EXTENDED TO NOVEMBER 15, 2022

Form **990**

Return of Organization Exempt From Income Tax

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

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

2021
Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

A	For th	e 2021 calendar year, or tax year beginning and	ending			
В	Check if	C Name of organization		D Employer ide	entifica	tion number
	Addre	EARLY CARE AND LEARNING COUNCIL				
	Name chang	e Doing business as		11-234	805	1
-	Initial return Final return	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	E Telephone nu 518-69		217
_	termir			G Gross receipts \$		4,347,919.
	Amen	ded at Daary ary 10000		H(a) Is this a gro	un retu	
	Applie			for subordi	•	
	pendi	SAME AS C ABOVE		H(b) Are all subordin		
1	Tax-ex	empt status: X 501(c)(3)	or 527	1 ' '		st. See instructions
J١	Websi	te: WWW.EARLYCAREANDLEARNING.ORG	01	H(c) Group exer		
		forganization: X Corporation Trust Association Other	I Vear			State of legal domicile; NY
	art I	Summary	1 - 100	or formation, 23	J W	Diate of legal dofficies, 14 1
	1	Briefly describe the organization's mission or most significant activities: THE 1	MISSIO	N OF EARL	Y CZ	ARE &
ခ္ခ		LEARNING COUNCIL, INC. IS TO PROMOTE EXCE				
Ē	2	Check this box if the organization discontinued its operations or dispos				
Ver	3	Now have described as a first of the second			3	21
ලී	4	Number of independent voting members of the governing body (Part VI, line 1b)			4	21
•ಶ ഗ	5	Total number of individuals employed in calendar year 2021 (Part V, line 2a)			5	22
iţie	6	Total number of volunteers (estimate if necessary)			6	21
Activities & Governance	7 a	Total unrelated business revenue from Part VIII, column (C), line 12		*****************	7a	0.
₹	ь	Net unrelated business taxable income from Form 990-T, Part I, line 11			7b	0.
				Prior Year	1.2	Current Year
4.	8	Contributions and grants (Part VIII, line 1h)	r-200000	2,926,85	1.	4,309,488.
ã	9	Program service revenue (Part VIII, line 2g)		15,70		11,798.
Revenue	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)			7.	272.
æ	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		29,27		26,361.
		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		2,972,29		4,347,919.
		Grants and similar amounts paid (Part IX, column (A), lines 1-3)			0.	0.
		Benefits paid to or for members (Part IX, column (A), line 4)			0.	0.
s	45	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		1,419,69	1.	1,709,212.
1Se	16a	Professional fundraising fees (Part IX, column (A), line 11e)			0.	0.
Expenses	ь	Total fundraising expenses (Part IX, column (D), line 25)	0.			
ũ	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	-500	1,056,99	6.	2,382,224.
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		2,476,68		4,091,436.
		Revenue less expenses. Subtract line 18 from line 12		495,60		256,483.
OF			Be	ginning of Current Y	'ear	End of Year
sets	20	Total assets (Part X, line 16)		1,589,04		2,126,988.
AB	20 21 22	Total liabilities (Part X, line 26)		78,46		359,928.
EE	22	Net assets or fund balances. Subtract line 21 from line 20		1,510,57	7.	1,767,060.
Pa	ırt ii	Signature Block				
		lties of perjury, I declare that I have examined this return, including accompanying schedules			of my kr	nowledge and belief, it is
rue,	correc	t, and complete. Declaration of preparer (other than officer) is based on all information of wh	ich preparer	has any knowledge.		
		I freed think				
Sigr	1	Signature of officer		Date		
Her	e	MEREDITH CHIMENTO , EXECUTIVE DIRECTOR				
		Type or print name and title				
		Print/Type preparer's name Preparer's signature		Oate Che	_] PTIN
Paid		ARIEL F AMMIRATO ARIEL F AMMIRATO) 0	7/20/22 self		P01346991
	arer	Firm's name BONADIO & CO., LLP		Firm's Elf	1 ≥ 1	6-1131146
Jse	Only	Firm's address 6 WEMBLEY CT			W-4	0) 464 4005
		ALBANY, NY 12205		Phone no	(518	8) 464-4080
May	the IF	S discuss this return with the preparer shown above? See instructions				X Yes No

Theck if Schedule O contains a response or note to any line in this Part III Birely describe the organization simplicor. THE MISSION OF EARLY CARE & LEARNING COUNCIL, INC. IS TO PROMOTE EXCELLENCE IN BARLY CARE AND EDUCATION WITH EQUAL ACCESS FOR ALL FAMILIES. THIS IS DONE PRIMARILY THROUGH THE SUPPORT OF, AND IN PARTNERSHIP WITH, A STRONG NETWORK OF COMMUNITY-BASED ORGANIZATIONS Did the organization undertake any supplicant program services during the year which were not listed on the prior Form 800 or 990 E27 1	Pai	t III Statement of Program Service Accomplishments
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PARTMERSHIP WITH, A STRONG NETWORK OF COMMUNITY-BASED ORGANIZATIONS prior Form 990 or 990-E27 Yes, "describe these new services on Schedule O. Yes, "describe these new services on Schedule O. Yes, "describe these new services on Schedule O. Other to registration cease conducting, or make significant changes in how it conducts, any program services?		EXCELLENCE IN EARLY CARE AND EDUCATION WITH EQUAL ACCESS FOR ALL
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	40	

SEE SCHEDULE O FOR CONTINUATION(S)

Form 990 (2021) EARLY CARE AND LEARNING COUNCIL Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	X	
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		Х
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	X	
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 Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		x
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to	<u> </u>		
·	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		x
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		x
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If</i> "Yes," <i>complete</i>	-		
0	, ,			x
•	Schedule D, Part III	8		
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			_v
	If "Yes," complete Schedule D, Part IV	9_		X
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			٦,
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10		<u> </u>
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	X	
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
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		X
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		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		Х
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		Х
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	Х	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,	, .u		<u> </u>
D	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
		14b		x
15	or more? If "Yes," complete Schedule F, Parts I and IV Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any	145		
13		15		x
16	foreign organization? If "Yes," complete Schedule F, Parts II and IV Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to	15		
16		46		x
47	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,			₩
40	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17		<u> </u>
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	ا مر ا		_v
	1c and 8a? If "Yes," complete Schedule G, Part II	18		X
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		X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		<u> </u>
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes." complete Schedule I, Parts I and II	21		X

Pai	990 (2021) EARLY CARE AND LEARNING COUNCIL 11-2343 t IV Checklist of Required Schedules (continued)	3031	Р	age 4
			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		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23	X	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No," go to line 25a	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		<u> </u>
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		X
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			,,
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			,,
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV,			
	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			,,
	"Yes," complete Schedule L, Part IV	28a		X
	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		<u> </u>
С	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If			.,
	"Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		<u> </u>
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			l

	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
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		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?			
	Note: All Form 990 filers are required to complete Schedule O	38	X	

Part V Statements Regarding Other IRS Filings and Tax Compliance

	Check it 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	24				
b	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable	1b	0				
С	Did the organization comply with backup withholding rules for reportable payments to vendors and re	portal	ole gaming				
	(gambling) winnings to prize winners?			1c	Х		

132004 12-09-21

D21) EARLY CARE AND LEARNING COUNCIL Statements Regarding Other IRS Filings and Tax Compliance (continued) Part V

			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								
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X						
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. See instructions.								
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X					
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b							
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a								
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X					
b	If "Yes," enter the name of the foreign country								
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).								
5a	J , , , , , , , , , , , , , , , , , , ,	5a		X					
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X					
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c							
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			,,					
	any contributions that were not tax deductible as charitable contributions?	6a		X					
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts								
	were not tax deductible?	6b							
7	Organizations that may receive deductible contributions under section 170(c).	_		37					
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		X					
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b							
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required	_		, v					
	to file Form 8282?	7c		X					
d	If "Yes," indicate the number of Forms 8282 filed during the year	_		х					
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X					
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f 7g							
g	· · · · · · · · · · · · · · · · · · ·								
h o	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the	7h							
8		8							
9	sponsoring organization have excess business holdings at any time during the year? Sponsoring organizations maintaining donor advised funds.	8							
а	Did the conservation association and the state of the distribution and the continue 40000	9a							
b	Did the sponsoring organization make any taxable distributions under section 4966? Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b							
10	Section 501(c)(7) organizations. Enter:	0.5							
а	Initiation fees and capital contributions included on Part VIII, line 12								
11	Section 501(c)(12) organizations. Enter:								
а	Gross income from members or shareholders								
b	Gross income from other sources. (Do not net amounts due or paid to other sources against								
	amounts due or received from them.)								
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a							
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year								
13	Section 501(c)(29) qualified nonprofit health insurance issuers.								
а	Is the organization licensed to issue qualified health plans in more than one state?	13a							
	Note: See the instructions for additional information the organization must report on Schedule O.								
b	Enter the amount of reserves the organization is required to maintain by the states in which the								
	organization is licensed to issue qualified health plans 13b								
	Enter the amount of reserves on hand								
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X					
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b		<u> </u>					
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or								
	excess parachute payment(s) during the year?	15		X					
	If "Yes," see the instructions and file Form 4720, Schedule N.			77					
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		X					
	If "Yes," complete Form 4720, Schedule O.								
17	Section 501(c)(21) organizations. Did the trust, any disqualified person, or mine operator engage in any								
	activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953?	17							
	If "Yes." complete Form 6069.								

EARLY CARE AND LEARNING COUNCIL 11-2348051 Form 990 (2021) Part VI Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions. X Check if Schedule O contains a response or note to any line in this Part VI Section A. Governing Body and Management Yes No 21 1a Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O. 21 **b** Enter the number of voting members included on line 1a, above, who are independent Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other X officer, director, trustee, or key employee? 2 Did the organization delegate control over management duties customarily performed by or under the direct supervision 3 of officers, directors, trustees, or key employees to a management company or other person? 3 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 4 5 Did the organization become aware during the year of a significant diversion of the organization's assets? Did the organization have members or stockholders? 6 Х 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? Х 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? X 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: Х a The governing body? 8a **b** Each committee with authority to act on behalf of the governing body? Х 8b 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 on Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes Nο 10a Did the organization have local chapters, branches, or affiliates? 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? Х 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 on Schedule O the process, if any, used by the organization to review this Form 990. Х 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 12a Х b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes." describe Х 12c on Schedule O how this was done Did the organization have a written whistleblower policy? Х 13 13 Х 14 14 Did the organization have a written document retention and destruction policy? 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? The organization's CEO, Executive Director, or top management official Х 15a Х Other officers or key employees of the organization 15b If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions. 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a Х 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? 16h Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed ▶NY Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply

X Own website Another's website X Upon request Other (explain on Schedule O)

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

20	State the name, address, and telephone number of the person who possesses the organization's books and records	
	FRANK MAHAR - 518-690-4217	

230 WASHINGTON AVENUE EXTENSION, ALBANY, NY 12203

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

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See the 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, Form 1099-MISC, and/or box 1 of Form 1099-NEC) 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 the instructions for the order in which to list the persons above.

