves the organization is required to maintain by the states in which		1	
	the organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand	1		
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a	 	1
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.	14b	\vdash	Ť
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			T
.5	excess parachute payment(s) during the year?	15		.
	If "Yes," see instructions and file Form 4720, Schedule N.			
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		1
	If "Yes." complete Form 4720. Schedule O.	<u> </u>		+

Part '	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. S			
	Check if Schedule O contains a response or note to any line in this Part VI			 []
Section	on 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 1a 26			
	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			, .1
	committee, explain in Schedule O.			
b	Enter the number of voting members included in line 1a, above, who are independent . 1b 25			12484
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	v	
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		٧
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		~
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		V
6	Did the organization have members or stockholders?	6		~
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		~
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		~
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			
	the year by the following:			
a	The governing body?	8a	<u> </u>	<u> </u>
b	Each committee with authority to act on behalf of the governing body?	8b	~	<u> </u>
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		~
Secti	on B. Policies (This Section B requests information about policies not required by the Internal Reven	ue C		
	Prince of the first of the second of the sec	[46-	Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	~	
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		
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	~	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done.	12c	1	
13	Did the organization have a written whistleblower policy?	13	١	
14	Did the organization have a written document retention and destruction policy?	14_	٧	
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	-	Ì
b	Other officers or key employees of the organization	15b		V
	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		~
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its			
	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b		
Secti	on C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ► See Schedule O, Statement 4			
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable), 990, and 990-1 (3)s only) available for public inspection. Indicate how you made these available. Check all that apply. V Own website Another's website Upon request Other (explain in Schedule O)	「(Sec	tion (501(c)
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of int financial statements available to the public during the tax year.	erest	policy	, and
20	State the name, address, and telephone number of the person who possesses the organization's books and re Laura W Shiflett, (202)638-1144	cords	>	

- 1	age	7

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. See instructions for the order in which to list the persons above.

☐ Check this box if neither the organization no	r any relate	d orga	aniz	atio	n c	ompe	nsa	ted any current	officer, director,	or trustee.
(A)	(8)				C) Ition			(D)	(E)	(F)
Name and title	Average hours per week	box, to	unles	s pe dad	rson	e than o is both or/trust	an tee)	Reportable compensation from the	Reportable compensation from related	Estimated amount of other compensation
	(list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	from the organization and related organizations
(1) See Additional Data Table	! 	!								
(2)										
(3)										
(4)										
(5)										
(6)		-								
(7)										
(8)] -			
(9)										
(10)		-								
(11)										
(12)										
(13)				1				1.00		
(14)		-	1							

Part	VII Section A. Officers, Directors,	rustees,	Key I	Emi	plo	yee	s, an	a F	lighest Compe	nsated E	mplo	yees (c	contir	nued)
	(A) Name and title		box,	unles er and	Pos neck ss pe	rson	e than o is both or/trust	an :ee)	(D) Reportable compensation from the	(E) Reportable compensation from related		(F) Estimated amount of other compensation		
		per week (list any hours for related lorganizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	organizati (W-2/1099-	ions	fre	om the ization	and
(15) 9	ee Additional Data Table											······································		
(16)														
(17)		*******												
(18)														
(19)		 	-											
(20)		<u> </u>	-							,				
(21)						İ								
(22)					_									
(23)	· · · · · · · · · · · · · · · · · · ·					-								
(24)		••••	_											
(25)			1								*****			
C	Subtotal	VII, Section	n A					>	3,331,116		0			26,182
d 2	Total (add lines 1b and 1c) Total number of individuals (including bu	t not limited						► e) w	3,331.116 ho received mor		0,000		3:	<u> 26,182</u>
	reportable compensation from the organ	ization 🕨						-					Yes	No
3	Did the organization list any former employee on line 1a? If "Yes," complete							mp	loyee, or highes	st comper	nsated	3	1	
4	For any individual listed on line 1a, is the organization and related organizations individual	e sum of re	porta	ble	cor	пре	nsatio	on a s,"	and other compe complete Sche	nsation fro dule J for	om the r such	4	\	-
5	Did any person listed on line 1a receive of for services rendered to the organization									tion or ind	ividua 	5		****
Secti	on B. Independent Contractors							•	- · · · · · ·					•
1	Complete this table for your five hig compensation from the organization. Rep	hest comport	ensat Isatio	ted n fo	ind r the	epe e ca	ndent alenda	r ye	ontractors that i	received r	nore e organ	than \$ nization	100,0 's tax	00 of year.
	(A) Name and business add								(B) Description of ser			(C) Compens		
Frank	Porter Graham Child Dev Inst, UNC, CB 8180), Chapel Hi	II, NC	275	99			Su	brecipient consul	ting	•		1.6	26,533
	d, 4665 Lampson Avenue, Los Alamitos, CA								brecipient consul					68,448
	Care Aware of America, 1515 N Courthouse I			on,	۷A	2220)1	Şu	brecipient consul	ting				27,702
	Inc. 3050 K Street NW, Suite 100, Washingt								nsulting					31,266
	sity of Washington, 12455 Collections Drive					li	tod 4		brecipient consul				1,0	07.103
2	Total number of independent contractor received more than \$100,000 of compensations.							Ų LĪ	nose listed abov	e) wile	andina - m	M. Marrison . 2 4		

FOIL	· VIIII	Check if Schedule C		a ree	nonse or note to	n any line in this	: Part VIII		П
र रहित्र कर	···	CHECK II OCHRUNE C	Contailis	4 100	ponse of flote ii	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512–514
ts ts	1a	Federated campaigns	s	1a	3,511				
Contributions, Gifts, Grants and Other Similar Amounts	b	Membership dues .		1b	0				
ڳ ڳ	c	Fundraising events .		1c	0				
ar /	d	Related organizations		1d	0				
inii inii	е	Government grants (cor		1e	20,146,709	-3.54e ps-93			to the property of the property of
Fior S r	f	All other contributions, g							
章章		and similar amounts not inc	cluded above	1f	16,271,889				
들음	g				0			•	
8 8	h	Total. Add lines 1a-1	f		🛌	36,422,109			
					Business Code				e de la companya de l
Program Service Revenue	2a	Annual conference an	d other mee	tings	900099	2,007,914	1,743,794	21,035	243,085
æ	b	Training and consulting	ng fees		541900	1,603,085	1,603,085	0	0
je,	С	Membership dues			813920	352,432	352,432	0	0
Sen	ď	New parent support H	V training -	DoD	541690	233,643	233,643	0	0
Ē	е	Journal			900004	99,851	94,021	5,830	0
ğ	f	All other program ser	vice revenu	е.		0	0	0	0
Ĕ	g	Total. Add lines 2a-2	?f		>	4,296,925	W 1		
	3	Investment income	(including	divid	ends, interest,				
		and other similar amo	ounts) .		•	889,524	o	0	889,524
	4	Income from investmen	nt of tax-exer	npt bo	ond proceeds►	0	0	0	0
	5	Royalties				52,827	0	0	52,827
			(i) Real		(ii) Personal	a the factor of the control of the factor of	Jan Stranger of Section (Conference Section Sections)	ないないないないというないできないからないからいます。 これが、あっています。またまで、これをおかっています。	en armanen berrinaren eta berrinakoaren 1841 bilarrea (hari berria). Eta bilarrea (hari berrinaria) bilarrea (hari berria) bilarrea (hari berria).
	6a	Gross rents							
	b	Less: rental expenses				1			
	С	Rental income or (loss)		0	0				
	d	Net rental income or			🕨				
	7a	Gross amount from sales of	(i) Securiti	es	(ii) Other				
		assets other than inventory	1,89	7,622	0]			
	b	Less: cost or other basis]]		
		and sales expenses .	1,879	5,905	0	Propher Commence	1		at supplies on a contract
	С	Gain or (loss)	2	1,717	0				
	d	Net gain or (loss) .			<u></u> >	21,717	0	0	21,717
une	8a	Gross income from fu	undraising						
Other Revenue		events (not including \$ of contributions report	od on line 1	0					
e. H			, , ,	-					
ŧ	b	Less: direct expenses	s	. b					Mark Comment of the C
•	1	Net income or (loss) t			events . >	1		<u> </u>	
		Gross income from ga							
		See Part IV, line 19 .		. a	1			į	
	ь	Less: direct expenses	s	. b					
	C	Net income or (loss) t	from gaming	g acti	vities ▶				
	10a	Gross sales of in		ess					
		returns and allowance	es	. a	739,712				
	b	Less: cost of goods s	sold	. b		4			•
	1	Net income or (loss) f				604,259	604,259	0	0
		Miscellaneous F			Business Code				
	11a								·
	b								
	C						l		
	ď	All other revenue .		•		26,358	0	o	26,358
	e	Total. Add lines 11a-			>	26,358	Paralladabaniana, naturtanited transmittallen		
	12	Total revenue. See i				42 313 719		26 865	1 233 511

