PUBLIC DISCLOSURE COPY - STATE REGISTRATION NO. 106331

<u>990</u> Form

Department of the Treasury Internal Revenue Service

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

▶ Do not enter social security numbers on this form as it may be made public. ► Go to www.irs.gov/Form990 for instructions and the latest information.



Αŀ	or th	e 2020 calendar year, or tax year beginning and	ending					
B c a	heck if pplicab	e: C Name of organization		D Employer identifie	cation number			
	Addre							
	Name Chang	Doing business as		95-46352	95			
	Initial return		Room/suite	E Telephone number				
	Final			562-997-				
	termir ated	City or town, state or province, country, and ZIP or foreign postal code		G Gross receipts \$	1,620,548.			
	Amen	LONG BEACH, CA 90000		H(a) Is this a group re	turn			
		F Name and address of principal officer.		for subordinates	? Yes X No			
	pendi	SAME AS C ABOVE		H(b) Are all subordinates in	cluded? Yes No			
		empt status: 🚺 501(c)(3) 🛄 501(c) ()◀ (insert no.) 🛄 4947(a)(1) d	or 🛄 527	If "No," attach a	list. See instructions			
-		te: WWW.CHILDRENTODAY.ORG		H(c) Group exemption				
KF	orm o	f organization: 🔀 Corporation 🔄 Trust 🔄 Association 🔄 Other 🕨	L Year	of formation: 1997 N	State of legal domicile: CA			
Pa	art I							
ø	1	Briefly describe the organization's mission or most significant activities: TO PI	ROVIDE	COMMUNITY	BASED			
anc		SERVICES TO CHILDREN AND FAMILIES EXPERIN						
Governance	2	Check this box 🕨 🛄 if the organization discontinued its operations or dispos	sed of more	than 25% of its net as				
Š	3				14			
.∞		Number of independent voting members of the governing body (Part VI, line 1b) $\ _{\rm .}$		14				
Activities &		Total number of individuals employed in calendar year 2020 (Part V, line 2a)		22				
ivit		Total number of volunteers (estimate if necessary)			15 0.			
Act		Total unrelated business revenue from Part VIII, column (C), line 12						
	b	Net unrelated business taxable income from Form 990-T, Part I, line 11	·····	7b	0.			
				Prior Year	Current Year			
e	8	Contributions and grants (Part VIII, line 1h)		1,790,926.	1,603,395.			
Revenue	9	Program service revenue (Part VIII, line 2g)		0.	0.			
Bev		Investment income (Part VIII, column (A), lines 3, 4, and 7d)		3,607.	8,265.			
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		-194,362.	-3,780.			
		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		1,600,171.	1,607,880.			
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		0.	0.			
	14	Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.			
es		Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) $$		941,272.	855,931.			
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.			
Ц.		Total fundraising expenses (Part IX, column (D), line 25) 16,93			470 020			
		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		455,424.	478,930.			
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		1,396,696.	1,334,861.			
<u> </u>	19	Revenue less expenses. Subtract line 18 from line 12		203,475.	273,019.			
Net Assets or Fund Balances			Be	ginning of Current Year	End of Year			
Bala		Total assets (Part X, line 16)	······	5,115,209.	5,344,837.			
et A Ind I		Total liabilities (Part X, line 26)		697,970.	651,094.			
		Net assets or fund balances. Subtract line 21 from line 20		4,417,239.	4,693,743.			
1 1 2								

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

Sign	Signature of officer Date										
Here	ELIA ROCHA, INTERIM EXECUTIVE DIRECTOR										
	Type or print name and title										
	Print/Type preparer's name Preparer's signature Date Check	PTIN									
Paid		01219191									
Preparer	Firm's name EVERGREEN ALLIANCE PROFESSIONAL CORP.	1400078									
Use Only	Firm's address 4332 CERRITOS AVE, SUITE A105										
LOS ALAMITOS, CA 90720 Phone no.714-372-8110											
May the II	May the IRS discuss this return with the preparer shown above? See instructions										
032001 12-2	23-20 LHA For Paperwork Reduction Act Notice, see the separate instructions.	Form 990 (2020)									
S	SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION										