Check this box if neither the organization ne	or any related	orga	nizat	tion	con	npen	sate	ed any current officer, di	rector, or trustee.	
(A)	(B)			((C)			(D)	(E)	(F)
Name and title	Average	(do		Pos			nne	Reportable	Reportable	Estimated
	hours per	box	(do not check more than one box, unless person is both an officer and a director/trustee)				an	compensation	compensation	amount of
	week		cer an	a a a	recto	r/trus	tee)	from	from related	other
	(list any	recto						the	organizations	compensation
	hours for related	ord	ee ee			sated		organization (W-2/1099-MISC/	(W-2/1099-MISC/ 1099-NEC)	from the
	organizations	ruste	l trus		99/	neu		1099-NEC)	1099-NEC)	organization and related
	below	ndividual trustee or director	Institutional trustee	_	Key employee	st col	<u></u>	10001120)		organizations
	line)	Indivi	Instit	Officer	Key e	Highest compensated employee	Former			· ·
(1) MEREDITH M CHIMENTO	40.00									
EXECUTIVE DIRECTOR				Х				144,916.	0.	5,907.
(2) FRANCIS MAHAR	40.00									
DIRECTOR OF FINANCE & ADMINISTRATION				X				110,700.	0.	4,506.
(3) JESSICA KLOS	40.00								_	
DIRECTOR OF POLICY AND COMMUNITY EDU						Х		100,003.	0.	4,476.
(4) FRED ARCURI	0.25	l								•
DIRECTOR	0.50	Х						0.	0.	0.
(5) CATHY BRODEUR	0.50			7.7						0
2ND VICE CHAIR	0.50	Х		X				0.	0.	0.
(6) JULIE CHAMPION	0.50	37		37					0	0
TREASURER (7) SUMON CHIN	0.25	Х		X				0.	0.	0.
(7) SUMON CHIN DIRECTOR	0.25	Х						0.	0.	0.
(8) JOY CONNOLLY	0.25	Λ						0.	0.	<u> </u>
DIRECTOR	0.23	Х						0.	0.	0.
(9) LATEASHEA FOSTER	0.25							0.	0.	<u></u>
DIRECTOR	0.25	Х						0.	0.	0.
(10) DR. REVA GERSHEN-LOWY	0.25							•	•	
DIRECTOR	0.23	х						0.	0.	0.
(11) TIMOTHY HATHAWAY	0.25									
DIRECTOR		Х						0.	0.	0.
(12) ABBE KOVACIK	0.50								-	
BOARD CHAIR		Х		Х				0.	0.	0.
(13) MARJORIE LAWLOR	0.50									
SECRETARY		Х		Х				0.	0.	0.
(14) TIFFANY LEE	0.25									
DIRECTOR		Х						0.	0.	0.
(15) PEGGY LIUZZI	0.25									
DIRECTOR		Х						0.	0.	0.
(16) GARRA LLOYD-LESTER	0.25									
DIRECTOR		Х						0.	0.	0.
(17) SUSAN MARKER	0.25	_						_		_
DIRECTOR		Х						0.	0.	0.

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Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)													
(A)	(B)				C)			(D)	(E)			(F)	
Name and title	Average	ge		Position				Reportable Reportable			Es	timate	ed
	hours per	box	(do not check more than one box, unless person is both an officer and a director/trustee)				an	compensation	compensation	n	am	nount	of
	week		cer ar	nd a di	irecto	or/trus	tee)	from	from related			other	
	(list any	ector						the	organizations			pensa	
	hours for	or dir	a.			ated		organization	(W-2/1099-MIS	C/		om th	-
	related organizations	stee	truste		e e	bens		(W-2/1099-MISC/	1099-NEC)		•	anizat	
	below	ual tru	ional		ploye	t com		1099-NEC)				d relat	
	line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former				orga	nizati	JI 18
(18) RAMON A. PEGUERO	0.25												
DIRECTOR		X						0.		0.			0.
(19) JENNIFER PERNEY	0.25												
DIRECTOR		Х						0.		0.			0.
(20) JENNIFER ROJAS	0.50												
1ST VICE CHAIR		Х		Х				0.		0.			0.
(21) MARCIA ROWE-RIDDICK	0.25												
DIRECTOR		Х						0.		0.			0.
(22) RICHELLE SINGER	0.25												
DIRECTOR		Х						0.		0.			0.
(23) BETH STARKS	0.25												
DIRECTOR		Х						0.		0.			0.
(24) KIMBERLY SUMINSKI	0.25												
DIRECTOR		Х						0.		0. 0		0.	
		-											
		1											
1b Subtotal							<u> </u>	355,619.		0.	14	4,8	89.
c Total from continuation sheets to Part VI							•	0.		0.			0.
d Total (add lines 1b and 1c)								355,619.		0.	14	4,8	89.
2 Total number of individuals (including but no	ot limited to th	ose	liste	d ab	ove) wh	o re	eceived more than \$100,	000 of reportable				
compensation from the organization													3
												Yes	No
3 Did the organization list any former officer,	director, trust	ee, k	сеу е	empl	oye	e, or	hig	hest compensated emp	loyee on				
line 1a? If "Yes," complete Schedule J for se	uch individual									L	3		X
4 For any individual listed on line 1a, is the su	•							•	J				
and related organizations greater than \$150	0,000? If "Yes,	" co	mple	ete S	Sche	edule	Ji	for such individual		L	4	X	
5 Did any person listed on line 1a receive or a	accrue comper	nsati	on fr	rom	any	unre	elate	ed organization or individ	dual for services				
rendered to the organization? If "Yes." complete Schedule J for such person 5						5		X					
Section B. Independent Contractors									100,000 - 1				
Complete this table for your five highest contact the organization. Report compensation for the organization for the organization.										ensatio	on tro	ПΙ	
(A)	S Ca. Si idai y			. 		. •••		(B)			(C	:)	
Name and business								Description of s	ervices	Co		nsatio	n
NEW YORK CENTER FOR CHILD	DEVELO	PΜ	EN	Т				CHILD CARE	T				

(A) Name and business address	(B) Description of services	(C) Compensation
NEW YORK CENTER FOR CHILD DEVELOPMENT 159 WEST 127TH STREET, NEW YORK , NY 10027	CHILD CARE CONSULTING	139,000.
DOCS FOR TOTS 225 BRYANT AVE, ROSLYN, NY 11576	CHILD CARE CONSULTING	120,000.
LA SALLE SCHOOL 391 WESTERN AVE, ALBANY, NY 12203	CHILD CARE CONSULTING	117,000.
2 Total number of independent contractors (including but not limited to those listed \$100,000 of compensation from the organization ▶ 3	d above) who received more than	

Form **990** (2021)

Form 990 (2021) EARLY C
Part VIII Statement of Revenue

		Check if Schedule O contains a response of	or note to any lin	ne in this Part VIII			
		Official in Confedence of Confedence a response of	or rioto to arry iii	(A)	(B)	(C)	(D)
				Total revenue	Related or exempt	Unrelated	Revenue excluded
					function revenue	business revenue	from tax under sections 512 - 514
							360110113 3 12 - 3 14
Contributions, Gifts, Grants and Other Similar Amounts		Federated campaigns 1a		4			
ž ou		Membership dues 1b	75,847.	_			
s, (•	Fundraising events 1c					
ij.a		Related organizations1d					
s, mij		Government grants (contributions) 1e 3,	986,248.				
Sign	1	All other contributions, gifts, grants, and					
je je			247,393.				
₽₽		Noncash contributions included in lines 1a-1f	,	-			
o D				4,309,488.			
0 6		Total. Add lines 1a-1f	Business Code	1,303,1000			
		CENTER CONCULTEDING		0 475	0 475		
Program Service Revenue		STAFF CONSULTING	624410	9,475.	9,475.		
	ı	MEETINGS, RETREATS, FE	624410	2,323.	2,323.		
S Z							
a a		l <u></u>					
Pg							
Pro	1	All other program service revenue					
		Total. Add lines 2a-2f		11,798.			
	3	Investment income (including dividends, interes					
	3			272.			272.
		other similar amounts)		2/2•			2/2•
	4	Income from investment of tax-exempt bond pr					
	5	Royalties					
		(i) Real	(ii) Personal	_			
	6	Gross rents <u>6a</u> 22,256.					
	- 1	Less: rental expenses 6b 0 •					
		Rental income or (loss) 6c 22,256.					
	,	Net rental income or (loss)		22,256.			22,256.
		Gross amount from sales of (i) Securities	(ii) Other				
	•	assets other than inventory 7a		1			
		· ·		-			
	'	Less: cost or other basis					
ž		and sales expenses		-			
Revenue		Gain or (loss) 7c					
æ	•	Net gain or (loss)					
her	8	Gross income from fundraising events (not					
ᅗ		including \$ of					
		contributions reported on line 1c). See					
		Part IV, line 188a	808.				
		Less: direct expenses 8b	0.				
		Net income or (loss) from fundraising events		808.			808.
		Gross income from gaming activities. See		3331			
	9 (
		Part IV, line 19		-			
		Less: direct expenses 9b					
	•	Net income or (loss) from gaming activities					
	10	Gross sales of inventory, less returns					
		and allowances 10a					
	- 1	Less: cost of goods sold 10b					
		Net income or (loss) from sales of inventory	>				
		· ,	Business Code				
sne	11 :	MISCELLANEOUS	624410	3,297.	3,297.		
ee Tee	•••			3,237.			
llar Æn							
Miscellaneous Revenue	•			-			
Ξ̈́	'	All other revenue		2 207			
		Total. Add lines 11a-11d		3,297.	15 005	_	02 226
	12	Total revenue. See instructions		4,347,919.	15,095.	0.	23,336.
13200	9 12-0	9-21					Form 990 (2021)

14180720 784124 EAR007001

Form 990 (2021) EARLY CARE AND LEARNING COUNCIL Part IX Statement of Functional Expenses