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A). Check if Schedule O contains a response or note to any line in this Part IX M (B) Program service expenses (D) Fundraising expenses Do not include amounts reported on lines 6b, 7b, (A) Total expenses Management and general expenses 8b, 9b, and 10b of Part VIII. Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 . . . 0 0 2 Grants and other assistance to domestic individuals. See Part IV, line 22 0 0 3 Grants and other assistance to foreign Juna of European School organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 . . . 0 4 Benefits paid to or for members 0 0 5 Compensation of current officers, directors, trustees, and key employees 2,757,225 790,151 1,871,839 95,235 6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 0 O Other salaries and wages 7 2,236,451 193,586 15,824,744 13,394,707 Pension plan accruals and contributions (include 8 section 401(k) and 403(b) employer contributions) 802,828 682,601 110,403 9,824 Other employee benefits 9 1,967,278 1,641,093 301,036 25,149 10 1,303,111 1,049,004 233,257 20,850 11 Fees for services (non-employees): а 0 154,055 208,317 0 Legal 362,372 ь ¢ Accounting 128,570 0 128,570 0 Lobbying d 249,471 249,471 0 0 Professional fundraising services. See Part IV, line 17 e 0 0 Investment management fees 81,631 0 f 81,631 0 Other, (If line 11g amount exceeds 10% of line 25, column g (A) amount, list line 11g expenses on Schedule O.) . . . 17,133,763 16,455,805 665,858 12,100 12 Advertising and promotion 32,886 27,226 3,500 2,160 13 915,750 160,966 Office expenses 1,095,920 19,204 14 Information technology . . . 708,803 314,132 377,337 17,334 15 15,102 15,102 0 0 16 962,784 424,645 39,515 Occupancy 1,426,944 17 2,011,262 1,892,817 96,712 21,733 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 0 n 0 19 Conferences, conventions, and meetings ... 818,361 760,788 54,078 3,495 20 227,902 228,558 656 21 Payments to affiliates 0 0 0 0 22 Depreciation, depletion, and amortization . . 477,363 147,636 323,424 6,303 23 0 72,316 72,316 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.) 61,507 36,395 28,908 Dues, subscriptions 126,810 а Miscellaneous & bad debts b 32,393 32,393 a 0 6,172,658 118,992 C Allocation of mgmt & admin expenses -6,291,650 d All other expenses e Total functional expenses. Add lines 1 through 24e 25 47.657.711 45.687.943 1,355,380 614,388 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ► ☐ if following SOP 98-2 (ASC 958-720)

Part X Balance Sheet

		Check if Schedule O contains a response or	note	to any line in this	s Parl	t X		, 🗀
						(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing				4,312,996	1	1,581,780
	2	Savings and temporary cash investments			Γ	9,633,379	2	9,848,293
	3	Pledges and grants receivable, net				23,776,439	3	20,651,439
	4	Accounts receivable, net ,				1,278,763	4	677,537
	5	Loans and other receivables from current and f						
		trustees, key employees, and highest co			es. 🕒	du Carabanan	la l	
		Complete Part II of Schedule L				0	5	0
Assets	6	Loans and other receivables from other disqualified personal 4958(f)(1)), persons described in section 4958(c)(3)(B), and sponsoring organizations of section 501(c)(9) volunt organizations (see instructions). Complete Part II of Scheduler	and	0	6	،		
SSe	7	Notes and loans receivable, net				0	7	0
ă	8	Inventories for sale or use				319,611	8	288,602
	9	Prepaid expenses and deferred charges				1,265,147	9	1,259,349
	10a	Land, buildings, and equipment: cost or						
		other basis. Complete Part VI of Schedule D	10a	3,434,	,223	niceling and a habit to be selected	(magaza)	The section of a constraint of a section of
	b	Less: accumulated depreciation	10b	2,431,	,563	1,251,320	10c	1,002,660
	11					21,653,542	11	22,271,854
	12	Investments—other securities. See Part IV, line 1				0	12	0
	13	Investments-program-related. See Part IV, line		0	13	0		
	14	Intangible assets	L	0	14	0		
	15	Other assets. See Part IV, line 11				0	15	0
	16	Total assets. Add lines 1 through 15 (must equa				63,491,197	16	57,581,514
	17	Accounts payable and accrued expenses			⊢	6,306,108		5,984,635
	18 19	Grants payable	• •		F	0	18	0
	20	Deferred revenue	⊢	2,292,123	19	1,949,459		
	21	Tax-exempt bond liabilities	⊢	0	20	0		
s	22	Loans and other payables to current and for			<u> </u>	0	21	0
Liabilities	22	trustees, key employees, highest compens						
		disqualified persons. Complete Part II of Schedul		· · · · · · ·	`` `	5	22	
:=	23	Secured mortgages and notes payable to unrelat			⊢	0	23	0
	24	Unsecured notes and loans payable to unrelated			<u> </u>	0	24	0
	25	Other liabilities (including federal income tax, p			ird	0		- 0
		parties, and other liabilities not included on lines						
		of Schedule D				1,478,704	25	1,074,456
	26	Total liabilities. Add lines 17 through 25		<u></u>		10,076,935		9,008,550
w		Organizations that follow SFAS 117 (ASC 958),	, che	ck here 🕨 🔽 a	and			
Š		complete lines 27 through 29, and lines 33 and			· · ·	The given have the end		.,
la l	27	Unrestricted net assets			L	15,570,778	27	13,949,078
Ba	28	Temporarily restricted net assets				37,395,040	28	34,175,442
짇	29	Permanently restricted net assets			L	448,444	29	448,444
Net Assets or Fund Balances		Organizations that do not follow SFAS 117 (ASC 95) complete lines 30 through 34.	8), ch	eck here ► 📋 a	and			
ğ	30	Capital stock or trust principal, or current funds			-		30	
Se	31	Paid-in or capital surplus, or land, building, or equ					31	
₹	32	Retained earnings, endowment, accumulated inc	ome,	or other funds .			32	. "
Š	33	Total net assets or fund balances				53,414,262	33	48,572,964
	34	Total liabilities and net assets/fund balances .				63,491,197	34	57,581,514
								Form 990 (2018)

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rage		~

Part	XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)			42,31	3,719
2	Total expenses (must equal Part IX, column (A), line 25)			47,65	7,711
3	Revenue less expenses. Subtract line 2 from line 1			-5,34	3,992
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))			53,41	4,262
5	Net unrealized gains (losses) on investments			50	2,694
6	Donated services and use of facilities				0
7	Investment expenses				0
8	Prior period adjustments	<u> </u>			0
9	Other changes in net assets or fund balances (explain in Schedule O)	1			0
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line				
	33, column (B))	<u>) </u>		48,57	2,964
Part	XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII	<u> </u>	<u>· ·</u> ,		_ 🗀
	4	г	<u></u>	Yes	No
1	Accounting method used to prepare the Form 990: Cash Accrual Other	<u> </u>			
	If the organization changed its method of accounting from a prior year or checked "Other," explain Schedule O.	חוֹח			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	1	2a		~
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled				T
	reviewed on a separate basis, consolidated basis, or both:	1	· ·		
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis			i	1
þ	Were the organization's financial statements audited by an independent accountant?	. , [2b	~	l
	If "Yes," check a box below to indicate whether the financial statements for the year were audited of	опа 🗍			
	separate basis, consolidated basis, or both:	ļ.	AND STREET	İmpirationi	againg again
	☑ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis	ľ		is many straine. Misting physics and	
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversi-	ight			
	of the audit, review, or compilation of its financial statements and selection of an independent accountar	nt?	2c	~	
	If the organization changed either its oversight process or selection process during the tax year, explain	n in			i
	Schedule O.	Ĺ	arna rimin	i. Akistori bi	nadence di
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forti	h in			
	the Single Audit Act and OMB Circular A-133?		3а	~	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo		i		
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audit	S	3b	~	
			Form	990	(2018)

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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 employees."
- 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.

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

Check this box it fletities the organization no	any relate	Lorgi	ai IIZ			ompe	1130	Ted any curren	I onicer, unecto	, or trustee.
					C) ikion					
(A)	(B)	Position (do not check more than one			one	(D)	(E)	(F)		
Name and Title	Average	box,	unles	s pe	rson	is both	an	Reportable	Reportable	Estimated
	hours per week (list any				_	or/trust		compensation from	compensation from related	amount of other
	hours for	Indivídual trustee or director	Institutional trustee	Officer	Key employee	흵류	Former	the	organizations	compensation
	related organizations	ing in	tutic	ĕ	e ₃	loye toye	₫	organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization
	below dotted	호흑	ornal		₽oy	ig Co		1		and related
	line)	uste	ĮĮ.		ee	per				organizations
) Ö	itee			Highest compensated employee		İ		
						<u>a</u>	ļ			
Paul Spicer	4.00									
President	0.00	~		~				0	0	0
Brenda Jones Harden	4.00									
Vice President & Subject Matter Expert	0.00	~		~				5,600	0	0
Brian A Napack	4.00									
Secretary/Treasurer	0.00	~		~				0	0	0
Ross Thompson	4.00									
Imm Past Pres & Subject Matter Expert	0.00	~		~				2,500	0	0
Walter S Gilliam	2.00									
Chair of Comm & Subject Matter Expert	0.00	~		~				2,200	0	0
Robert Chang	2.00									
Board Member	0.00	~						0	0	0
Abel Covarrubias	2.00									
Board Member (joined 10/18)	0.00	~	ļ					0	0	0
Lia Dean	2.00					ŀ	İ			
Board Member	0.00	~					L	0	a	0
Helen Egger	2.00								:	
Board Member (former as of 10/18)	0.00	~					<u> </u>	0	0	0
Robert N Emde	2.00									
Board Member (former as of 4/19)	0.00	~					_	0	0	0
Chandra Ghosh Ippen	2.00									
Board Member & Author	0.00	~					<u> </u>	1,069	0	0
Mary Margaret Gleason	2.00							į		
Board Member	0.00	7						0	0	0
Donna Levin	2.00									
Board Member	0.00	~						o	0	0
Alicia F Lieberman	2.00									
Board Member, Author, Expert (former as of 10/18	0.00	~						3,540	0	0