	1990 (2020) CHILDREN TODAY, INC.	95-4635295 _{Page}
Par	rt III Statement of Program Service Accomplishments	
	Check if Schedule O contains a response or note to any line in this Part III	L
1	Briefly describe the organization's mission: TO PROVIDE COMMUNITY BASED SERVICES TO CHILDREN AND	EAMTI TEC
	EXPERIENCING HOMELESSNESS, FOSTERING LONG-TERM FAMI	
	SUCCESS.	DI SIADIDITI AND
2	Did the organization undertake any significant program services during the year which were not listed o	on the
	prior Form 990 or 990-EZ?	
	If "Yes," describe these new services on Schedule O.	
3	Did the organization cease conducting, or make significant changes in how it conducts, any program s	ervices?Yes X N
	If "Yes," describe these changes on Schedule O.	
4	Describe the organization's program service accomplishments for each of its three largest program ser	
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocation	is to others, the total expenses, and
	revenue, if any, for each program service reported.	
4a	(Code:) (Expenses \$ 1,047,147. including grants of \$ PROVIDES NO-COST, HIGH QUALITY, EARLY CARE AND EDUC	
	SUPPORT SERVICES THROUGH ITS ECO HOUSE FACILITY. EC	
	TO SERVE CHILDREN AND FAMILIES EXPERIENCING HOMELES	
	MALTREATMENT. IN 2020, 68 CHILDREN WERE SERVED AT E	•
	AND VIRTUALLY, FOR A TOTAL OF 12,551 DAYS OF SERVIC	
	<u></u>	
4b	(Code:) (Expenses \$ including grants of \$) (Revenue \$
4c	(Code:) (Expenses \$ including grants of \$) (Revenue \$
4 -1		
4d	Other program services (Describe on Schedule O.)	,
40	(Expenses \$ including grants of \$) (Revenue \$ Total program service expenses ► 1,047,147.)
4e	Total program service expenses 1,047,147.	Form 990 (20)
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JZ002	3	
30	728 161399 2105 2020.04000 CHILDREN TODAY,	INC. 2105

Form	990	(2020)

CHILDREN TODAY, INC. Part IV Checklist of Required Schedules

			Vaa	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Yes X	No
2	If "Yes," complete Schedule A	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		x
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			x
5	during the tax year? <i>If</i> "Yes," <i>complete Schedule C, Part II</i> Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or	4		
5	similar amounts as defined in Revenue Procedure 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			
	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 Schedule D, Part III</i>	8		x
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		x
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments	–		
10	or in quasi endowments? If "Yes," complete Schedule D, Part V	10	x	
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,		v	
	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			v
	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			x
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		_ <u> </u>
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			v
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X X
	Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>	11e		
T	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses		x	
10-	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X</i>	11f	- 23	
128	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	x	
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		X
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,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If</i> "Yes," <i>complete Schedule F, Parts III and IV</i>	16		x
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I</i>	17		x
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	– "		
10	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		20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
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 CHILDREN TODAY, INC.

 Part IV
 Checklist of Required Schedules (continued)