Coot	ion 501(a)(2) and 501(a)(4) argonizations must some	lata all aglumana. All atha	v overni-otions must con	anlata aaluman (A)					
Secti	on 501(c)(3) and 501(c)(4) organizations must comp				▼				
	Check if Schedule O contains a response or note to any line in this Part IX Do not include arrounds are provided on lines Ch. (A) (B) (C) (D)								
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	Management and general expenses	Fundraising expenses				
1	Grants and other assistance to domestic organizations								
	and domestic governments. See Part IV, line 21								
2	Grants and other assistance to domestic								
	individuals. See Part IV, line 22								
3	Grants and other assistance to foreign								
	organizations, foreign governments, and foreign								
	individuals. See Part IV, lines 15 and 16								
4	Benefits paid to or for members								
5	Compensation of current officers, directors,								
_	trustees, and key employees	263,913.	148,707.	115,206.					
6	Compensation not included above to disqualified	,	,	,					
•	persons (as defined under section 4958(f)(1)) and								
	persons described in section 4958(c)(3)(B)								
7	Other salaries and wages	1,243,884.	1,169,979.	73,905.					
8	Pension plan accruals and contributions (include	_,,	_,,_,	, , , , , ,					
0	section 401(k) and 403(b) employer contributions)	47,818.	45,746.	2,072.					
9	Other employee benefits	26,796.	24,985.	1,811.					
10		126,801.	111,381.	15,420.					
11	Payroll taxes	120,001.	111,301.	13,420.					
	Fees for services (nonemployees):								
a	Management								
	Legal	20,785.	18,491.	2,294.					
	Accounting	20,703.	10,491.	2,294.					
d	Lobbying								
е	Professional fundraising services. See Part IV, line 17								
f	Investment management fees								
g	Other. (If line 11g amount exceeds 10% of line 25,	1 072 010	1 070 441	F70					
	column (A), amount, list line 11g expenses on Sch 0.)	1,873,019.	1,872,441.	578.					
12	Advertising and promotion	200.	200.	2 260					
13	Office expenses	41,679.		2,268.					
14	Information technology	20,496.	20,335.	161.					
15	Royalties	115 156	104 000	44 454					
16	Occupancy	115,476.	104,002.	11,474.					
17	Travel	2,811.	2,811.						
18	Payments of travel or entertainment expenses								
	for any federal, state, or local public officials								
19	Conferences, conventions, and meetings	8,330.	8,330.						
20	Interest	698.	698.						
21	Payments to affiliates								
22	Depreciation, depletion, and amortization	2,129.	2,129.						
23	Insurance	7,337.	6,439.	898.					
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule 0.)								
а	TRAINING MATERIAL AND F	201,563.	200,913.	650.					
b	DUES AND SUBSCRIPTIONS	58,350.	56,905.	1,445.					
2	EQUIPMENT RENTAL AND MA	26,557.	23,764.	2,793.					
d	MISCELLANEOUS	2,794.	2,794.	2,755					
-	All other expenses	<i>Δ,1)</i>	4,174						
е 25	Total functional expenses. Add lines 1 through 24e	4,091,436.	3,860,461.	230,975.	0.				
25 26	Joint costs. Complete this line only if the organization	±,00±,±00•	3,000,401.	230,3130	<u></u>				
20	reported in column (B) joint costs from a combined								
	educational campaign and fundraising solicitation.								
	Check here if following SOP 98-2 (ASC 958-720)								
	II following SOP 98-2 (ASC 958-720)				000				

Form 990 (2021)
Part X | Balance Sheet

Par	t X	Balance Sheet					
		Check if Schedule O contains a response or	note to an	/ line in this Part X			
					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing			29,909.	1	2,606.
	2	Savings and temporary cash investments			747,417.	2	950,399.
	3	Pledges and grants receivable, net				3	
	4	Accounts receivable, net			793,887.	4	1,138,609.
	5	Loans and other receivables from any current					
		trustee, key employee, creator or founder, su	bstantial o	ontributor, or 35%			
		controlled entity or family member of any of t	hese pers	ons		5	
	6	Loans and other receivables from other disqu	alified pe	sons (as defined			
		under section 4958(f)(1)), and persons describ	oed in sec	ion 4958(c)(3)(B)		6	
ဖွ	7	Notes and loans receivable, net				7	
Assets	8	Inventories for sale or use				8	
۲	9	Description of the second state of the second			9,852.	9	13,246.
	10a	Land, buildings, and equipment: cost or othe	r				
		basis. Complete Part VI of Schedule D	10a	27,720. 5,592.			
	b	Less: accumulated depreciation	10b	5,592.	7,980.	10c	22,128.
	11	Investments - publicly traded securities				11	
	12	Investments - other securities. See Part IV, lin				12	
	13	Investments - program-related. See Part IV, lin			13		
	14	Intangible assets				14	
	15	Other assets. See Part IV, line 11			1 500 045	15	0 106 000
	16	Total assets. Add lines 1 through 15 (must e			1,589,045.	16	2,126,988.
	17	Accounts payable and accrued expenses		78,468.	17	359,928.	
	18	Grants payable				18	
	19	Deferred revenue				19	
	20	Tax-exempt bond liabilities		. (O - I I - I - D		20	
	21	Escrow or custodial account liability. Comple				21	
ies	22	Loans and other payables to any current or for					
Liabilities		trustee, key employee, creator or founder, su					
Lia	00	controlled entity or family member of any of t				22	
	23 24	Secured mortgages and notes payable to unrulumsecured notes and loans payable to unrula				24	
	25	Other liabilities (including federal income tax,				24	
	25	parties, and other liabilities not included on li					
		of Schedule D		•		25	
	26	Total liabilities. Add lines 17 through 25			78,468.	26	359,928.
		Organizations that follow FASB ASC 958, o	heck her	•			
es		and complete lines 27, 28, 32, and 33.					
auc	27	Net assets without donor restrictions				27	
Bal	28					28	
pu		Organizations that do not follow FASB ASG	C 958, ch	ck here ▶ X			
교		and complete lines 29 through 33.					
Net Assets or Fund Balances	29	Capital stock or trust principal, or current fun	ds		0.	29	0.
set	30	Paid-in or capital surplus, or land, building, or			0.	30	0.
As	31	Retained earnings, endowment, accumulated	l income,	or other funds	0.	31	256,483.
Net	32	Total net assets or fund balances			1,510,577.	32	1,767,060.
_	33	Total liabilities and net assets/fund balances			1,589,045.	33	2,126,988.

Pai	TXI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1	4,34	7,9	<u> 19.</u>
2	Total expenses (must equal Part IX, column (A), line 25)	2	4,09		
3	Revenue less expenses. Subtract line 2 from line 1	3	25	6,4	83.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	1,51	0,5	77.
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain on Schedule O)	9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,				
	column (B))	10	1,76	7,0	60.
Pai	rt XII Financial Statements and Reporting	•			
	Check if Schedule O contains a response or note to any line in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990: X Cash Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule	Ο.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a			
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	basis,			
	consolidated basis, or both:				
	X Separate basis Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	audit,			
	review, or compilation of its financial statements and selection of an independent accountant?		2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain on Sche	edule O.			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sing	gle Audit			
	Act and OMB Circular A-133?		3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the require				
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b		
			Form	990	(2021)

132012 12-09-21

SCHEDULE A

(Form 990)

Total

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

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

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2021

Open to Public Inspection

Employer identification number Name of the organization EARLY CARE AND LEARNING COUNCIL 11-2348051 Reason for Public Charity Status. (All organizations must complete this part.) See instructions. Part I 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). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990).) 3 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.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). X 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 10 An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 11 12 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 on 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 control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations Provide the following information about the supported organization(s). (i) Name of supported (ii) EIN (iii) Type of organization (v) Amount of monetary (vi) Amount of other your governing document? (described on lines 1-10 organization support (see instructions) support (see instructions) No above (see instructions))

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Sec	ction A. Public Support		· · · · · · · · · · · · · · · · · · ·	•			
Cale	ndar year (or fiscal year beginning in)	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
	Gifts, grants, contributions, and			. ,	. ,	.,	,,
	membership fees received. (Do not						
	include any "unusual grants.")	1192543.	1220352.	2295635.	2926851.	4309488.	11944869.
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3	1192543.	1220352.	2295635.	2926851.	4309488.	11944869.
	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)						
6	Public support. Subtract line 5 from line 4.						11944869.
	tion B. Total Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
	Amounts from line 4	1192543.	1220352.	2295635.	2926851.	4309488.	11944869.
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources	19,472.	19,939.	19,692.	22,736.	22,528.	104,367.
9	Net income from unrelated business	,	•	•	,	•	,
	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI.)	7,003.	7,942.	7,806.	7,005.	3,298.	33,054.
11	Total support. Add lines 7 through 10		•				12082290.
	Gross receipts from related activities,	etc. (see instructio	ns)			12	
	First 5 years. If the Form 990 is for th					01(c)(3)	
	organization, check this box and stop	•		•		. , . ,	
Sec	tion C. Computation of Public						,
14	Public support percentage for 2021 (li	ne 6, column (f), di	vided by line 11, c	olumn (f))		14	98.86 %
15	Public support percentage from 2020	Schedule A, Part I	I, line 14			15	98.42 %
	33 1/3% support test - 2021. If the o					ore, check this bo	x and
	stop here. The organization qualifies a	as a publicly suppo	orted organization				▶ X
b	stop here. The organization qualifies as a publicly supported organization						
	and stop here. The organization quali	fies as a publicly s	upported organiza	tion			>
17a	10% -facts-and-circumstances test						
	and if the organization meets the facts						
	meets the facts-and-circumstances tes				rani-ation		ightharpoonup
b	10% -facts-and-circumstances test	-	•	* **	-		
	more, and if the organization meets th	ū				•	
	organization meets the facts-and-circu				•		▶ □
18	Private foundation. If the organization						s
			,			Cabadula A	

Schedule A (Form 990) 2021

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	ion A. Public Support	low, picase comp	nete i art ii.j				
Calend	ar year (or fiscal year beginning in)	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
n	Sifts, grants, contributions, and nembership fees received. (Do not not not not not not not not not no						
n fo a	aross receipts from admissions, nerchandise sold or services per- ormed, or facilities furnished in ny activity that is related to the irganization's tax-exempt purpose						
а	Gross receipts from activities that re not an unrelated trade or busness under section 513						
iz	ax revenues levied for the organ- cation's benefit and either paid to r expended on its behalf						
5 T	the value of services or facilities urnished by a governmental unit to the organization without charge						
	otal. Add lines 1 through 5						_
	mounts included on lines 1, 2, and received from disqualified persons						
fro ex	mounts included on lines 2 and 3 received om other than disqualified persons that xceed the greater of \$5,000 or 1% of the mount on line 13 for the year						
сА	add lines 7a and 7b						
	Public support. (Subtract line 7c from line 6.)						
	ar year (or fiscal year beginning in)	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
9 A 10a G d s	Amounts from line 6 Gross income from interest, lividends, payments received on ecurities loans, rents, royalties, nd income from similar sources	(4) 2011	10/2010	(0) 20 10	(4) 2020	(6) 202.	(1) 10101
b U (I	Inrelated business taxable income less section 511 taxes) from businesses cquired after June 30, 1975						
11 N a w	dd lines 10a and 10b						
12 C	other income. Do not include gain or loss from the sale of capital ssets (Explain in Part VI.)						
	otal support. (Add lines 9, 10c, 11, and 12.)			1			<u> </u>
	irst 5 years. If the Form 990 is for the	· ·			•		. —
	heck this box and stop here						>
	ion C. Computation of Public			. (6)		145	
	Public support percentage for 2021 (lin		•	.,,		15	<u>%</u>
	Public support percentage from 2020					16	%
	ion D. Computation of Invest			ino 10 pali ima (n)		17	0/
	nvestment income percentage for 202					17	<u>%</u>
	nvestment income percentage from 2			on line 14 and line		18	%
	3 1/3% support tests - 2021. If the					- 4.5	▶ □
b 3	nore than 33 1/3%, check this box and 3 1/3% support tests - 2020. If the	organization did n	not check a box or	line 14 or line 19a	a, and line 16 is m	ore than 33 1/3%, a	and
lii	ne 18 is not more than 33 1/3%, chec	k this box and st	top here. The orga	nization qualifies a	as a publicly supp	orted organization	▶∐
20 P	Private foundation. If the organization	n did not check a	hox on line 14 19	a or 19h check th	nis hox and see in	structions	

Т.,

Part IV | Supporting Organizations

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

Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- **3a** Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and 3c 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 box 12a or 12b in Part I, answer lines 4b and 4c 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 lines 5b and 5c 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).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7?