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	Position (do not check more than one box, unless person is both an officer and a director/trustee linstitutional trustee or clirector		(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations			
John M Love	2.00								
Board Member & Subject Matter Expert	0.00	~					3,300	0	0
Tammy Mann	2.00								
Board Member (joined 10/18)	0.00	~					0	0	0
Andrew N Meltzoff	2.00						1		
Board Member	0.00	V				<u> </u>	0	0	0
Lisa Mennet	2.00					1			
Board Member	0.00	~		 _			0	0	0
Michelle Meyercord	2.00						•		
Board Member	0.00	~					0	0	0
Catherine Monk	2.00								
Board Member	0.00	~					0	0	0
Ann Pleshette Murphy	4.00								
Board Member (former as of 10/18)	0.00	~					0	0	0
Michael R Olenick	2.00								
Board Member	0.00	~					0	0	0
Jeree H Pawl	2.00								
Board Member (former as of 10/18)	0.00	~					0	0	0
Rizwan Shah	2.00								
Board Member	0.00	٧					0	o	0
Eugene P Stein	2.00						:		
Board Member	0.00	>					0	o	0
Marilyn Stein	2.00								
Board Member	0.00	•					0	0	0
Barbara Thompson	2.00								
Board Member & Subject Matter Expert	0.00	V					1,719	D	0
Ginger Ward	2.00								
Board Member	0.00	١					0	o	0

(A) Name and Title	(B) Average hours per week (list any	box, office	unles er and	Pos neck ss pe d a c	erson direct	e than of is both or/trus	n an tee)	(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other
	hours for related organizations below dotted (ine)	Individual trustee or director	institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
Marcel Wright	2.00									
Board member (joined as of 10/18))	0.00	1							اه	
Charles H Zeanah Jr	2.00	<u> </u>		\vdash	\vdash		<u> </u>			0
Board Member	0.00	V						0	اه	0
Matthew E Melmed	40.00							 	- 9	<u>_</u>
Executive Director	0.00			~			i	1,026,718	اه	141,722
Laura W Shiflett	40.00							1,025,1 (0		141,122
Chief Financial and Adminstrative Officer	0.00			~				222,039	اه	13,288
Myra Jones-Taylor	40.00				T					10,200
Chief Policy Officer	0.00				V			310,316	أه	22,156
Janice Im	40.00									
Chief Program Officer	0.00				V	Į		206,706	o	24,359
Ernestine Benedict	40.00						_			
Chief Communications Officer	0.00				~			182,491	o	17,641
Elise Miller	40.00									
Chief Business Operations Officer (former as of 5/	0.00				~			177,052	o	10,689
Kathleen McEnerny	40.00							· · · ·		
Chief Development Officer	0.00				~			170,937	О	23,446
Rahit Briggs	40.00			_						
National Director, HealthySteps	0.00					~		240,524	o	8,976
Jennifer Tracey	40.00									
Senior Director of Policy & Financing	0.00					~		230,732	o	13,800
Jonathan Goldfinger	40.00									
Former National Director, Healthy Steps (former as	0.00					~	~	210,586	o	18,299
Edima Elinewinga	40.00			i				·		
Chief Technology Officer	0.00					~		184,508	0	2,546
Patricia Cole	40.00								-	
Senior Director of Federal Policy	0.00					~		148,579		29,260

SCHEDULE A (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.

Open to Public Inspection

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

► Go to www.irs.gov/Form990 for instructions and the latest information. Name of the organization Employer identification number ZERO TO THREE - NATIONAL CENTER FOR INFANTS TODDLERS AND FAMILIES TODDLERS and F 52-1105189 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.) 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). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) 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: ☐ An organization that normally receives: (1) more than 331/3% 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 331/3% 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 lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. 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 b 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. C 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) d 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 II, Type III e functionally integrated, or Type III non-functionally integrated supporting organization. Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1–10 above (see instructions))	(iv) Is the organization listed in your governing document?		lines 1–10 listed in your governing support (see		support (see	(vi) Amount of other support (see instructions)
			Yes	No				
(A)								
(B)								
(C)								
(D)								
(E)								
Total								

18

Schedule A (Form 990 or 990-EZ) 2018 Page 2 Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) Part II (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.) Section A. Public Support Calendar year (or fiscal year beginning in) (a) 2014 (b) 2015 (c) 2016 (d) 2017 (e) 2018 (f) Total Gifts. grants, contributions, membership fees received. (Do not include any "unusual grants.") . . . 27,173,335 30,064,383 56,736,189 46,733,531 36,422,109 197,129,547 revenues levied for the organization's benefit and either paid to or expended on its behalf 0 0 0 0 0 0 The value of services or facilities furnished by a governmental unit to the organization without charge 0 n a 0 0 Total. Add lines 1 through 3. . . . 27,173,335 30,064,383 56,736,189 46,733,531 36,422,109 197,129,547 The portion of total contributions by 5 each (other than person governmental unit or supported organization) included on line 1 that exceeds 2% of the amount side owing a but De De Deleva alandra yan Saylin. shown on line 11, column (f) 13,037,041 Public support. Subtract line 5 from line 4 184,092,506 Section B. Total Support (a) 2014 Calendar year (or fiscal year beginning in) **(b)** 2015 (c) 2016 (d) 2017 (e) 2018 (f) Total 7 Amounts from line 4 27,173,335 30,064,383 56,736,189 46,733,531 36,422,109 197,129,547 8 Gross income from interest, dividends. payments received on securities loans, rents, royalties, and income from similar sources 959,309 914,848 644,304 698,916 942,351 4,159,728 Net income from unrelated business activities, whether or not the business is regularly carried on 0 0 0 0 0 0 Other income. Do not include gain or 10 loss from the sale of capital assets (Explain in Part VI.) 3.565 34,240 57,134 13,676 13,727 122,342 Total support. Add lines 7 through 10 11 201,411,617 12 Gross receipts from related activities, etc. (see instructions) 12 18,139,354 13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) Section C. Computation of Public Support Percentage Public support percentage for 2018 (line 6, column (f) divided by line 11, column (f)) 91.4 % 14 Public support percentage from 2017 Schedule A, Part II, line 14 15 15 331/3% support test-2018. If the organization did not check the box on line 13, and line 14 is 331/3% or more, check this 16a b 331/a% support test - 2017. If the organization did not check a box on line 13 or 16a, and line 15 is 331/3% or more, check 17a 10%-facts-and-circumstances test - 2018. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported

b 10%-facts-and-circumstances test - 2017. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly

Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see

Part III 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.)

Secti	on A. Public Support						- · - · · · · · · · · · · · · · · · · ·
Calen	dar year (or fiscal year beginning in) 🕨	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1	Gifts, grants, contributions, and membership fees						
	received. (Do not include any "unusual grants.")				ļ		
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	i					
4	Tax revenues levied for the						
	organization's benefit and either paid to						
	or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to the						
	organization without charge						
6	Total. Add lines 1 through 5						
_	Amounts included on lines 1, 2, and 3						
	received from disqualified persons .						
b	Amounts included on lines 2 and 3						
J	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			<u> </u>			
8	Public support. (Subtract line 7c from	managerije od statute in telepas prober sett Transport de General Statute de General sette	Complete Comments of the Comme		u	Town a commission of the second of the commission of the second of the s	
٠	line 6.)				and the state of t	- Company of Assistance	
Secti	on B. Total Support	<u></u>		L	<u> </u>	L	
	dar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
9	Amounts from line 6	(4) 2014	(3) 2010	10, 2010	(0) 2011	(6) 2010	(i) rotal
10a							
	payments received on securities loans, rents,						
	royalties, and income from similar sources .						
h	Unrelated business taxable income (less						
_	section 511 taxes) from businesses						
	acquired after June 30, 1975			ļ		i	
	Add lines 10a and 10b			<u> </u>			
11	Net income from unrelated business						
••	activities not included in line 10b, whether						
	or not the business is regularly carried on			ļ	-		
12	Other income. Do not include gain or						
14	loss from the sale of capital assets	1					•
	(Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11,	<u> </u>		 			
	and 12.)						
14	First five years. If the Form 990 is for the	L organizatio	l n's first secon	l d third fourth	or fifth tay w	agrige e poetic	n 501/c)/2\
•-1	organization, check this box and stop he	-					, , , ,
Secti	on C. Computation of Public Suppor			. , , , ,			· · · <u>-</u>
15	Public support percentage for 2018 (line			13. column (f)		15	%
16	Public support percentage from 2017 Sci					16	
	on D. Computation of Investment In					1 10 1	
17	Investment income percentage for 2018			ov line 13 colu	mn (fl)	17	%
18	Investment income percentage for 2013					18	%
19a	33 ¹ / ₂₃ % support tests—2018. If the organ						
198	17 is not more than 33½%, check this box						
р.		_	•	•		-	
Ь	331/3% support tests—2017. If the organization 18 is not more than 331/3% check this						
	line 18 is not more than 331/3%, check this		_	,	, .		L
20	Private foundation. If the organization di	o not check a	pox on line 14	. 19a. or 19b. d	cneck this box	and see instru	ctions 🕨 📗

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. A	W	Supporting Organization	ns

- 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?
- 6 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 (as 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).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part 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.)