22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on		Yes	No
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
3	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
4a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If</i> " <i>Yes</i> ," <i>answer lines 24b through 24d and complete</i>			
	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		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
Бa	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	05-		x
h	transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>	25a		
D	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
3	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
7	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	27		x
3	entity (including an employee thereof) or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>	21		- 11
	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		X
С	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b?If			v
)	"Yes," complete Schedule L, Part IV	28c 29		X X
)	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation	29		
	contributions? If "Yes," complete Schedule M	30		x
	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		Х
2	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	32		x
3	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
1	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			x
5-2	Part V, line 1 Did the organization have a controlled entity within the meaning of section 512(b)(13)?	34 35a		X
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	000		
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
	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
7	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	07		x
8	and that is treated as a partnership for federal income tax purposes? <i>If</i> "Yes," <i>complete Schedule R, Part VI</i>	37		
,	Note: All Form 990 filers are required to complete Schedule O	38	x	
Par	t V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a			
	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0 Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
C	(gambling) winnings to prize winners?	1c	x	
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Par	t V Statements Regarding Other IRS Filings and Tax Compliance (continued)						
			Yes	No			
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,						
	filed for the calendar year ending with or within the year covered by this return 2a 22	-					
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 <i>e-file</i> (see instructions)						
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X			
	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			v			
	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).	_		v			
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X X			
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		_ A			
	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	0		x			
h	any contributions that were not tax deductible as charitable contributions?	6a		- 23			
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts	Gh					
7	were not tax deductible? Organizations that may receive deductible contributions under section 170(c).	6b					
7	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				
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7a 7b	X				
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required						
C	to file Form 8282?	7c		x			
Ь	If "Yes," indicate the number of Forms 8282 filed during the year 7d	10					
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		х			
f							
	g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?						
•	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7g 7h					
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the						
	sponsoring organization have excess business holdings at any time during the year?	8					
9	Sponsoring organizations maintaining donor advised funds.						
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a					
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b					
10	Section 501(c)(7) organizations. Enter:						
а	Initiation fees and capital contributions included on Part VIII, line 12 10a						
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b						
11	Section 501(c)(12) organizations. Enter:						
а	Gross income from members or shareholders 11a	_					
b	Gross income from other sources (Do not net amounts due or paid to other sources against						
	amounts due or received from them.)	_					
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a					
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b	4					
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 13c	44.		X			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a					
	If "Yes," has it filed a Form 720 to report these payments? <i>If "No," provide an explanation on Schedule O</i>	14b					
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or	15		x			
	excess parachute payment(s) during the year?	15					
16		16		x			
	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?						
	, , ,						

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Form 990 (202	20)
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CHILDREN TODAY, INC.

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.

	Check if Schedule O contains a response or note to any line in this Part VI					Σ
Sec	tion A. Governing Body and Management				r	-
		1.1	1 /		Yes	N
1 a	Enter the number of voting members of the governing body at the end of the tax year	1a	14			
	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.		1 /			
	Enter the number of voting members included on line 1a, above, who are independent		14			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship			-	v	
_	officer, director, trustee, or key employee?			2	X	┢
3	Did the organization delegate control over management duties customarily performed by or under	-				
	of officers, directors, trustees, or key employees to a management company or other person?			3		
4	Did the organization make any significant changes to its governing documents since the prior Form			4		\vdash
5	Did the organization become aware during the year of a significant diversion of the organization's a			5		\vdash
6	Did the organization have members or stockholders?			6		
7a	Did the organization have members, stockholders, or other persons who had the power to elect or					
	more members of the governing body?			7a		
b	Are any governance decisions of the organization reserved to (or subject to approval by) members	, stockholders	s, or			
	persons other than the governing body?			7b		
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the y	-	-		37	
а	The governing body?			8a	X	┞
b	Each committee with authority to act on behalf of the governing body?			8b	X	┞
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be re-					
	organization's mailing address? If "Yes," provide the names and addresses on Schedule O			9		
ec	tion B. Policies (This Section B requests information about policies not required by the Internal	Revenue Cod	e.)			г
_					Yes	┞
	Did the organization have local chapters, branches, or affiliates?			10a		┞
b	If "Yes," did the organization have written policies and procedures governing the activities of such					
	and branches to ensure their operations are consistent with the organization's exempt purposes?			10b	37	┞
	Has the organization provided a complete copy of this Form 990 to all members of its governing bo	ody before filir	ng the form?	11a	X	
-	Describe in Schedule O the process, if any, used by the organization to review this Form 990.				v	
2a	Did the organization have a written conflict of interest policy? <i>If "No," go to line 13</i>			12a	X X	┝
b				12b		┝
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If				v	
	in Schedule O how this was done			12c	X X	┝
13	Did the organization have a written whistleblower policy?			13	X	┝
4	Did the organization have a written document retention and destruction policy?			14	<u> </u>	
15	Did the process for determining compensation of the following persons include a review and appro		ndent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision				37	
	The organization's CEO, Executive Director, or top management official			15a	X	
b	Other officers or key employees of the organization			15b		
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).					
6a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrang					
	taxable entity during the year?			16a		
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate		pation			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the org	janization's				
	exempt status with respect to such arrangements?			16b		
	tion C. Disclosure					
7	List the states with which a copy of this Form 990 is required to be filed CA			<u> </u>		
8	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990,	and 990-T (Se	ection 501(c)(3)s only	/) avai	a
	for public inspection. Indicate how you made these available. Check all that apply.					
~		in on Schedu	,			
9	Describe on Schedule O whether (and if so, how) the organization made its governing documents,	conflict of inte	erest policy, an	id final	ncial	
	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 to $F_{0,0}$	books and rec	ords 🕨			
	THE ORGANIZATION - 562-997-8800					
	2951 LONG BEACH BLVD, LONG BEACH, CA 90806			-	000	/-
\$2006	5 12-23-20 7			Form	1 990	(2
<u>م</u> د	7 729 161200 2105 2020 04000 GUILLINER MODA	7 7370		01/	רב	
3 U	728 161399 2105 2020.04000 CHILDREN TODAY	r, INC.		21(_כו	