 If "Yes." complete Part I of Schedule L (Form 990).
- 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 on 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 on 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 line 10b below.
 - **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

	Yes	No
1		
2		
20		
3a		
3b		
3c		
4a		
4b		
4c		
5a		
5b		
<u>5c</u>		
6		
7		
8		
9a		
9b		
9с		
10a		
10b	···· 000\	

Schedule A (Form 990) 2021

Pai	TIV Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			l
а	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and			
	11c below, the governing body of a supported organization?	11a		
b	A family member of a person described on line 11a above?	11b		
С	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide			
	detail in Part VI.	11c		
Sec	tion B. Type I Supporting Organizations			
			Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or			
	more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s)			l
	effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported			l
	organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the	_		l
_	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			l
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			l
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
Sec	supervised, or controlled the supporting organization. tion C. Type II Supporting Organizations	2		
	Type in cupporting organizations		Yes	Na
4	Were a majority of the examplation's directors or trustees during the tay year also a majority of the directors		res	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			l
	or management of the supporting organization was vested in the same persons that controlled or managed			l
	the supported organization(s).	1		
Sec	tion 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			l
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			l
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
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			l
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described on line 2, above, did the organization's supported organizations have a			l
	significant voice in the organization's investment policies and in directing the use of the organization's			l
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		
Sec	tion E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).	ı		
а	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
С	The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see ins	struction		
2	Activities Test. Answer lines 2a and 2b below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			l
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			l
	those supported organizations and explain how these activities directly furthered their exempt purposes,			l
	how the organization was responsive to those supported organizations, and how the organization determined	2a		
b	that these activities constituted substantially all of its activities. Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement,	Za		
D	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		
3	Parent of Supported Organizations. Answer lines 3a and 3b below.	217		
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
u	trustees of each of the supported organizations? If "Yes" or "No" provide details in Part VI.	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		

of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.

Sche	dule A (Form 990) 2021 EARLY CARE AND LEARNING	COUN	CIL	11-2348051 Page 6
Pai	t V Type III Non-Functionally Integrated 509(a)(3) Supporting	ng Orga	nizations	
1	Check here if the organization satisfied the Integral Part Test as a qualifying	ng trust or	n Nov. 20, 1970 (<i>explai</i> i	n in Part VI). See instructions.
	All other Type III non-functionally integrated supporting organizations mus	t complet	e Sections A through E.	
Sect	ion 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		
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
С	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	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 0.015 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 0.035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C - Distributable Amount	<u> </u>		Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1		

Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see

2

3

4

5

Schedule A (Form 990) 2021

Enter 0.85 of line 1.

Enter greater of line 2 or line 3.

instructions).

Income tax imposed in prior year

emergency temporary reduction (see instructions).

Minimum asset amount for prior year (from Section B, line 8, column A)

Distributable Amount. Subtract line 5 from line 4, unless subject to

Schedule A (Form 990) 2021

e Excess from 2021

132028 01-04-22 Schedule A (Form 990) 2021

Schedule B

(Form 990)

Department of the Treasury Internal Revenue Service

Schedule of Contributors

➤ Attach to Form 990 or Form 990-PF.

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

OMB No. 1545-0047

2021

Name of the organization

EARLY CARE AND LEARNING COUNCIL

Employer identification number

11-2348051

Organization type (check one): Filers of: Section: X 501(c)(3) (enter number) organization Form 990 or 990-EZ 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. **General Rule** ☐ For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions. Special Rules X For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year ______ > \$ Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify

LHA For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.

that it doesn't meet the filing requirements of Schedule B (Form 990).

Schedule B (Form 990) (2021)

Name of organization Employer identification number

EARLY CARE AND LEARNING COUNCIL

11-2348051

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	al space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES 200 INDEPENDANCE AVENUE, S.W. WASHINGTON , DC 20201	\$ 3,986,248.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	ROBIN HOOD FOUNDATION 826 BROADWAY, 9TH FLOOR NEW YORK, NY 10003	\$ 240,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Occash Complete Part II for noncash contributions.)

Name of organization Employer identification number

EARLY CARE AND LEARNING COUNCIL

11-2348051

Part II	Noncash Property (see instructions). Use duplicate copies of Par	rt II if additional space is needed.	2340031
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
(a) No. From Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. rom Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received

Page 4 Schedule B (Form 990) (2021) Name of organization **Employer identification number** EARLY CARE AND LEARNING COUNCIL 11-2348051 Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info. once.) Use duplicate copies of Part III if additional space is needed. (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (d) Description of how gift is held (c) Use of gift Part I

(e) Transfer of gift

Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

SCHEDULE C (Form 990)

Political Campaign and Lobbying Activities

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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.

• 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.

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 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

<u> </u>	Section 501(c)(4), (5), or (6) organizat	ions: Complete Part III.			
Nan	ne of organization			Emp	loyer identification number
		<u>ARE AND LEARNING</u>			11-2348051
Pa	art I-A Complete if the org	anization is exempt und	er section 501(c)	or is a section 527 or	ganization.
2	Provide a description of the organiz Political campaign activity expendit Volunteer hours for political campai	ures		> \$	
Pa	art I-B Complete if the org	anization is exempt und	er section 501(c)(3).	
1	Enter the amount of any excise tax	incurred by the organization und	der section 4955	> \$	·
2	Enter the amount of any excise tax	incurred by organization manag	ers under section 4955	> \$	·
3	If the organization incurred a sectio	n 4955 tax, did it file Form 4720	for this year?		Yes No
4a	Was a correction made?				Yes No
	of If "Yes," describe in Part IV.				\(0\)
_	art I-C Complete if the org	•		<u>.</u>	
	Enter the amount directly expended	, ,	·		
2	Enter the amount of the filing organ				
•	exempt function activities				
3	Total exempt function expenditures				
4	line 17b				
4 5	Did the filing organization file Form Enter the names, addresses and en				
3	made payments. For each organiza			-	
	contributions received that were pro	•			•
	political action committee (PAC). If	additional space is needed, prov	vide information in Part	IV.	
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0

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

Schedule C (Form 990) 2021

LHA

132041 11-03-21

Schedule C (Fo	orm 990) 2021	EARLY CARE	AND LEARNING	G COUNCIL	11-2	348051 Page 2
Part II-A	Complete if the org	janization is exen	npt under section	1 501(c)(3) and file	ed Form 5768 (ele	ection under
A Check	expenses, and sha	re of excess lobbying e	. ,		group member's nam	e, address, EIN,
B Check ▶	Limi	its on Lobbying Expe	nd "limited control" pro nditures ints paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals
b Total lobc Total lob	bying expenditures to infl bying expenditures to infl bying expenditures (add l	uence a legislative boo	ly (direct lobbying)			
e Total exe	empt purpose expenditure empt purpose expenditure g nontaxable amount. Ent	es (add lines 1c and 1d				
Not over Over \$50 Over \$1, Over \$1,	bunt on line 1e, column (a) of \$500,000 00,000 but not over \$1,00 000,000 but not over \$1,5 500,000 but not over \$1,7 7,000,000	20% of 0,000 \$100,00 \$175,00	the amount on line 1e. on plus 15% of the exception plus 10% of the exception plus 5% of the exception plus 5% of the exception.	ess over \$500,000. ess over \$1,000,000.		
h Subtracti Subtractj If there is	g Grassroots nontaxable amount (enter 25% of line 1f) h Subtract line 1g from line 1a. If zero or less, enter -0- i Subtract line 1f from line 1c. If zero or less, enter -0- j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720					Yes No
Тероппід	section 4911 tax for this (Some organizations t	4-Year Ave hat made a section 5 See the separ	ate instructions for lin	Section 501(h) nave to complete all ones 2a through 2f.)		
	alendar year I year beginning in)	(a) 2018	nditures During 4-Yea	(c) 2020	(d) 2021	(e) Total

	Lobbying Exper	nditures During 4-Yea	r Averaging Period		
Calendar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) Total
2a Lobbying nontaxable amount					
b Lobbying ceiling amount (150% of line 2a, column(e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
f Grassroots lobbying expenditures					

Schedule C (Form 990) 2021

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

For e	ach "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description	(a	1)	(b)
	e lobbying activity.	Yes	No	Amount
1	During the year, did the filing organization attempt to influence foreign, national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:			
а	Volunteers?	X		
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?		Х	
	Media advertisements?		X	
	Mailings to members, legislators, or the public?		X	
	Publications, or published or broadcast statements?		X	
f	Grants to other organizations for lobbying purposes?	37	Х	2 222
g	Direct contact with legislators, their staffs, government officials, or a legislative body?	X	37	2,322.
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?	X	Х	475.
	Other activities?	Λ		2,797.
J	Total. Add lines 1c through 1i		х	4,191.
	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		Λ	
	If "Yes," enter the amount of any tax incurred under section 4912 If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			
	t III-A Complete if the organization is exempt under section 501(c)(4), section	n 501(c)(o), or sec	tion
	501(c)(6).			Vaa Na
				Yes No
1	Were substantially all (90% or more) dues received nondeductible by members?			
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			
3 Par	Did the organization agree to carry over lobbying and political campaign activity expenditures from the till-B Complete if the organization is exempt under section 501(c)(4), section			tion
	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered			
	answered "Yes."			
1	Dues, assessments and similar amounts from members		1	
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenditures)			_
	expenses for which the section 527(f) tax was paid).			
а	Current year		2a	
	Carryover from last year			
С	Total		2c	
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues .		3	
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exc	ess		
	does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and p	olitical		
	expenditure next year?		4	
5	Taxable amount of lobbying and political expenditures. See instructions		5	
Par				
	de the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group	list); Part II-	A, lines 1 ar	nd 2 (See
	uctions); and Part II-B, line 1. Also, complete this part for any additional information.			
PAL	RT II-B, LINE 1, LOBBYING ACTIVITIES:			
PAF	RTICIPATE IN ECE COALITION LEGISLATIVE ADVOCACY- LOG	SISTICS	s, cooi	RDINATION
ANI	DEVELOPMENT OF MATERIALS FOR ADVOCACY DAYS AND ADV	OCACY	CAMPA	IGNS-
WOE	RK WITH COLLEAGUES ON MEDIA ADVOCACY (SOCIAL AND TRA	ADITION	IAL ME	DIA,
INC	CLUDING LETTERS TO THE EDITOR, OPINOIN PIECES)- PREF	PARE TE	ESTIMO	NIES AND
POS	SITION PAPERS ON BEHALF OF THE ORGANIZATION, PARTICE	PATE I	N BUD	GET AND
			Schedu	le C (Form 990) 2021