		12/	
		Yes	No
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Part	Supporting Organizations (continued)			
		2017	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)			
•	below, the governing body of a supported organization?	11a	İ	
b	A family member of a person described in (a) above?	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.	11c		\vdash
	on B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.		no Prop	
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.	2		er an neg
Secti	on C. Type II Supporting Organizations			
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).	••	Yes	No
Secti	on D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (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 organization's governing documents in effect on the date of notification, to the extent not previously provided?	1 1	į	
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		aukangs sahada
Secti	on E. Type III Functionally Integrated Supporting Organizations			
1 a b c 2	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see in the organization satisfied the Activities Test. Complete line 2 below. The organization is the parent of each of its supported organizations. Complete line 3 below. The organization supported a governmental entity. Describe in Part VI how you supported a government entity (Activities Test. Answer (a) and (b) below.	see ins		ions).
a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.	2a		:
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.	2b		Ş
3	Parent of Supported Organizations. Answer (a) and (b) below.			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>Provide details in Part VI.</i>	3a		
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		ļ.

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organical	gan	izations	
1 Check here if the organization satisfied the Integral Part Test as a qualifying			lain in Part VI). See
instructions. All other Type III non-functionally integrated supporting organ	nizat	ions must complete Sec	ions A through E.
Section A—Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	1		
2 Recoveries of prior-year distributions	2		
3 Other gross income (see instructions)	3		
4 Add lines 1 through 3.	4	-	
5 Depreciation and depletion	5		
6 Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7 Other expenses (see instructions)	7		
8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Section B—Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):			
a Average monthly value of securities	1a		
b Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		·
d Total (add lines 1a, 1b, and 1c)	1d		
e Discount claimed for blockage or other factors (explain in detail in Part VI):			
2 Acquisition indebtedness applicable to non-exempt-use assets	2		
3 Subtract line 2 from line 1d.	3		-
4 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).	4		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5		· · · ·
6 Multiply line 5 by .035.	6		
7 Recoveries of prior-year distributions	7		
8 Minimum Asset Amount (add line 7 to line 6)	8		
Section C – Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2 Enter 85% of line 1.	2		• •
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4 Enter greater of line 2 or line 3.	4		" '
5 Income tax imposed in prior year	5		
6 Distributable Amount. Subtract line 5 from line 4, unless subject to	П		
emergency temporary reduction (see instructions).	6		
7 Check here if the current year is the organization's first as a non-functional instructions)	y int	egrated Type III support	ng organization (see

Part	∨ туре п	i Non-Functionally integrated 509(a)(3	j Supporting Organi	zations (continued)	
Secti	on D—Distrib	outions			Current Year
1	Amounts paid	d to supported organizations to accomplish e	exempt purposes	•	
2	Amounts paid organizations	rted			
3		e expenses paid to accomplish exempt purp	oses of supported orga	nizations	
4	Amounts paid				
5	Qualified set-				
6	Other distribu				
7	Total annual	distributions. Add lines 1 through 6.			
8		to attentive supported organizations to which its in Part VI). See instructions.	h the organization is res	ponsive	
9	Distributable	amount for 2018 from Section C, line 6			
10	Line 8 amour	nt divided by fine 9 amount			
Secti	on E—Distrib	oution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2018	(iii) Distributable Amount for 2018
1	Distributable	amount for 2018 from Section C, line 6			
2		utions, if any, for years prior to 2018 cause required—explain in Part VI). See			
3	Excess distril	butions carryover, if any, to 2018			
а	From 2013		·		<u> </u>
b	From 2014				<u> </u>
С	From 2015				The Control of the Co
d	From 2016	<u> </u>	rener no timos fraits described al proper un la company de la company de la company de la company de la company La company de la company de la company de la company de la company de la company de la company de la company d	A conference of the conference	できないというないとなっています。 できないというないとなっていますがらいとなって、 おうち
е	From 2017				
<u>f</u>		3a through e			:
g		iderdistributions of prior years			
<u>h</u>		018 distributable amount	Control of the Contro	the same of the same	
<u> </u>		om 2013 not applied (see instructions)			
		Subtract lines 3g, 3h, and 3i from 3f.		······································	
4	Section D, lin	for 2018 from			
		· · · · · · · · · · · · · · · · · · ·		and the second of the second of the second	
a_		nderdistributions of prior years 118 distributable amount			
b_		Subtract lines 4a and 4b from 4.			.!
		nderdistributions for years prior to 2018, if			'!
5	any, Subtract	t lines 3g and 4a from line 2. For result zero, explain in Part VI. See instructions.			
6		nderdistributions for 2018. Subtract lines 3h line 1. For result greater than zero, explain in instructions.			
7	Excess distrand 4c.	fibutions carryover to 2019. Add lines 3j			:
8	Breakdown c	of line 7:			
a	Excess from	2014			
b		2015			
С		2016			
d		2017			
е	Excess from	2018			

raitvi	Ill, 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.)
Schedule A,	Part II, Line 10 - Other income consists of expense reimbursements, honoraria, and miscellaneous revenue.
-	

• • • • • • • • • • • • • • • • • • •	

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

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

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

▶ Go to www.irs.gov/Form990 for instructions and the latest information.

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

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

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

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

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

• Se	ection 501(c)(4), (5), or (6) orga	anizations: Complete Part III.			
Name	of organization		-	Employer ide	entification number
ZERO	TO THREE - NATIONAL CE	NTER FOR INFANTS TODDLERS	AND FAMILIES TODE	DLERS and F	52-1105189
Part	I-A Complete if th	e organization is exempt u	der section 501	c) or is a section 527	organization.
1	Provide a description o definition of "political car	f the organization's direct and mpaign activities")	indirect political ca	ampaign activities in Pa	rt IV. (see instructions fo
2	Political campaign activit	y expenditures (see instructions	3)		\$
3	Volunteer hours for politi	cal campaign activities (see inst	ructions)		***************************************
Part	I-B Complete if th	e organization is exempt u	nder section 501	(c)(3).	
1		excise tax incurred by the orgar			\$
2		excise tax incurred by organizat			\$
3		ed a section 4955 tax, did it file			🗌 Yes 🔲 No
4a					🗌 Yes 🔲 No
	If "Yes," describe in Part				
Part		e organization is exempt u			1(c)(3).
1	activities	ly expended by the filing orga	nization for section	527 exempt function	\$
2	Enter the amount of the	filing organization's funds convities	tributed to other org	ganizations for section	\$
3	Total exempt function of	expenditures. Add lines 1 and	2. Enter here and	on Form 1120-POL,	\$
4		n file Form 1120-POL for this ye			Yes No
5	Enter the names, address organization made paymethe amount of political co	ses and employer identification ents. For each organization liste ontributions received that were pland or a political action commit	number (EIN) of all s d, enter the amount promptly and directly	ection 527 political organication 527 political organication organications are delivered to a separate	nizations to which the filing nization's funds. Also enter political organization, such
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					

Scl	hedule C (Form s	990 or 990-EZ) 2018					Page 2
P	art II-A	Complete if the organization section 501(h)).	n is exempt u	nder section 5	01(c)(3) and file	d Form 5768 (el	ection under
A	Check ►	if the filing organization belor address, EIN, expenses, and	ngs to an affiliated share of excess	d group (and list lobbying expend	in Part IV each affi itures).	liated group memb	per's name,
В	Check ►	if the filing organization chec	ked box A and "li	mited control" p	ovisions apply.		
			ying Expenditu			(a) Filing	(b) Affiliated
_		(The term "expenditures" m			<u> </u>	organization's totals	group totals
•		bbying expenditures to influence				80,194	
		bbying expenditures to influence				352,280	
		bbying expenditures (add lines 1				432,474	
	d Other ex	xempt purpose expenditures .				47,225,235	
	e Total ex	empt purpose expenditures (add	d lines 1c and 1d)		47,657,709	
	f Lobbyin columns	ng nontaxable amount. Enter s.	the amount fro	m the following	table in both	1,000,000	
		ount on line 1e, column (a) or (b) is	: The lobbying n	ontaxable amoun	t is:		
		\$500,000	20% of the amo				
		0,000 but not over \$1,000,000	-	5% of the excess			*** *** * ***
		000,000 but not over \$1,500,000		0% of the excess			
		500,000 but not over \$17,000,000		i% of the excess o	ver \$1,500,000.		
	Over \$17		\$1,000,000.			transmitter and the other part of the other of the other of the other of the other of the other of the other	क्षेत्रकारा १६० जनगणनाम्
		ots nontaxable amount (enter 25	•			250,000	
		t line 1g from line 1a. If zero or le t line 1f from line 1c. If zero or le				0	
		is an amount other than zero		h or line ti did	· · ·	0	
	reporting	g section 4911 tax for this year?			ne organization		Yes No
	(Some	organizations that made a se See the	separate instru	ction do not have ctions for lines	e to complete all 2a through 2f.)	of the five columi	ns below.
		Lobbying	Expenditures D	During 4-Year A	eraging Period		
	Calend	dar year (or fiscal year beginning in)	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) Total
2		g nontaxable amount	1,000,000	1,000,000	1,000,000	1,000,000	4,000,000
		g ceiling amount of line 2a, column (e))	strate, skipa sa s				6,000,000
	c Total lob	obying expenditures	268,150	284,733	540,556	432,474	1,525,913
		ots nontaxable amount	250,000	250,000	250,000	250,000	1,000,000
		ots ceiling amount of line 2d, column (e))	e e e e e e e e e e e e e e e e e e e			4	1,500,000