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

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

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
 List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation.

Enter -0- in columns (D), (E), and (F) if no compensation was paid.

• List all of the organization's current key employees, if any. See instructions for definition of "key employee."

• List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.

т

• List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

• List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

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

(A)	(B)	(C)		(D)	(E)	(F)				
Name and title	Average	(do	Position (do not check more than one		Reportable	Reportable	Estimated			
	hours per	box	(do not check more than one box, unless person is both an officer and a director/trustee)		compensation	compensation	amount of			
	week		cer ar	10 a 0	recto	or/trus	itee)	from	from related	other
	(list any	Individual trustee or director						the	organizations	compensation
	hours for related	e or d	tee			sated		organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization
	organizations	rustee	l trus		/ee	mpen		(1099-10130)		and related
	below	d ual t	Institutional trustee	L_	Key employee	st col	5			organizations
	line)	Indivi	Institu	Officer	Keye	Highest compensated employee	Former			0
(1) MARISA SEMENSE	5.00									
PRESIDENT		X		X				0.	0.	0.
(2) MASY BUNNELL	4.00									
VICE PRESIDENT		X		X				0.	0.	0.
(3) CHRISTINE LORENZETTI	4.00									
VICE PRESIDENT		X		X				0.	0.	0.
(4) PAULA-ROSE WIHONGI	5.00									
TREASURER		X		X				0.	0.	0.
(5) THERESA BIXBY	5.00									
DIRECTOR		X						0.	0.	0.
(6) ALEX CHERIN	3.00									
DIRECTOR		X						0.	0.	0.
(7) MICHAEL CHUN	4.00									
SECRETARY (AS OF 6/20/20)		X		X				0.	0.	0.
(8) JUDE CORREA	3.00									
DIRECTOR		X						0.	0.	0.
(9) BONNIE LOWENTHAL	3.00									
DIRECTOR		X						0.	0.	0.
(10) PHILLIP MAZZOCCO	3.00									
DIRECTOR		Х						0.	0.	0.
(11) HEATHER MORO	3.00									
DIRECTOR		Х						0.	0.	0.
(12) ROBIN PERRY	3.00									_
DIRECTOR		Х						0.	0.	0.
(13) MAC SULLIVAN	3.00									_
DIRECTOR		X						0.	0.	0.
(14) JOSH LOWENTHAL	3.00									
DIRECTOR		х						0.	0.	0.
(1) ELIA ROCHA	40.00									
INTERIM EXECUTIVE DIRECTOR				x				89,537.	0.	3,932.
		-								
022007 10 22 20		L				<u> </u>				Form 990 (2020)

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Form **990** (2020)

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2020.04000 CHILDREN TODAY, INC.