132043 11-03-21

Part IV Supplemental Information (continued)
POLICY HEARINGS- PREPARE MEMORANDUMS OF SUPPORT AND OPPOSITION- CONTACT
AND MEET WITH LAWMAKERS REGARDING THE COUNCIL'S AND ITS MEMBERSHIP'S
ISSUES AND MAINTAIN RELATIONSHIPS WITH STAFF AT PUBLIC AGENCIES AND IN THE
OFFICES OF ELECTED OFFICIALS- PREPARE THE ORGANIZATION'S ANNUAL PUBLIC
POLICY AGENDA AND/OR EXECUTIVE AND LEGISLATIVE AGENDAS IN COORDINATION
WITH THE NETWORK MEMBERSHIP AND PUBLIC POLICY COMMITTEE OF THE BOARD OF
DIRECTORS- PREPARE PUBLIC POLICY INFORMATION FOR AGENCY NEWSLETTER.

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

➤ Complete if the organization answered "Yes" on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

➤ Attach to Form 990.

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

OMB No. 1545-0047 Inspection

Name of the organization

EARLY CARE AND LEARNING COUNCIL

Employer identification number 11-2348051

Par	organizations Maintaining Donor Advised organization answered "Yes" on Form 990, Part IV, line		Accounts. Complete if the
	organization answered Tes off offi 550, Fart IV, IIIV	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	(-)	
2	Aggregate value of contributions to (during year)		_
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in v	writing that the assets held in donor advised fu	unds
•	are the organization's property, subject to the organization's	-	
6	Did the organization inform all grantees, donors, and donor ac		
_	for charitable purposes and not for the benefit of the donor or		-
	• •		
Par			
1	Purpose(s) of conservation easements held by the organization	on (check all that apply).	
	Preservation of land for public use (for example, recreat	tion or education) Preservation of a hi	storically important land area
	Protection of natural habitat	Preservation of a ce	ertified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualifi	ied conservation contribution in the form of a	conservation easement on the last
	day of the tax year.		Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		
С	Number of conservation easements on a certified historic stru	ucture included in (a)	
d	Number of conservation easements included in (c) acquired a	fter 7/25/06, and not on a historic structure	
	listed in the National Register		2d
3	Number of conservation easements modified, transferred, rele	eased, extinguished, or terminated by the orga	anization during the tax
	year ►		
4	Number of states where property subject to conservation eas	sement is located	
5	Does the organization have a written policy regarding the peri		
	violations, and enforcement of the conservation easements it		
6	Staff and volunteer hours devoted to monitoring, inspecting, l	handling of violations, and enforcing conserva	tion easements during the year
_	<u> </u>		
7	Amount of expenses incurred in monitoring, inspecting, hand	ling of violations, and enforcing conservation	easements during the year
_	\$		(D) (1)
8	Does each conservation easement reported on line 2(d) above		
•	and section 170(h)(4)(B)(ii)? In Part XIII, describe how the organization reports conservation		
9	balance sheet, and include, if applicable, the text of the footn	•	
	organization's accounting for conservation easements.	ote to the organization's illiancial statements	that describes the
Par	rt III Organizations Maintaining Collections of	Art. Historical Treasures, or Other	Similar Assets.
	Complete if the organization answered "Yes" on Form		
	If the organization elected, as permitted under FASB ASC 956		alance sheet works
	of art, historical treasures, or other similar assets held for pub	•	
	service, provide in Part XIII the text of the footnote to its finan	,	and or public
b	If the organization elected, as permitted under FASB ASC 95		nce sheet works of
	art, historical treasures, or other similar assets held for public	•	
	provide the following amounts relating to these items:	,, , , ,	
	(i) Revenue included on Form 990, Part VIII, line 1		• \$
2	If the organization received or held works of art, historical trea		
	the following amounts required to be reported under FASB A	_	•
а	Revenue included on Form 990, Part VIII, line 1	_	• \$
	Assets included in Form 990, Part X		
	For Paperwork Reduction Act Notice, see the Instructions		Schedule D (Form 990) 2021

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

Sung the organization solutions (continued)			collections of Ar				r Other	Similar A		(conti		age Z
collection tems (check all that apply): a										(COITE	iueu)	
a Public exhibition d Lan and exchange program b Scholarly research e Other c Preservation for future generations d Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII. Part V Except and Gustafarther than to be maintained as part of the organization's collection? Yes No Part N Except and Gustafarther than to be maintained as part of the organization's collection? Yes No Part N Except and Gustafarther than to be maintained as part of the organization's collection? Yes No Part N Except and Gustafarther than to be maintained as part of the organization's collection? Yes No Part N Except and Gustafarther than to be maintained as part of the organization's collection? Yes No If Yes, explain the arrangement in Fart XIII and complete the organization answered "Yes" on Form 990, Part X, line 21. for ecrow or custodial account liability? Yes No If Yes, explain the arrangement in Part XIII and complete the following table: Amount If Ending balance 1d	3		on, and other record	is, criech	ally of the	ollowing that	i make sig	riiiloani us	e or its			
b Scholarly research e	_		,		Loop or ove	hango progr	am					
c												
4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII. 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds; rather than to be maintained as part of the organization's collection? Part VI			•	-	Oti i ei							
5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be solid to raise funds rather than to be maintained as part of the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part IV, line 21. 1a Is the organization an aspert, flustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part IV, line 9, or reported an amount on Form 990, Part IV, line 9, or reported on Form 990, Part IV, line 9, or reported on Form 990, Part IV, line 9, or reported on Form 990, Part IV, line 9, or reported on Form 990, Part IV, line 9, or reported on Form 990, Part IV, line 9, or reported on Form 990, Part IV, line 9, or life 1 decisions of the decision of the part IV line 1 decision of the part IV line 2 decision of the part IV line 1 decision of the p			alloations and avalai	n how th	ov further th	o organizatio	n'o ovomi	nt nurnana	in Dort \	VIII		
to be solid to raise funds rather than to be maintained as part of the organization's collection? Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 9, or reported an amount on Form 990, Part X in the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X; line 21. Is its the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X; line 10. If "Yes," explain the arrangement in Part XIII and complete the following table: □ Beginning balance □ It III □ Amount □ It III □ Amount □ It III □ I									: III Fait /	AIII.		
Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21. 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?	э									7 V		7 N.
reported an amount on Form 990, Part X, line 21. 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? b If "Yes," explain the arrangement in Part XIII and complete the following table: C Beginning balance d Additions during the year 1 E	Par											_ NO
1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?	ı aı			iete ii trie	organizatio	n answered	res on r	-01111 990, 1	Part IV, II	ne 9, or		
on Form 990, Part X? b If "Yes," explain the arrangement in Part XIII and complete the following table: Amount c Beginning balance d Additions during the year e Distributions during the year f Ending balance 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII. Part V Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10. (a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years back (a) Four years back (e) Four years back (d) Three years back (e) Four years back c Net investment earnings, gains, and losses (d) Grants or scholarships e Other expenditures for facilities and programs f Administrative expenses g End of year balance 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment y6 b Permanent endowment y6 c Term endowment y6 c Term endowment y6 c) Unrelated organizations (ii) Related organizations (iii) Related organizations (iii) Related organizations (iii) Related organizations (iii) Related organizations (iv) Fielded organizations (iv) Fielded organizations Sae(ii) Sae(iii) Sae(ii) Sae(ii) Sae(iii)				diam (for		0 0 0 0 th 0 1 0 0 0	anta mat in	aludad				
b If "Yes," explain the arrangement in Part XIII and complete the following table: Amount 1c	ıa									7 V		7 N.
c Beginning balance d Additions during the year e Distributions during the year f Ending balance 2 Distributions during the year f Ending balance 3 Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Ves No b If 'Ves,' explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII Part V Endowment Funds. Complete if the organization answered 'Ves' on Form 990, Part IV, line 10. Part V Endowment Funds. Complete if the organization answered 'Ves' on Form 990, Part IV, line 10. Part V Endowment Funds. Complete if the organization answered 'Ves' on Form 990, Part IV, line 10. Part V Endowment Funds. Complete if the organization in that are held and administered for the organization be buildings, and Equipment.									L] Yes		_ NO
c Beginning balance d Additions during the year e Distributions during the year f Ending balance 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No If 'Yes', explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII. Part V Endowment Funds. Complete if the organization answered "Yes' on Form 990, Part IV, line 10. (a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years back b Contributions c Net investment earnings, gains, and losses d Grants or scholarships e Other expenditures for facilities and programs f Administrative expenses g End of year balance 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasis-indowment 96 b Permanent endowment 96 c Term endowment 96 c Term endowment funds not in the possession of the organization that are held and administered for the organization by: (i) Unrelated organizations (ii) Related organizations (iii) Related organizations 3a(ii) 1	D	if "Yes," explain the arrangement in Part XIII	and complete the to	llowing t	able:					Amoun	+	
d Additions during the year Distributions during the year 1 1 1 1 1 1 1 1 1		De abouto a balance						4-		Amoun		
e Distributions during the year f Ending balance 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII Part V Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10. [a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years back 1a Beginning of year balance b Contributions c Net investment earnings, gains, and losses d Grants or scholarships e Other expenditures for facilities and programs f Administrative expenses g End of year balance 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment yes b Permanent endowment yes c Term endowment yes (i) Unrelated organizations (ii) Related organizations (iii) Related organizations iii) Related organizations iii) Related organizations b If "ves" on line 3(a), are the related organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Describe in Part XIII the intended uses of the organization's endowment funds. 1a Land b Buildings c Leasehold improvements d Equipment 27,720. 5,592. 22,128.												
f Ending balance												
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Description Part XIII Check here if the explanation has been provided on Part XIII Part X Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10. 1a Beginning of year balance (a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years back (d) Three years back (e) Four years back (d) Three years back (e) Four years back (e) Four years back (f) Three years back (e) Four years back (f) Three years ba										1		٦
Part V Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10. (a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years back		-						y?	🖵	Yes	F	∐ No
(a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years back (d) Three years back (e) Four years back (d) Three years back (e) Four years (e) Four y												
1a Beginning of year balance b Contributions c Net investment earnings, gains, and losses d Grants or scholarships e Other expenditures for facilities and programs f Administrative expenses g End of year balance 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment ▶ % The percentages on lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) Unrelated organizations (ii) Related organizations (iii) Related organizations (iii) Related organizations b if "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? 4 Describe in Part XII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (investment) b Buildings c Leasehold improvements d Equipment 4 Equipment 5 Cother 6 Equipment 6 Equipment 7 S, 5,592. 22,128.	Fai	Elidowillett Fullus. Complete							ana haali	(-) Fair		h a al.
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f Administrative expenses g End of year balance 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment ▶	е	Other expenditures for facilities										
g End of year balance 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment ▶												
Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment ▶	f	Administrative expenses										
a Board designated or quasi-endowment ▶	g	End of year balance										
b Permanent endowment ▶	2	Provide the estimated percentage of the curr	rent year end balanc	e (line 1ç	g, column (a)) held as:						
Term endowment ▶	а	Board designated or quasi-endowment		%								
The percentages on lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) Unrelated organizations (ii) Related organizations b If "Yes" on line 3a(ii), are the related organization's endowment funds. Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (investment) b Buildings c Leasehold improvements d Equipment 27,720 5,592	b	Permanent endowment	%									
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(i) Unrelated organizations (ii) Related organizations b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? 4 Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (investment) 1a Land b Buildings c Leasehold improvements d Equipment e Other Other 27,720 • 5,592 • 22,128 • 22,128 • 21,128 •	За	Are there endowment funds not in the posse	ession of the organiza	ation tha	t are held ar	nd administer	red for the	organizati	on			
(ii) Related organizations b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? 4 Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (investment) (b) Cost or other basis (other) (c) Accumulated depreciation 1a Land b Buildings c Leasehold improvements d Equipment 27,720 • 5,592 • 22,128 • e Other		by:									Yes	No
(ii) Related organizations b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? 4 Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (investment) (b) Cost or other basis (other) (c) Accumulated depreciation 1a Land b Buildings c Leasehold improvements d Equipment 27,720 • 5,592 • 22,128 • e Other		(i) Unrelated organizations								3a(i)		
b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? 4 Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (investment) b Buildings c Leasehold improvements d Equipment e Other										3a(ii)		
Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (other) (b) Cost or other basis (other) (c) Accumulated depreciation (d) Book value basis (investment) b Buildings c Leasehold improvements d Equipment c Other	b	If "Yes" on line 3a(ii), are the related organiza	ations listed as requi	red on S	chedule R?					3b		
Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (investment) 1a Land b Buildings c Leasehold improvements d Equipment e Other	4	Describe in Part XIII the intended uses of the	organization's endo	wment f	unds.							
Description of property (a) Cost or other basis (investment) (b) Cost or other basis (other) (c) Accumulated depreciation (d) Book value (d) Book value 27,720. 5,592. 22,128. e Other	Par											
basis (investment) basis (other) depreciation 1a Land b Buildings c Leasehold improvements d Equipment e Other		Complete if the organization answere	d "Yes" on Form 990	0, Part IV	/, line 11a. S	See Form 990	, Part X, li	ne 10.				
b Buildings c Leasehold improvements d Equipment e Other		Description of property	1 ' '							(d) Boo	k valu	е
b Buildings c Leasehold improvements d Equipment e Other	1a	Land	L									
c Leasehold improvements 27,720. 5,592. 22,128. e Other 20,100.												
d Equipment 27,720. 5,592. 22,128. e Other												
e Other			I		2	7,720.		5,592	2.	2	2,1	28.
			I			-		<u> </u>				
				X. colun	nn (B). line 1	0c.)	<u></u>			2	2,1	28.