6,617

4,577

75,794

f Grassroots lobbying expenditures

Schedule C (Form 990 or 990-EZ) 2018

80,194

1,500,000

167,182

	(election under section 501(h)).		. 1	1	<i>3</i> 0. 1	
	ach "Yes," response on lines 1a through 1i below, provide in Part IV a detailed iption of the lobbying activity.	Yes	No	А	(b) moun	t
1	During the year, did the filing organization attempt to influence foreign, national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:	. 20 52		,	Services	l issorija.
a b	Volunteers?			lja 804. d	P44-35-3	3344
c d	Media advertisements?					
е	Publications, or published or broadcast statements?					
f	Grants to other organizations for lobbying purposes?					
g	Direct contact with legislators, their staffs, government officials, or a legislative body?					
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?					
i	Other activities?	<u> </u>		ļ		
j O-	Total. Add lines 1c through 1i					
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?	e i de significación de la compansión de la compansión de la compansión de la compansión de la compansión de l La compansión de la compansión de la compansión de la compansión de la compansión de la compansión de la compa	4000	!		
b	If "Yes," enter the amount of any tax incurred under section 4912	1974 74	-	<u> </u>		
ď	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?	S. Carrier				····
	III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)	:)(5). (or se	ction		
	501(c)(6).	,,,,				
					Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?			1		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2	<u> </u>	
3	Did the organization agree to carry over lobbying and political campaign activity expenditures from the Complete if the organization is exempt under section 501(c)(4), section 501(c)					
	Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," canswered "Yes."				line :	3, is
1	Dues, assessments and similar amounts from members		1			
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amount political expenses for which the section 527(f) tax was paid).	s of				
а	Current year		2a			
b	Carryover from last year		2b			
C	Total		2c			
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3			
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of					
	excess does the organization agree to carryover to the reasonable estimate of nondeductible lobb and political expenditure next year?					
5	Taxable amount of lobbying and political expenditures (see instructions)		<u>4</u> 5			
Pari		•	J			
Provid	le the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated gra instructions); and Part II-B, line 1. Also, complete this part for any additional information.	oup lis	t); Pai	rt II-A, I	ines 1	l and

SCHEDULE D (Form 990)

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.

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

▶ Go to www.irs.gov/Form990 for instructions and the latest information. Name of the organization Employer identification number

	TO THREE - NATIONAL CENTER FOR INFANTS TODD		52-1105189
Par			s or Accounts.
	Complete if the organization answered		The second second
	T	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor		
_	funds are the organization's property, subject to the	•	
6	Did the organization inform all grantees, donors, a		
	only for charitable purposes and not for the bene		
D	conferring impermissible private benefit?		· · · · · · · · · · · · · · · · · · ·
Far	Conservation Easements.	6V11 F 000 D + 11 / 11 - 7	
	Complete if the organization answered		
1	Purpose(s) of conservation easements held by the		
	Preservation of land for public use (e.g., recrea		
	Protection of natural habitat	☐ Preservation of a	a certified historic structure
_	Preservation of open space		to the first of
2	Complete lines 2a through 2d if the organization he	eid a qualified conservation contribution	
	easement on the last day of the tax year.		Held at the End of the Tax Year
a		· · · · · · · · · · · · · · · · · · ·	. <u>2a</u>
b	Total acreage restricted by conservation easement		
C	Number of conservation easements on a certified I		
d	Number of conservation easements included in		1 !
_	historic structure listed in the National Register .		
3	Number of conservation easements modified, tran- tax year ►	sterred, released, extinguished, or termi	nated by the organization during the
		and the second of the second of Second	
4 5	Number of states where property subject to conse		
Ð	Does the organization have a written policy re- violations, and enforcement of the conservation ea		
			<u> </u>
6	Staff and volunteer hours devoted to monitoring, inspe	cung, nandling of violations, and enforcing t	conservation easements during the year
7	Amount of expenses incurred in monitoring, inspecting	na handling of violations, and enfercing as	
•	►\$	ig, handling of violations, and emorcing co	inservation easements during the year
8	Does each conservation easement reported on line	2(d) above satisfy the requirements of s	oction 170/h\/4\/B\/i\
0	and section 170(h)(4)(B)(ii)?		
	In Part XIII, describe how the organization reports		
a	balance sheet, and include, if applicable, the text of		
	organization's accounting for conservation easeme		iciai statements mat describes me
Part			Ther Similar Assets
ı cır	Complete if the organization answered		tilei Oliillai Assets.
12	If the organization elected, as permitted under SF		evenue statement and halance shoot
	works of art, historical treasures, or other similar		
	public service, provide, in Part XIII, the text of the f		
h	If the organization elected, as permitted under S		
	works of art, historical treasures, or other similar		
	public service, provide the following amounts relat		ballon, or research in formeratios of
			• •
	(i) Revenue included on Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X		· · · · • •
0	(ii) Assets included in Form 990, Part X		> \$
2	If the organization received or held works of art,		
	following amounts required to be reported under S		
a	Revenue included on Form 990, Part VIII, line 1 . Assets included in Form 990, Part X	· · · · · · · · · · · · · · · · · · ·	· · · • \$
b	Assets included in Form 990, Part X		> 4

Par	Organizations Maintaining	Collections of	Art, Historical	Treasures	s. or O	ther Similar As	sets (continued)
3	Using the organization's acquisition, collection items (check all that apply):	accession, and ot	her records, che	ck any of t	he follo	wing that are a si	gnificant use of its
а	☐ Public exhibition		d 🗌 Loar	n or exchan	ge prog	rams	
Ь	Scholariy research		e 🗌 Othe				
С	Preservation for future generation:						
4	Provide a description of the organiza XIII.	tion's collections a	and explain how	they further	r the org	ganization's exem	pt purpose in Part
5	During the year, did the organization	solicit or receive	donations of art,	historical t	treasure	s, or other simila	r
	assets to be sold to raise funds rather	than to be mainta	ined as part of th	ne organizat	tion's co	ollection?	☐ Yes ☐ No
Par							***************************************
	Complete if the organization 990, Part X, line 21.						
1a							t
	included on Form 990, Part X?						☐ Yes ☐ No
b	If "Yes," explain the arrangement in P	art XIII and comple	ete the following t	table:	_		
	Paginning balance				-		nount
C d	Beginning balance				10		
e	Additions during the year				1d		
f	Distributions during the year Ending balance				1e		
2a	Did the organization include an amount					I	V D V Dat-
	If "Yes," explain the arrangement in P						
Par		art Am. Official fiere	s ii the explanatio	III II II II DEEI	i provide	eu on Fart Ail .	<u>· · · · · · · · · · · · · · · · · · · </u>
	Complete if the organization	answered "Yes"	on Form 990.	Part IV lin	e 10		
		(a) Current year	(b) Prior year	(c) Two yea		(d) Three years back	(e) Four years back
1a	Beginning of year balance	6,037,467	5,925,923		539,060	5,192,298	
b	Contributions	0	0,020,020	·	0	3,132,238	
c	Net investment earnings, gains, and						<u> </u>
	losses	316,090	249,560		521,209	439,637	-138,932
d	Grants or scholarships	0	0	1	0	0	
е	Other expenditures for facilities and			 		<u> </u>	
	programs	129,126	138,016		134,346	92,875	109,284
f	Administrative expenses	0	0		0	0	· · · · · · · · · · · · · · · · · · ·
9	End of year balance	6,224,431	6,037,467	-	925,923		+ · · · · · · · · · · · · · · · · · · ·
2	Provide the estimated percentage of t	he current year end					
a	Board designated or quasi-endowmer			•	,,		
b	Permanent endowment >	7.2 %	-				
C	Temporarily restricted endowment ▶	2.1 %					
	The percentages on lines 2a, 2b, and	2c should equal 10	00%.				
3a	Are there endowment funds not in the	possession of the	e organization th	at are held	and ad	ministered for the	•
	organization by:						Yes No
	(i) unrelated organizations						3a(i) 🗸
	(ii) related organizations						3a(ii)
	If "Yes" on line 3a(ii), are the related or				٠		3b
4	Describe in Part XIII the intended uses		n's endowment f	unds.			
Part				_			
	Complete if the organization	. — . — . — . — . — . — . — . — . — . —				· · · · · · · · · · · · · · · · · · ·	
	Description of property	(a) Cost or oth (investme		or other basis other)	de	Accumulated epreciation	(d) Book value
1a	Land	,	0	0	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	e transcommunication of the communication of the co	0
þ	Buildings	·	0	0		0	0
C	Leasehold improvements	·	0	2,029,628		1,678,799	350,829
d	Equipment		0	0		0	0
<u>е</u>	Other		_0	1,404,595	<u> </u>	752,764	651,831
Total.	Add lines 1a through 1e. (Column (d) m	nust equal Form 99	0, Part X, columi	n (B), line 10	Oc.)	▶	1,002,660

Part VII	Investments - Other Securities.		<u> </u>
	Complete if the organization answered "Yes" on Form 990, Part	IV, line 11b. See F	form 990, Part X, line 12.
	(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation; Cost or end-of-year market value
(1) Financial	derivatives		
	neld equity interests		
(3) Other			
\rangle \rangl	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~		
(B)			
(C)			
(D)			
(E)			
(F)	***************************************		
(G) (H)	***************************************		1-11
	hl mink and 5 000 D-1V and (0) ha 10) h		
Part VIII	b) must equal Form 990, Part X, col. (B) line 12.) ► Investments — Program Related.		
r art viii	Complete if the organization answered "Yes" on Form 990, Part	IV line 11e Coe E	form 000 Bort V line 12
	(a) Description of investment	(b) Book value	
	fa) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			-
(8)			
	b) must equal Form 990, Part X, col. (B) line 13.) ▶		
Part IX	Other Assets.	<u> </u>	
	Complete if the organization answered "Yes" on Form 990, Part I	V. line 11d. See F	form 990 Part X line 15
-	(a) Description		(b) Book value
(1)	Will I was		
(2)			
(3)			
(4)			
(5)			
(6)			
_(7)	100		
(8)			
(9)			
	mn (b) must equal Form 990, Part X, col. (B) line 15.)	<i></i> .	<u> </u>
Part X	Other Liabilities. Complete if the organization answered "Yes" on Form 990, Part I	V, line 11e or 11f.	See Form 990, Part X,
1.	line 25.		01.6
(1) Federal in	(a) Description of liability		(b) Book value
			0
7-1	frent and construction allowance		1,035,962
(3) Other lia (4)	Drives		38,494
(5)			
(6)			
(7)	· · · · · · · · · · · · · · · · · · ·		
(8)			
(9)			
	o) must equal Form 990, Part X, col. (B) line 25.) ▶		1,074,456
	uncertain tax positions. In Part XIII, provide the text of the footnote to the organ	ization's financial sta	tements that reports the
organization's	s liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the te	xt of the footnote has	been provided in Part XIII