Schedule D (Form 990) 2021

Schedule D (Form 990) 2021 EARLY CARE	AND LEARNING	COUNCIL	11-2348051 Page 3
Part VII Investments - Other Securities.			
Complete if the organization answered "Yes"	on Form 990, Part IV, line	11b. See Form 990, Part	X, line 12.
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuati	ion: Cost or end-of-year market value
(1) Financial derivatives			
(2) Closely held equity interests			
(3) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(G)			
(H) Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) ▶			
Part VIII Investments - Program Related.			
Complete if the organization answered "Yes"	on Form 990. Part IV. line	11c. See Form 990. Part >	K. line 13.
(a) Description of investment	(b) Book value		ion: Cost or end-of-year market value
	,,	, ,	•
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)			
Part IX Other Assets.			
Complete if the organization answered "Yes"		11d. See Form 990, Part	
	Description		(b) Book value
(1)			
(2)			
(3)			
(5) (6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col. (B) lin	e 15)		
Part X Other Liabilities.	<u> </u>		
Complete if the organization answered "Yes"	on Form 990, Part IV, line	11e or 11f. See Form 990	, Part X, line 25.
1. (a) Description of liability			(b) Book value
(1) Federal income taxes			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			

Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII

Schedule D (Form 990) 2021

(9)

	edule D (Form 990) 2021 EARLY CARE AND LEARNING			348051 Page 4
Pai	t XI Reconciliation of Revenue per Audited Financial State		ıe per Return.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line	e 12a.		
1	Total revenue, gains, and other support per audited financial statements		1	4,347,919.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	1 1		
а	Net unrealized gains (losses) on investments			
b	Donated services and use of facilities			
С	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII.)	2d		
е	Add lines 2a through 2d		2e	0.
3	Subtract line 2e from line 1		3	4,347,919.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b		
С	Add lines 4a and 4b		4c	0.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		5	4,347,919.
Pa	rt XII Reconciliation of Expenses per Audited Financial Sta	tements With Expen	ses per Return	•
	Complete if the organization answered "Yes" on Form 990, Part IV, line	e 12a.		
1	Total expenses and losses per audited financial statements		1	4,091,436.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
а	Donated services and use of facilities	2a		
b	Prior year adjustments	2b		
С				
d	Other (Describe in Part XIII.)	2d		
е	Add lines 2a through 2d		2e	0.
3	Subtract line 2e from line 1			4,091,436.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b		
С	Add lines 4a and 4b		4c	0.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990. Part I. line 18.			4,091,436.
	rt XIII Supplemental Information.	,		
ines	2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any	y additional information.		

Schedule D (Form 990) 2021

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.

Open to Public

OMB No. 1545-0047

Inspection

Internal Revenue Service Name of the organization

Department of the Treasury

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

EARLY CARE AND LEARNING COUNCIL

 $Employer\ identification\ number \\ 11-2348051$

Pa	art I Questions Regarding Compensation	1005	_	
			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990,			
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	First-class or charter travel Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (such as maid, chauffeur, chef)			
b	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	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all 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 organization used to establish the compensation of the 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.			
	Compensation committee Written employment contract			
	Independent compensation consultant Compensation survey or study			
	Form 990 of other organizations X 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			
	organization or a related organization:			
а	Receive a severance payment or change-of-control payment?	4a		X
b	Participate in or receive payment from a supplemental nonqualified retirement plan?	4b		X
С	Participate in or receive payment from an equity-based compensation arrangement?	4c		X
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the revenues of:			
а	The organization?	5a		X
b	Any related organization?	5b		X
	If "Yes" on line 5a or 5b, describe in Part III.			
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		X
b	Any related organization?	6b		Х
	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		Х
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		Х
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 53.4958-6(c)?	9		

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

Schedule J (Form 990) 2021

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

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.

		(B) Breakdown of W-2 and/or 1099-MISC and/or 1099-NEC compensation			(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	in column (B)
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation			reported as deferred on prior Form 990
(1) MEREDITH M CHIMENTO	(i)	144,916.	0.	0.	5,907.	0.		0.
EXECUTIVE DIRECTOR	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
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	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

Part III Supplemental Information
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 O (Form 990)

Supplemental Information to Form 990 or 990-EZ Complete to provide information for responses to specific questions on

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

Attach to Form 990 or Form 990-EZ.

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

2021
Open to Public Inspection

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Name of the organization

EARLY CARE AND LEARNING COUNCIL

Employer identification number 11-2348051

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
EDUCATION WITH EQUAL ACCESS FOR ALL FAMILIES. THIS IS DONE PRIMARILY
THROUGH THE SUPPORT OF, AND IN PARTNERSHIP WITH, A STRONG NETWORK OF
COMMUNITY-BASED ORGANIZATIONS.
FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
THAT PROVIDE CHILD CARE RESOURCE AND REFERRAL SERVICES.
FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS:
VISITS, SEMINARS, REGIONAL TRAININGS, AND OTHER ACTIVITIES DESIGNED TO
INCREASE PARTICIPANTS' KNOWLEDGE AND SKILL ON PRESENTED TOPICS.
FORM 990, PART VI, SECTION A, LINE 6:
THE ORGANIZATION IS ORGANIZED AS A NOT-FOR-PROFIT CORPORATION WITH MEMBERS.
THE MEMBERS ELECT THE MEMBERS OF THE GOVERNING BODY. THE MEMBERS CANNOT
RECEIVE DISTRIBUTIONS OF INCOME OR ASSETS FROM THE ORGANIZATION.
FORM 990, PART VI, SECTION A, LINE 7A:
MEMBERS ELECT THE MEMBERS OF THE GOVERNING BODY.
FORM 990, PART VI, SECTION B, LINE 11B:
A COPY OF THE FORM 990 WAS EMAILED TO EACH BOARD MEMBER FOR THEIR REVIEW
AND COMMENTS BEFORE IT WAS FILED WITH THE INTERNAL REVENUE SERVICE.
FORM 990, PART VI, SECTION B, LINE 12C:

132211 11-11-21

OFFICERS, DIRECTORS,

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

Schedule O (Form 990) 2021

TRUSTEES AND KEY EMPLOYEES SIGN A FORM YEARLY TO

<u>Schedule O (Form 990) 2021</u> Page **2**

Schedule O (Form 990) 2021	Page 2
Name of the organization EARLY CARE AND LEARNING COUNCIL	Employer identification number 11-2348051
DISCLOSE INTERESTS THAT COULD GIVE RISE TO CONFLICTS. ALL	CONFLICTS ARE
RESOLVED IN A TIMELY MANNER.	
FORM 990, PART VI, SECTION B, LINE 15:	
THE BOARD REVIEWS THE COUNCIL OF COMMUNITY SERVICES SALARY	RATING- JOB
RATING AND SALARY SCHEDULE IN ORDER TO DETERMINE THE CEO 8	KEY EMPLOYEES'
SALARIES.	
FORM 990, PART VI, SECTION C, LINE 19:	
DISCLOSURES OF GOVERNING DOCUMENTS ARE MADE AVAILABLE THRO	OUGH NEW YORK
STATE'S ATTORNEY GENERAL, AS WELL AS THE GUIDESTAR WEBSITE	. ADDITIONALY,
THE COUNCIL WILL MAKE PUBLIC UPON WRITTEN REQUEST FOR 990,	AUDITED
FINANCIAL STATMENTS, GOVERNING DOCUMENTS, AND THE CONFLICT	OF INTEREST
POLICY.	
FORM 990, PART IX, LINE 11G, OTHER FEES:	
CONSULTING SERVICES:	
PROGRAM SERVICE EXPENSES	1,868,325.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	1,868,325.
PAYROLL SERVICE:	
PROGRAM SERVICE EXPENSES	3,282.
MANAGEMENT AND GENERAL EXPENSES	463.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	3,745.

Schedule O (Form 990) 2021

Schedule O (Form 990) 2021 Page **2**

Name of the organization EARLY CARE AND LEARNING COUNCIL	Employer identification number 11-2348051
FSA MAINTENANCE FEES:	
PROGRAM SERVICE EXPENSES	834.
MANAGEMENT AND GENERAL EXPENSES	115.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	949.
TOTAL OTHER FEES ON FORM 990, PART IX, LINE 11G, COL A	1,873,019.

Financial Statements and Required Reports as of December 31, 2021 and 2020

Together with Independent Auditor's Report



Bonadio & Co., LLP

INDEPENDENT AUDITOR'S REPORT

June 28, 2022

To the Board of Directors of Early Care and Learning Council:

Report on the Audit of the Financial Statements

Opinion

We have audited the accompanying financial statements of Early Care and Learning Council (a New York not-for-profit corporation), which comprise the statement of financial position as of December 31, 2021, and the related statements of activities, functional expenses, and cash flows for the year then ended, and the related notes to the financial statements.

In our opinion, the financial statements referred to above present fairly, in all material respects, the financial position of Early Care and Learning Council as of December 31, 2021, and the changes in its net assets and its cash flows for the year then ended, in accordance with accounting principles generally accepted in the United States of America.

Basis for Opinion

We conducted our audit in accordance with auditing standards generally accepted in the United States of America. Our responsibilities under those standard are further described in the Auditor's Responsibilities for the Audit of the Financial Statements section of our report. We are required to be independent of Early Care and Learning Council and to meet our other ethical responsibilities in accordance with the relevant ethical requirements relating to our audit. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

Prior Period Financial Statements

The financial statements of Early Care and Learning Council as of and for the year ended December 31, 2020 were audited by other auditors whose report dated June 15, 2021 expressed an unmodified opinion on those statements.

Responsibilities of Management for the Financial Statements

Management is responsible for the preparation and fair presentation of these financial statements in accordance with accounting principles generally accepted in the United States of America; and for the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error.

In preparing the financial statements, management is required to evaluate whether there are conditions or events, considered in the aggregate, that raise substantial doubt about Early Care and Learning Council's ability to continue as a going concern within one year after the date that the financial statements are available to be issued.

6 Wembley Court Albany, New York 12205 p (518) 464-4080 f (518) 464-4087

www.bonadio.com

INDEPENDENT AUDITOR'S REPORT

(Continued)

Auditor's Responsibilities for the Audit of the Financial Statements

Our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance but is not absolute assurance and therefore is not a guarantee that an audit conducted in accordance with generally accepted auditing standards will always detect a material misstatement when it exists. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control. Misstatements are considered material if there is a substantial likelihood that, individually or in the aggregate, they would influence the judgment made by a reasonable user based on the financial statements.

In performing an audit in accordance with generally accepted auditing standards, we:

- Exercise professional judgment and maintain professional skepticism throughout the audit.
- Identify and assess the risks of material misstatement of the financial statements, whether due
 to fraud or error, and design and perform audit procedures responsive to those risks. Such
 procedures include examining, on a test basis, evidence regarding the amounts and
 disclosures in the financial statements.
- Obtain an understanding of internal control relevant to the audit in order to design audit
 procedures that are appropriate in the circumstances, but not for the purpose of expressing an
 opinion on the effectiveness of the Early Care and Learning Council's internal control.
 Accordingly, no such opinion is expressed.
- Evaluate the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluate the overall presentation of the financial statements.
- Conclude whether, in our judgment, there are conditions or events, considered in the aggregate, that raise substantial doubt about the Early Care and Learning Council's ability to continue as a going concern for a reasonable period of time.

We are required to communicate with those charged with governance regarding, among other matters, the planned scope and timing of the audit, significant audit findings, and certain internal control-related matters that we identified during the audit.

Bonadio & Co., LLP

STATEMENTS OF FINANCIAL POSITION DECEMBER 31, 2021 AND 2020

ASSETS	<u>2021</u>	<u>2020</u>
CURRENT ASSETS: Cash Accounts and grants receivable Prepaid expenses	\$ 953,005 1,138,609 13,246	\$ 777,326 793,887 9,852
Total current assets	2,104,860	1,581,065
PROPERTY AND EQUIPMENT, net	22,128	7,980
	\$ 2,126,988	\$ 1,589,045
LIABILITIES AND NET ASSETS		
CURRENT LIABILITIES: Accounts payable Accrued expenses	\$ 298,183 61,745	\$ 28,452 50,016
Total current liabilities	359,928	78,468
NET ASSETS: Without donor restrictions Undesignated Designated by the Board of Directors With donor restrictions	314,701 1,451,982 377	292,233 1,217,967 377
Total net assets	1,767,060	1,510,577
	\$ 2,126,988	\$ 1,589,045

STATEMENTS OF ACTIVITIES FOR THE YEARS ENDED DECEMBER 31, 2021 AND 2020

NET ASSETS WITHOUT DONOR RESTRICTIONS	<u>2021</u>	<u>2020</u>
REVENUE AND SUPPORT: Grants Membership dues Meetings, retreats, and fees Staff consulting Fundraising Other	\$ 4,233,641 75,847 - 9,475 3,130 3,298	\$ 2,851,004 75,847 1,500 14,200 1,505 5,500
Total revenue and support	 4,325,391	 2,949,556
EXPENSES: Child care resource and referral day care training Birth to 5 OCFS Stabilization TA Robin Hood Foundation grant Hunger Solutions Membership services and special events Staff consultant services Sublease and other costs Management and general	2,491,923 912,521 118,689 239,987 9,997 58,729 3,025 25,389 231,176	 2,095,267 20,468 - 51,408 57,061 7,616 27,009 217,858
Total expenses	 4,091,436	 2,476,687
CHANGE IN NET ASSETS FROM OPERATIONS	233,955	472,869
NON-OPERATING REVENUE: Interest income Rental income	 272 22,256	 467 22,269
CHANGE IN NET ASSETS	 256,483	 495,605
NET ASSETS - beginning of year	 1,510,577	 1,014,972
NET ASSETS - end of year	\$ 1,767,060	\$ 1,510,577

STATEMENT OF FUNCTIONAL EXPENSES FOR THE YEAR ENDED DECEMBER 31, 2021

EXPENSES:	CCR&R Day Care Training		OCFS Stabilization TA	Robin Hood Foundation Grant	Hunger Solutions	Membership Services and Special Events	Staff Consultant <u>Services</u>	Sublease and Other Costs	Total Program Services <u>Expenses</u>	Management and General	Total Expenses
Salaries	\$ 928,081	\$ 252,632	\$ 85,282	\$ 6,695	\$ 3,547	\$ 34,042	\$ 2,500	\$ -	\$ 1,312,779	\$ 184,605	\$ 1,497,384
Payroll taxes and benefits	131,900	39,439	11,978	1,100	694	6,717	306	-	192,134	24,387	216,521
Conferences and training	130,053	946	238	16	25	3,901	-	_	135,179	650	135,829
Dues and subscriptions	50,857	4,577	156	14	94	988	219	_	56,905	1,445	58,350
Depreciation	1,520	428	112	9	6	54		_	2,129	-	2,129
Equipment rental and maintenance	17,642	4,616	1,317	131	37	(1,773)	_	2,596	24,566	2,793	27,359
Insurance	4,600	1,342	260	21	13	203	_	-	6,439	898	7,337
Interest and bank fees	-	,	-	-	_	698	_	-	698	-	698
Office rent	58,053	16,057	4,521	365	241	2,509	_	22,256	104,002	11,474	115,476
Office supplies and postage	17,103	8,402	4,826	-	1	1,907	_	537	32,776	8	32,784
Other	831	219	66	7	5	2,824	_	-	3,952	362	4,314
Printing	714	1,949	1,625	-	3,178	-	-	-	7,466	-	7,466
Professional fees	1,062,197	577,886	7,163	231,600	2,100	5,871	_	-	1,886,817	2,294	1,889,111
Telephone	12,545	3,859	539	29	56	514	-	-	17,542	2,260	19,802
Training material and facilities	74,065	-	-	-	-	-	-	-	74,065	-	74,065
Travel	1,762	169	606			274			2,811		2,811
Total expenses	\$ 2,491,923	\$ 912,521	\$ 118,689	\$ 239,987	\$ 9,997	\$ 58,729	\$ 3,025	\$ 25,389	\$ 3,860,260	\$ 231,176	\$ 4,091,436

STATEMENT OF FUNCTIONAL EXPENSES FOR THE YEAR ENDED DECEMBER 31, 2020

EXPENSES:		R&R Day e Training	<u>E</u>	Birth to 5		Hunger olutions	Serv	nbership vices and ial Events		Staff onsultant Services		ease and ner Costs		al Program Services Expenses		nagement <u>d General</u>	<u> </u>	Total Expenses
Salaries	\$	992,025	\$	14.872	\$	27,556	\$	39,397	\$	4,524	\$	_	\$	1,078,374	\$	173,868	\$	1,252,242
Payroll taxes and benefits	•	139,151	•	(61)	•	3,805	•	5,943	•	182	·	-	•	149,020	•	22,236	•	171,256
Conferences and training		38,119		88		221		1,381		-		-		39,809		527		40,336
Dues and subscriptions		25,515		32		(135)		1,591		219		-		27,222		118		27,340
Depreciation		7,082		26		47		70		-		-		7,225		-		7,225
Equipment rental and maintenance		25,945		155		457		(3,494)		-		4,137		27,200		3,090		30,290
Insurance		4,254		106		108		177		-		-		4,645		756		5,401
Interest and bank fees		-		-		-		485		-		-		485		-		485
Office rent		74,326		1,021		1,953		2,551		-		22,256		102,107		13,456		115,563
Office supplies and postage		7,976		1,769		668		313		-		616		11,342		5		11,347
Other		1,406		67		(288)		2,304		24		-		3,513		196		3,709
Printing		2,349		2,000		8,061		610		-		-		13,020		-		13,020
Professional fees		753,230		-		8,557		4,658		-		-		766,445		2,734		769,179
Telephone		15,471		393		398		544		-		-		16,806		872		17,678
Training material and facilities		5,747		-		-		-		2,667		-		8,414		-		8,414
Travel		2,671		<u>-</u>		<u>-</u>		531					_	3,202		<u>-</u>		3,202
Total expenses	\$	2,095,267	\$	20,468	\$	51,408	\$	57,061	\$	7,616	\$	27,009	\$	2,258,829	\$	217,858	\$	2,476,687

STATEMENTS OF CASH FLOWS FOR THE YEARS ENDED DECEMBER 31, 2021 AND 2020

	2021	<u>2020</u>
CASH FLOW FROM OPERATING ACTIVITIES: Change in net assets Adjustments to reconcile change in net assets to net cash flow from operating activities:	\$ 256,483	\$ 495,605
Depreciation Changes in:	2,129	7,225
Accounts and grants receivable Prepaid expenses Accounts payable Accrued expenses Deferred revenue	 (344,722) (3,394) 269,731 11,729	(134,623) 87 (12,467) 10,297 (3,000)
Net cash flow from operating activities	 191,956	 363,124
CASH FLOW FROM INVESTING ACTIVITIES: Purchases of property and equipment Net cash flow from investing activities	 (16,278)	 <u>-</u>
CHANGE IN CASH	175,678	363,124
CASH - beginning of year	 777,326	 414,202
CASH - end of year	\$ 953,004	\$ 777,326

NOTES TO FINANCIAL STATEMENTS DECEMBER 31, 2021 AND 2020

1. THE COUNCIL

The Early Care and Learning Council (Council) was incorporated in April 1975 as a New York not-for-profit corporation. The Council was formed to coordinate, assist, strengthen, and promote childcare services in the State of New York and to provide a mechanism whereby childcare councils and other interested organization, individuals, and agencies may join together to accomplish shared goals.

2. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

Basis of Accounting

The Council's financial statements have been prepared in conformity with accounting principles generally accepted in the United States.

Use of Estimates

The preparation of financial statements in conformity with generally accepted accounting principles requires management to make estimates and assumptions that affect the amounts reported in the financial statements and accompanying notes. Actual results could differ from those estimates.

Cash

Cash includes bank demand deposit accounts. The Council's cash balances may at times exceed federally insured limits. The Council has not experienced any losses in these accounts and believes it is not exposed to any significant risk with respect to cash.

Accounts and Grants Receivable

Accounts and grants receivable primarily include uncollateralized obligations from government grants and contracts under customary credit terms. Accounts receivable are generally billed monthly or quarterly and payment is generally due in 30 days.

Accounts for which no payments have been received for several months are considered delinquent and customary collection efforts are begun. After all collection efforts are exhausted, the account is written off. The Council records an allowance for bad debts in anticipation of future write-offs. Based upon historical performance and a review of outstanding receivables, management has determined that an allowance for bad debts is not necessary as of December 31, 2021 and 2020.

Property and Equipment

Property and equipment are stated at cost, less accumulated depreciation. Expenditures for acquisitions, renewals, and betterments are capitalized, whereas maintenance and repair costs are expensed as incurred. When property and equipment are retired or otherwise disposed of, the appropriate accounts are relieved of cost and accumulated depreciation, and any resultant gain or loss is credited or charged to income. Depreciation is computed over the estimated useful lives of the respective assets using the straight-line method with lives of five years.

2. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (Continued)

Financial Reporting

In the accompanying financial statements, net asset categories that have similar characteristics have been combined into two net asset categories; with donor restrictions and without donor restrictions.

Net assets without restrictions include resources which are available for the support of the Council's operating activities. This category may also include resources designated by the Board for specific purposes. The Board of Directors has designated approximately \$1,452,000 and \$1,218,000 of net assets without donor restrictions for on-time, nonrecurring expenses or special events in the future as of December 31, 2021 and 2020, respectively. Suitable uses may include, but are not limited to, building capacity (e.g. staff development or research and development), supporting advocacy efforts, and carrying out strategic initiatives of the Council.

Net assets with donor restrictions include resources that have been donated to the Council subject to purpose or time restrictions as defined by the donor. These donations are restricted for scholarships.

Contributions

All contributions are considered to be available for unrestricted use unless specifically restricted by the donor. Amounts received that are designated for future periods or restricted by the donor for specific purposes are reported as net assets with donor restrictions. When a donor restriction expires, net assets with donor restrictions are reclassified to net assets without donor restrictions and reported in the statements of activities as net assets released from restrictions.

Revenue from Contracts with Customers

The Council assesses the contract term as the period in which the parties to the contract have presently enforceable rights and obligations. The transaction price is the amount of consideration to which the Council expects to be entitled in exchange for transferring goods and services to the customer. Revenue from sales is recorded based on the transaction prices, which are generally established in the contract. The amounts are recorded as "Staff Consulting" and "Meetings, Retreats, and Fees" on the accompanying statement of activities.

Staff consulting revenue relates to training and coaching activities provided to State and local governments, nonprofit organizations, and private businesses. This revenue is recognized at the point in time when the service happens, which is when the Council achieves its performance obligation. The consulting agreements are fixed fee and generally invoiced based on the contractual agreement between the parties, typically on a monthly basis. Amounts received but not yet earned, if any, are reported as deferred revenue.

The Council holds conferences, meetings and special events for which they receive registration fees and sponsorships. Revenue from such events is recognized at the point in time when the event happens, which is when the Council achieves its performance obligation. Transaction prices for these fees are set by the Council for each event. Payment is expected upon registration.

The Council receives support from membership dues, which are nonrefundable and relate to a membership period that corresponds with the calendar year. Membership dues are billed and recognized within the membership period and may be paid in full or quarterly installments throughout the period.

The Council did not record any implicit price concessions for the years ended December 31, 2021 and 2020.

2. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (Continued)

Grant Revenue

Revenues from government grants are recognized according to the specific agreement. Generally, revenue from grants are considered non-exchange transactions. Grant revenue is recognized when conditions that are specific to each grant agreement are overcome, which is largely to the extent of project expenses incurred.

Income Taxes

The Council is a New York not-for-profit corporation exempt from income taxes as an Council qualified under Section 501(c)(3) of the Internal Revenue Code. The Council has also been classified by the Internal Revenue Service as an entity that is not a private foundation.

Functional Expenses

The costs of providing the various programs and other activities have been summarized on a functional basis in the statement of activities. Accordingly, certain costs have been allocated amongst the programs and supporting services benefited. Expenses that are allocated include conferences and training, dues and subscriptions, equipment and maintenance, insurance, office rent, office supplies and postage, other, professional fees, and telephone, which are allocated based on salaries. Salaries and payroll taxes are allocated on the basis of estimated time and effort.

3. LIQUIDITY AND AVAILABILITY OF FINANCIAL ASSETS

The Council is substantially supported by government funders generated by its operations. In addition, some support is received from donors. The following reflects the Council's financial assets at December 31, 2021 and 2020 available within one year of the statement of financial position date:

position date.	2021	2020
Financial assets at December 31:		
Cash	\$ 953,005	\$ 777,329
Accounts receivable, net	 1,138,609	793,887
Total financial assets	2,091,614	1,571,216
Less: financial assets unavailable for general		
expenditures within one year, due to:		
Board designated net assets	(1,451,982)	(1,217,967)
Subject to satisfaction of donor restrictions	 (377)	 (377)
Total financial assets avaliable to meet cash needs for		
general expenditures within one year	\$ 639,255	\$ 352,872

The Council has a policy to structure its financial assets to meet its obligations as they come due. The Council's ability to meet its cash needs is highly dependent on timely collection of its account receivable. The Council's accounts receivable are due primarily from government funders. Many of these arrangements require the Council to incur costs in advance and then bill for reimbursements after the cash outlay has been made. The Council has designed procedures to collect from these payors as quickly as possible. However, timeliness of these payments can sometimes be difficult to predict. Due to this factor, the Council has a line-of-credit available (see Note 5), which is can draw upon throughout the year to support the Council's short-term liquidity needs. In addition, the board designated net assets could be used in the event of any unanticipated liquidity need with board approval.

4. PROPERTY AND EQUIPMENT

Property and equipment consisted of the following at December 31:

	<u>2021</u>	<u>2020</u>
Office equipment, computers and furniture Less: Accumulated depreciation	\$ 27,720 \$ (5,592)	10,640 (2,660)
Property and equipment, net	\$ 22,128 \$	7,980

Certain property and equipment were purchased with funds provided through federal grants. The title of these assets' rests with the Council, however, the grant specifies that they should be used to benefit program activities. There were no federally funded grant purchases of property and equipment for the years ended December 31, 2021 and 2020.

Depreciation expense was approximately \$2,100 and \$7,200 for the years ended December 31, 2021 and 2020, respectively.

5. LINE-OF-CREDIT

The Council has a \$300,000 unsecured line-of-credit with M&T Bank, which currently bears interest at prime plus 1% (4.25% at December 31, 2021). There was no balance outstanding on the line-of-credit as of December 31, 2021 and 2020.

6. RETIREMENT PLAN

The Council has adopted a Simplified Employee Pension Plan (SEP) which covers all employees that meet certain eligibility requirements. Contributions are discretionary and the rate of contribution is determined by the Board of Directors. The amount of pension cost was \$58,200 and \$43,800 for the years ended December 31, 2021 and 2020, respectively.

7. COMMITMENTS AND CONTINGENCIES

Operating Leases

The Council entered into a lease agreement for administrative office space, with a monthly rent of approximately \$9,600 expiring in 2022. In addition, the Council leases office equipment. The lease expires during April 2022 with lease payments of approximately \$400 per month. Total expense for office space and equipment was approximately \$121,200 and \$120,300 for 2021 and 2020, respectively.

Rental Revenue

The Council entered into three sublease agreements to rent a portion of its office space. The leases require rental payments totaling approximately \$1,900 per month and expire at the end of each calendar year. The rental income was approximately \$22,300 for the years ended December 31, 2021 and 2020.

7. COMMITMENTS AND CONTINGENCIES (Continued)

Revenue Concentrations

Grants from the U.S. Department of Health and Human Services (HHS) passed through the New York Office of Children and Family Services, accounting for approximately 92% and 95% of total revenues and other support for the years ended December 31, 2021 and 2020, respectively.

Approximately 96% and 92% of accounts and grants receivable was due from this funding source as of December 31, 2021 and 2020, respectively.

Regulatory Compliance

The Council is subject to audits and review of reimbursable costs by various governmental agencies. The outcome of the audits and reviews may have the effect of retroactively increasing or decreasing revenue from grants. These charges, if any, will be recognized in accordance with the rules and guidelines established by the various funding sources. Compliance with such laws and regulations can be subject to future governmental review and interpretations as well as regulatory actions unknow or unasserted at this time.

COVID-19

The United States is presently in the midst of a national health emergency related to a virus, commonly known as Novel Coronavirus (COVID-19). The overall consequences of COVID-19 on a national, regional, and local level are unknown, but it has the potential to result in a significant economic impact. However, the impact of this situation on the Council's future results and financial position is not presently determinable.

8. SUBSEQUENT EVENTS

Subsequent events have been evaluated through June 28, 2022, which is the date the financial statements were available to be issued.