Part	•			Return.	
	Complete if the organization answered "Yes" on Form 990,				
1	Total revenue, gains, and other support per audited financial statements			1	42,870,235
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	ا ما			
a	Net unrealized gains (losses) on investments	2a	502,694		
b	Donated services and use of facilities	2b	0		
C.	Recoveries of prior year grants	2c	0		
đ	Other (Describe in Part XIII.)		135,453	_	
e	Add lines 2a through 2d , , , , , , ,			2e	638,147
3	Subtract line 2e from line 1	1 1		3	42,232,088
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	81,631		
b	Other (Describe in Part XIII.)	4b	0	ł	
С 5	Add lines 4a and 4b			4c	81,631
	XII Reconciliation of Expenses per Audited Financial Statem	_		_	42,313,719
ı art	Complete if the organization answered "Yes" on Form 990, I			netur	
1	Total expenses and losses per audited financial statements			1	47,711,533
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			•	47,111,933
a	Donated services and use of facilities	2a	n	- pápanás prami (
ь	Prior year adjustments	2b			
c	Other losses	2c	0		
d	Other (Describe in Part XIII.)	2d	135,453		
e	Add lines 2a through 2d		<u> </u>	2e	135,453
3	Subtract line 2e from line 1			3	47,576,080
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	ĹĖ		roministra	47,570,000
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	81,631	Andreas Andreas Andreas Andreas Andreas Andreas Andreas Andreas Andreas Andreas Andreas Andreas Andreas Andreas	
b	Other (Describe in Part XIII.)	4b	0.,001	7.77	
C	Add lines 4a and 4b		<u>.</u>	4c	81,631
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, lin			5	47,657,711
Part	XIII Supplemental Information.	······			
	e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and	d 4; Pa	rt IV, lines 1b and 2b	; Part V,	line 4; Part X, line
	XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part				
Sched	ule D, Part V, Line 4 - Income earned on the endowment fund is available for u	se in su	apporting the general	activities	of ZERO TO
THRE					
Sched	ule D, Part X, Line 2 - ZERO TO THREE follows the authoritative guidance relat	ting to a	accounting for uncerta	ainty in in	come taxes
nclud	ed in FASB ASC Topic 740, Income Taxes. ZERO TO THREE evaluated its unco	ertainty	in income taxes for the	ne year er	ided September
	19 and determined that there were no matters that would require recognition in				
	exempt status. As of September 30, 2019, there are no tax examinations pend				
Sched	ule D, Part XI, Line 2d - Cost of goods sold \$135,453.				
Sched	ule D, Part XII, Line 2d - Cost of goods sold \$135,453.				

SCHEDULE F (Form 990)

Statement of Activities Outside the United States

► Complete if the organization answered "Yes" ол Form 990, Part IV, line 14b, 15, or 16.

2018

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service ► Attach to Form 990.

► Go to www.irs.gov/Form990 for instructions and the latest information.

Go to www.irs.gov/rorms90 for instructions and the latest information.

Name of the organization Employer identification number ZERO TO THREE - NATIONAL CENTER FOR INFANTS TODDLERS AND FAMILIES TODDLERS and FAMILIES 52-1105189 General Information on Activities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 14b. 1 For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ☐ Yes ☐ No For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States. Activities per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.) 3 (c) Number of (a) Region (b) Number (d) Activities conducted in the (e) If activity listed in (d) is (f) Total employees, of offices in region (by type) (such as, a program service, expenditures for agents, and the region fundraising, program services, describe specific type of and investments independent investments, grants to recipients located in the region) service(s) in the region in the region contractors in the region (1) North America (including Canac 0 3 Program Services consultant/speaker/design 16,000 (2) Europe (including iceland and C 0 **Program Services** DC:0-5 training; speaker 3,700 (3) East Asia and the Pacific 0 1 **Program Services** DC:0-5 training 3,000 (4) Middle East and North Africa 0 **Program Services** Print permission fees 1,000 (5)(6)(7) (8) (9)(10)(11) (12)(13)(14)(15)(16)(17)Subtotal Total from continuation sheets to Part I

0

6

Totals (add lines 3a and 3b)

23,700

Page 2

Schedule F (Form 990) 2018

Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed. Part II

(i) Method of valuation (book, FMV, appraisal, other)										Schedule F (Form 990) 2018
(h) Description of noncash assistance									ix-exempt ▼	Sch
(g) Amount of noncash assistance									try, recognized as te	
(f) Manner of cash disbursement									by the foreign coun	
(e) Amount of cash grant									t are recognized as charities by the for a section 501(c)(3) equivalency letter	
(d) Purpose of grant										
(c) Region									Enter total number of recipient organizations listed above tha by the IRS, or for which the grantee or counsel has provided	criter total number of other organizations of entitles
(b) IRS code section and EIN (if applicable)									nber of recipier for which the g	noer or orner o
1 (a) Name of organization										s Enter total num

Schedula F (Form 990) 2018

Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16. Part III can be duplicated if additional space is needed. Part III

Schedule F (Form 990)	201	8
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Page 4

Part	V Foreign Forms		
1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Corporation (see Instructions for Form 926)	Foreign	☑ No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization be required to separately file Form 3520, Annual Return To Report Transactions With Foreign Trus Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trus U.S. Owner (see Instructions for Forms 3520 and 3520-A; don't file with Form 990)	usts and st With a	✓ No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? the organization may be required to file Form 5471, Information Return of U.S. Persons With Res Certain Foreign Corporations (see Instructions for Form 5471)	spect To	✓ No
4	Was the organization a direct or indirect shareholder of a passive foreign investment compa- qualified electing fund during the tax year? If "Yes," the organization may be required to file For- Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Fund (see Instructions for Form 8621)	m 8621,	☑ No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? In the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Foreign Partnerships (see Instructions for Form 8865)	Certain	☑ No
6	Did the organization have any operations in or related to any boycotting countries during the tax "Yes," the organization may be required to separately file Form 5713, International Boycott Replactuations for Form 5713; don't file with Form 990).	ort (see	☑ No

Schedule F (F	Schedule F (Form 990) 2018 Page 5						
Part V	Supplemental Information Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information. See instructions.						
Schedule F	, Part I, Line 3 - The accrual method of accounting is used.						

SCHEDULE J (Form 990)

Compensation Information

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

Complete if the organization answered "Yes" on Form 990, Part IV, line 23.
 ► Attach to Form 990,
 ► Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

Open to Public Inspection

52-1105189

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number ZERO TO THREE - NATIONAL CENTER FOR INFANTS TODDLERS AND FAMILIES TODDLERS and F

rart	Questions Regarding Compensation			
			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form		İ	
	990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.	- J. (2007)	10.1.0° 4	Janes.
	First-class or charter travel Housing allowance or residence for personal use			'
	☐ Travel for companions ☐ Payments for business use of personal residence		ļ	
	☐ Tax indemnification and gross-up payments ☐ Health or social club dues or initiation fees			
	☐ Discretionary spending account ☐ Personal services (such as maid, chauffeur, chef)			
.	Manager and the decree on the state on the first than the state of the			
Ь	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to			
	explain	١		
		1b		<u> </u>
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all			İ
_	directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line			
	1a?	2		
		-		
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the	1		
	organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a			
	related organization to establish compensation of the CEO/Executive Director, but explain in Part III.			,35 m
	✓ Compensation committee ✓ Written employment contract	Secretary of the	Arguni (c. 1844 in a Sainti	74.00 C
	☑ Independent compensation consultant ☑ Compensation survey or study			
	☐ Form 990 of other organizations ☐ Approval by the board or compensation committee			
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing		:-	l
	organization or a related organization:			
а	Receive a severance payment or change-of-control payment?	4a		~
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b	~	
С	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		~
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.]
	Only position 504/5/(0) 504/5/(4) 504/5/(00) 1			
5	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5–9. For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any			
J	compensation contingent on the revenues of:			
а	The organization?			
b	Any related organization?	5a		7
_	If "Yes" on line 5a or 5b, describe in Part III.	5b		
	The second of th			
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any			
	compensation contingent on the net earnings of:			
а	The organization?	6a		1
b	Any related organization?	6b		V
	If "Yes" on line 6a or 6b, describe in Part III.			
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed			
	payments not described on lines 5 and 6? If "Yes," describe in Part III	7	•	
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject			
	to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe			
	in Part III	8		~
_				
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in			
	MACO DALUTINE MOCKETON BY AMBRIBATED			

Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed. Part II

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

Note: The sum of columns (B)(I)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

Note: The sum of columns (D)(I)-(III) for each listed Individual must equal the total amount of Form 990, Part VII, Section A, line	r eac	in listed Individual mu	st equal the total am	ount of Form 990, Pa	r VII, Section A, line 1	1a, applicable column (U) and (E) amounts for that individual	n (U) and (E) amount	s for that individual.
		(B) Breakdown o	(B) Breakdown of W-2 and/or 1099-MISC compensation	SC compensation	(C) Retirement and	(D) Nortaxable	(E) Total of columns	(F) Compensation
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(a)-(b)(a)	in column (B) reported as deferred on prior Form 990
Matthew E Melmed, Executive	8	436,718	45,000	545,000	125,828	32,062	1,184,608	545.000
1 Director	€	0		0	0	0	0	0
Laura W Shiflett, Chief Financial	9	222,039	0	0	13,288	0	235,327	0
2 and Administrative Officer	(1)	0		0	0	0	0	0
Myra Jones-Taylor, Chief Poticy	€ :	235,316	75,000	0	3,483	26,721	340,520	0
3 01110	•	0		0	0	0	0	0
Janice Im, Chief Program Officer		185,506	21,200	0	14,960	11,292	232,958	0
4		0	0	0	0	0	0	0
Emestine Benedict, Chief	8	175,491	000'L	0	0	30,546	213,037	0
	€	0	0	0	0	0	0	0
Elise Miller, Chief Business Operations Officer former as of	=	177,052	0	0	10,689	0	187,741	0
\dashv	E	0	0	0	0	0	0	0
Kathleen McEnerny, Chief Davelopment Officer		170,937	0	0	10,640	19,322	200,899	0
1	€	0	0	0	0	0	0	0
Rahil Briggs, National Director, Healthy Stene	€ :	240,524	0	0	0	10,712	251,236	0
	€	0	0	0	0	0	0	0
Jennifer Tracey, Senior Director	8	230,732	0	0	13,800	0	244,532	0
	Ξ	0		0	0	0	0	0
Jonathan Goldfinger, Former National Director Healthy Stens	E	210,586	0	0	11,156	126'6	231,663	0
y suchs	€	0	0	0	0	0	0	0
Chief	8	184,508	0	0	2,546	3,450	190,504	0
11 reciliology circei	€	0	0	0	0	0	0	0
	€							
12	€							
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16	€							

Schedule J (Form 990) 2018

Schedule J (Form 990) 2018

Supplemental Information

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Page

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

Schedule J, Part I, Line 3 - The compensation of the Executive Director was determined by the Personnel Committee using information from an independent compensation consultant and a compensation study.

Schedule J, Part I, Line 4 - Effective January 1, 2010, ZERO TO THREE adopted a deferred compensation plan for prior unfunded retirement requirements for its Executive Director under Internal Revenue Code (IRC) section 457(f). The plan under section 457(f) is an unfunded, non-qualified deferred compensation plan, ZERO TO THREE makes non-elective contributions was deferred for Matthew E. Melmed, Executive Director. Additional deferred compensation for Mr. Melmed in 2018 was (\$41,172) in lost earnings on the plan and \$22,000 contributed to under this plan. Contributions to the plan are vested upon fulfillment by the executive of certain requirements, as set forth in the plan agreement. For the year ended 12/31/2018, \$145,000 a 403(b) retirement plan.

Schedule J. Part J. Line 7 - Matthew Melmed, Executive Director, received a bonus. Myra Jones-Taylor received a hiring bonus. Half was paid in 2017 and half in 2018. Emestine Benedict received a hiring bonus. Janice Im received a performance bonus.

contributions in the amount of \$545,000. These retirement benefit contributions have been reported annually on prior year Form 990's on Schedule J. Column C. (Retirement and other deforred compensation). The retirement plan contributions became taxable income for IRS W-2 purposes upon vesting in 2018 and are included in Column B(iii) W-2 wages as well as Schedule J, Part II - Section 457(f) retirement plan vesting event: In 2018, after 23 years of service, the Executive Director partially vested in his section 457(f) retirement plan Column F to note that this benefit was reported on prior year Form 990s.

SCHEDULE L (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Transactions With Interested Persons

► Complete if the organization answered "Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a,

28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.

Attach to Form 990 or Form 990-EZ.

Go to www.irs.gov/Form990 for instructions and the latest information.

Name of the organization

Employer identification number

OMB No. 1545-0047

ZERO	TO THREE - NATION	IAL CENTER FO	R INFANTS TO	D DLER	S AND F	AMILIES TO	ODDLI	ERS and F		52-	11051	89		
Pari	Excess Bene	fit Transaction	ns (section 501	1(c)(3).	section	501(c)(4), a	and 50	01(c)(29) organiz 5a or 25b, or Fo	ations	only)			40b.	
1	(a) Name of disqualified		(b) Relationship be											rected?
		person	organization				(c) Description of transactio			n		Yes	No	
(1)														
(2)														
(3)														
(4)			·											
(5)														
(6)			,											
2	Enter the amount under section 4958	of tax incurred	by the organ					ied persons du			ar • •	,		
3	Enter the amount of	of tax, if any, on	line 2, above,							1	▶ \$	<u></u>		
Part	I cans to and	/or From Inter	rantad Daman					 	•					
- Circ	Complete if the	ne organization reported an am	answered "Ye	s" on i	Form 99 art X, line	0-EZ, Part e 5, 6, or 2	V, line 2.	e 38a or Form 99	90, Pa	ırt IV,	line 2	6; or i	f the	
(a) Name of interested person		(b) Relationship with organization			(e) Origin principal an				(g) In default?		7.7 .7		(i) Written agreement?	
				To	From				Yes	No	Yes	No	Yes	No
(1)												Ì		
(2)														
(3)														
_(4)														
(5)														
(6)														
(7)														
(8)						,								
(9)											-			
(10)		<u> </u>			<u></u>				!					
Total		<u> </u>					. ▶	\$						
Part	Grants or Ass Complete if the	sistance Bene ne organization	fiting Interest answered "Ye	e d Pe i s" on f	rsons. Form 990	0, Part IV, i	ine 27	7,						
(a)	Name of interested person		ship between inter	ested ((c) Amount	of assistance	(d) Type of assistance	е	(e)	Purpo	se of a	ssistan	ce
(1)														
(2)							-							
(3)			- 0											
(4)														
(5)	·													
(6)														
(7)			-											
(8)														
(9)														
(10)	•						_							

Part IV	Business Transactions Involv Complete if the organization ar	ring Interested Persons. Iswered "Yes" on Form 99	0, Part IV, line 28a, 2	28b, or 28c.		9
	(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sha organiz rever	
					Yes	No
	., Stmt 1					
(2) (3) (4) (5)			<u></u>			
(4)			<u> </u>			
(5)		<u> </u>				
(6)						
(6) (7)					-	
(8)						
(9)						
(10)	8					
Part V	Supplemental Information. Provide additional information f	for responses to questions	on Schedule L (see	instructions).		

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Schedule L, Part V, Statement 1

# ZERO TO THREE - NATIONAL CENTER FOR INFANTS TODDLERS

AND FAMILIES EIN: 52-1105189

Form: Schedule L (2018)

Page: 2

Description of Business Transactions Involving Interested Persons

Part IV

		Amount of transaction
Name	Child Care Aware of America	1,042,933
	Arlington VA	, <del>.</del> ,
Relationship with organization	Executive Director is spouse of ZERO TO THREE Executive	
	Director	
Description of transaction	ZERO TO THREE collaborated with Child Care Aware of America	
	and several other major subrecipients to form a consortium for a	
	grant proposal, which was competitively awarded and received	
	grantor approval. Transactions with all subrecipients, including Child	
	Care Aware of America, were conducted at an arm's-length basis.	
	Child Care Aware of America provided training and technical	
	assistance services.	
Sharing Of Revenues	No	

# SCHEDULE O (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.

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Name of the organization

► Attach to Form 990 or 990-EZ.

► Go to www.irs.gov/Form990 for the latest information.

Open to Public Inspection

Name of the organization	Employer identification number
ZERO TO THREE - NATIONAL CENTER FOR INFANTS TODDLERS AND FAMILIES TODDLERS and F	
Form 990, Part VI, Section A, Line 1a - ZERO TO THREE's Board delegates authority to act on behalf	of the Board to a ten member
Executive Committee in between board meetings. The Executive Committee may exercise all powers	of the Board, when the Board is not in
session, except such powers of the Board, if any, as the Board may specifically reserve for itself or	Is may be reserved in the Articles of
Incorporation, provided that the Board is notified of committee actions on a regular basis.	The state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the s
Form 990, Part VI, Section A, Line 2 - Eugene Stein and Marilyn Stein have a family relationship.	
Form 990, Part VI, Section A, Line 6 - In June 2016, ZERO TO THREE initiated a membership program	Members receive access to now
education and training, research, and networking, along with discounts on products and events. Mel	nhere are able to compact with other
early childhood professionals and to keep up to date on the latest developments. ZERO TO THREE's	members provide direct contine to
children and families, administer programs for young children, and work to plan, create policy, and f	and early childhood systems. This
membership program does not meet the IRS definition of members and thus the answer to line 6 is "	no "
The state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the s	
Form 990, Part VI, Section B, Line 11b - The draft IRS Form 990 is presented to the Finance Committee	o of the Board of Diseases for the
and approval. They have the opportunity to review the filing and ask questions for clarification. A co	of the deaft IDS Form 800 is then
distributed to all Board Members via email prior to filing with the Internal Revenue Service.	by of the uractics Form 990 is then
The state of the state profits fining with the internal Revenue Service.	
Form 990, Part VI, Section B, Line 12c - The Conflict of Interest policy is issued to all staff as part of	les Deserved Dell'
Manual. Conflict of Interest Disclosure forms are requested annually from all staff by the Human Res	ne Personnel Policies and Procedures
advised to notify their supervisor whenever there is a potential conflict of interest. Any conflict of interest and conflict of interest.	ources department. Starr members are
supervisor with the Chief Human Resources Officer. If a determination is not able to be made as to w	bathan the second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second secon
then goes to the executive management team for review and determination. Board members are also	nettier there is a conflict of interest, it
Interest statements annually. If a conflict of interest is found, ZERO TO THREE requests the employe	asked to review and sign Conflict or
themselves from any decision-making process where this conflict would exist.	e of board member to remove
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Form 990, Part VI, Section B, Line 15 - The President, Vice President, Treasurer, and Past President of	f the Board of Directors form a
Personnel Committee and conduct the performance review and determine compensation and salary	adjustments for the Evecutive Director
The Board periodically contracts for a compensation study by an independent compensation consul-	ant which includes an analysis of
similar industry comparisons and benchmarks to ensure appropriate compensation levels are maintain	sined. The last compensation study for
the Executive Director was conducted in June 2017. The Executive Director conducts the performance	e review for the Chief Financial and
Administrative Officer and other senior members of management and sets compensation that is align	ed to salary benchmark data provided
by ZERO TO THREE's Human Resources staff from annual surveys.	The state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the s
Form 990, Part VI, Section C, Line 19 - ZERO TO THREE places its annual report, audited financial sta	tements, and IRS Form 990 on its
website for public access at www.zerotothree.org. The IRS Form 990 is also available at www.guides	ar.org, ZERO TO THREE does not
currently make its governing documents, 990-T, nor conflict of interest policy available to the public.	
Form 990, Part IX, Line 11g - Sub-recipients under federal grants \$10,710,334; fees for services \$4,13	,774; consultants \$1,732,973;
temporary help \$371,273; honoraria \$41,670; other \$145,739.	
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Schedule O, Statement 1

ZERO TO THREE - NATIONAL CENTER FOR INFANTS TODDLERS AND FAMILIES

Form: Form 990 (2018)

EIN: 52-1105189

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Reasonable Cause Explanations

Header Section

Explanation

Additional time was needed to gather the information necessary to file a complete and accurate return. An extension until August 15, 2020 was requested and approved.

Schedule O, Statement 2

ZERO TO THREE - NATIONAL CENTER FOR INFANTS TODDLERS AND FAMILIES

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First Program Service Accomplishments Description

Part III, Line 4a

Description

audiences via widely used technology such as texting through the DTL developed Text4Teachers and Text4HomeVisitors platforms, and mobile applications through the DTL developed ELOF2Go, ELOF@Home, ReadyDLL, and HSTAlks apps. NC ECDTL used data to improve practice and program performance; developed additional OCC/CCDBG implementation resources; worked with interested states to adapt the Practice-Based Coaching model for state systems; inundated the Head Start field with resources to support effective selection and implementation of early childhood curricula with fidelity; and developed targeted training and technical assistance resources for Head Start programs related to successful transition to kindergarten, supports for inclusive practices and supports for children who are dual language learners.

ZERO TO THREE - NATIONAL CENTER FOR INFANTS TODDLERS AND FAMILIES

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EIN: 52-1105189 Part III, Line 4d

Other Program Services Accomplishments

Activity Description Expense Grants Revenue Code Training, Consulting, Professional, and Member Services, ZERO TO THREE supports 5,990,506 0 3,697,449 professional who serve families with young children with professional development, consulting and associated resources. The ZERO TO THREE Annual Conference is the annual multi-disciplinary training event for early childhood professionals. The conference gathers over 3,000 professionals to learn the latest research, practice and policy topics related to infants, toddlers, and their families. Topics may include brain development, early childhood education, mental health, pediatrics, and child welfare. ZERO TO THREE's Professional Development and Workforce Innovations Department provides on-site and online training and Training-of-Trainers Certification Programs to infant/family professionals. All materials are evidenced-based and focus on key ZERO TO THREE topics such as infant-toddler development, ZERO TO THREE's infant mental health diagnostic tool DC:0-5TM, brain development, Critical Competencies for Infant-Toddler Educators TM, and child abuse and neglect prevention. Additionally, all training is grounded in supporting systems change and they directly provide technical assistance to build, implement, and enhance cross-sector early childhood systems and workforce supports, ZERO TO THREE also provides resources, training videos, tools and curriculums through the ZERO TO THREE bookstore for professionals on a variety of early childhood topics. The ZERO TO THREE Journal, published 6 times per year, is the premier multi-disciplinary publication for early childhood professionals, highlighting research across the spectrum of early childhood. ZERO TO THREE Membership, with over 3,500 professionals, serves cross-disciplinary early childhood professionals with a variety of benefits which include the ZERO TO THREE Journal, resource discounts, free virtual events, exclusive free resources and experiences, and more. ZERO TO THREE's Safe Babies Court TeamTM (SBCT) approach applies the science of 4,278,614 0 48,519 early childhood development in meeting the urgent needs of infants and toddlers and strengthening their families. The goal is to advance the health and well-being of very young children and their families, so they flourish. The target population is children birth to three years of age under court jurisdiction, who are in foster care or at risk of removal, and their families. SBCTs focus intensively on: * Driving best practices for babies toddlers, and their families * Removing barriers to racial equity and social justice, and * Empowering parents and elevating the parent voice Each SBCT works at both the family and systems level. Family teams - composed of family members, attorneys, caseworkers, and service providers - come together at least once a month to identify and remove barriers to reunification, helping to expedite services and permanency for infants and young children. In addition, Active Community Teams - led by judges and composed of community stakeholders - review patterns across cohorts of individual cases to address structural issues in the child welfare system that prevent families from succeeding. ZERO TO THREE's National Resource Center, funded through a grant from HRSA, supports implementation of SBCTs in more than 100 sites across the country.

Federal Systems Technical Assistance. ZERO TO THREE provides technical assistance under a number of federally funded initiatives in support of improving early childhood outcomes. ZERO TO THREE operates the Programmatic Assistance for Tribal Home Visiting (PATH) Technical Assistance Center, which aims to increase Tribal MIECHV and Tribal Early Learning Initiative (TELI) grantees' capacity to implement high quality, home visiting childhood systems serving American Indian and Alaska Native families. Under the Healthy Start program, ZERO TO THREE supports grantees in their efforts to reduce the rate of infant mortality and improve perinatal outcomes through technical assistance and

1,803,745 0 0

through a variety of projects. ZERO TO THREE provides training and reflective consultation to the Army's New Parent Support Program. ZERO TO THREE supports the work of the National Center for Child Traumatic Stress with a focus on curriculum development for home visitors supporting military families and children who have experienced traumatic stress. Military Family Projects also develops resources for military-connected families including the app Babies on the Homefront. Leadership Development. ZERO TO THREE's Fellowship Program is the nation's oldest 371,504 0 leadership development initiative focused on meeting the growing need for dynamic leaders	MILIES
development information on a broad array of topics. Please see our website www.zerotothree.org. Parenting Resources. ZERO TO THREE's parenting resources team translates the research and science of early childhood and parenting into actionable resources and positive parenting guidance for parents, grandparents, and early childhood professionals. This year, Parenting Resources focused on topics such as: early STEM skills; the needs of grandparents who provide child care; and the use of screen media with very young children. Other National Centers for Head Start and Child Care Projects - ZERO TO THREE supports the work of the National Center for Early Childhood Health and Wellness as a sub-recipient to American Academy of Pediatrics and the work of the National Center on Performance Management and Fiscal Operations as a sub-recipient to University of Massachusetts' Donohue Institute. ZERO TO THREE's focus for each is in support of early childhood development and programmatic operations. Military Family Projects. ZERO TO THREE supports military families with young children to the Army's New Parent Support Program. ZERO TO THREE supports the work of the National Center for Child Traumatic Stress with a focus on curriculum development for home visitors supporting military families and children who have experienced traumatic stress. Military Family Projects also develops resources for military-connected families including the app Bables on the Homefront. Leadership Development. ZERO TO THREE's Fellowship Program is the nation's oldest 371,504 leadership development initiative focused on meeting the growing need for dynamic leaders	
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leadership development initiative focused on meeting the growing need for dynamic leaders	33,643
and a strong multi-disciplinary network of professionals and policymakers dedicated to improving outcomes for infants, toddlers and their families. During its more than 30-year history, over 300 Fellows have completed the fellowship to become part of the Academy of ZERO TO THREE fellows, engaging and leveraging the significant influence, connections, and resources of the Academy Fellows network with many becoming dynamic and influential leaders in the field.	0
Western Office Policy Analysis and Program Consultation. ZERO TO THREE's (ZTT) California Office focuses on policy and program consultation in California. The ZTT California office is one of several partners contracted to support the Quality Rating and Improvement (QRIS) efforts as part of the Statewide Training and Technical Assistance Infrastructure Project with a focus on building the capacity of individual child care providers, including provider coaching and program leader support, statewide training standards, and family engagement training and resources. Additionally, the California Office, in partnership with the ZTT Think Babies Campaign, facilitates campaign activities including Strolling Thunder CA and the Think Babies Parent Advocacy Academy.	0
Other 14,639 0	
Total	4,349

ZERO TO THREE - NATIONAL CENTER FOR INFANTS TODDLERS AND FAMILIES

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Page: 6		Part VI, Section C, Line 1
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ZERO TO THREE - NATIONAL CENTER FOR INFANTS TODDLERS

Schedule O, Statement 4