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	990 (2020)			TODAY,								95-4	635	295	P	age 8
Par	t VII Sec		irectors, Trus		ploy	ees			ghe	st C	Compensated Employe					
	(A) Name and title			Average hours per week (list any	(do not check more than one box, unless person is both an officer and a director/trustee)			h an	(D) Reportable compensation from the	(E) Reportable compensatic from relatec organization	on d Is	other compensatio		of		
				hours for related organizations below line)	Individual trustee or director	In stitutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	(W-2/1099-MIS	3C)	org an	rom th anizat d relat anizati	tion ted
	Subtatal										89,537.		0.		<u> </u>	32.
с		n continuation she	ets to Part VI	I, Section A					I		0.		0.			0.
d 2		l lines 1b and 1c) . ber of individuals (ir									89,537. eceived more than \$100	,000 of reportab	0. le		3,9	32.
	compensa	tion from the orgar	nization 🕨												Yes	0 No
3		ganization list any f "Yes," complete Sc					•	•			phest compensated emp	•		3		x
4	For any in	dividual listed on lin	ne 1a, is the su	im of reportab	le co	omp	ensa	ation	n anc	d ot	her compensation from	the organization				x
5	Did any pe	erson listed on line	1a receive or a	accrue comper	nsat	ion f	rom	any	unr	elat	ted organization or indivi		;	4		
Sec		o the organization? ependent Contrac		plete Schedul	e J f	or si	uch j	pers	son .	<u></u>				5		X
1	-	-	-	-							that received more than n the organization's tax		npens	ation 1	rom	
	ine organi	•	(A) and business			ONE		viciri			(B) Description of s		C	(C ompe	C) nsatio	
							_							•		
										-						
										_						
										_						
2	Total num	her of independent	contractors (i	ncluding but n	ot li	mite	d to	the	وم اند		d above) who received m	ore than				
		of compensation fr	•	•		mie		(_	000	
														⊢orm	330 ((2020)

032008 12-23-20

. u						onse	or note to anv lir	ne in this Part VIII			
			Check if Schedule O					(A) Total revenue	(B) Related or exempt function revenue	Unrelated	Revenue excluded
Contributions, Gifts, Grants and Other Similar Amounts	1	а	Federated campaigns		1a						
Gra		b	Membership dues								
Αr Ar		С	Fundraising events				15,417.				
Gif		d	Related organizations		1d						
ns,		е	Government grants (cont	ributic	ons) 1e		863,497.				
er S		f	All other contributions, gifts,	grants	s, and						
ibu			similar amounts not included	labove	e 1f		724,481. 17,395.				
dr		g	Noncash contributions included in	n lines 1	la-1f 1g	\$	17,395.				
a C		h	Total. Add lines 1a-1f				►	1,603,395.			
							Business Code				
e	2	а									
Program Service Revenue		b									
		с									
an		d									
Вü		е									
Ъ,		f	All other program service	reven	nue						
		g	Total. Add lines 2a-2f								
	3		Investment income (inclue	ding c	dividends,	intere	est, and				
			other similar amounts)				►	2,100.			2,100
	4		Income from investment of	of tax-	exempt b	ond p	oroceeds 🕨				
	5		Royalties				►				
					(i) Rea	al	(ii) Personal				
	6	а	Gross rents	6a							
		b	Less: rental expenses	6b							
		с	Rental income or (loss)	6c							
		d	Net rental income or (loss	s) <u></u>			►				
	7	а	Gross amount from sales of		(i) Secur		(ii) Other				
			assets other than inventory	7a	6,1	65.					
		b	Less: cost or other basis								
anu			and sales expenses	7b		0.					
ier Revenue		с	Gain or (loss)	7c	6,1	65.					
Re		d	Net gain or (loss)			···.	►	6,165.			6,165
	8	а	Gross income from fundraisi								
₹			including \$ 15	5,41	17. _{of}						
			contributions reported on	line 1	1c). See						
			Part IV, line 18			8a					
		b	Less: direct expenses			8b	12,668.				
		С	Net income or (loss) from	fundr	raising eve	ents	<u></u>	-3,780.			-3,780
	9	а	Gross income from gamin	ng act	ivities. Se	е					
			Part IV, line 19								
		b	Less: direct expenses			9b					
		С	Net income or (loss) from	gamiı	ng activiti	es <u>.</u>	🕨				
	10	а	Gross sales of inventory,								
			and allowances								
		b	Less: cost of goods sold			10b					
		с	Net income or (loss) from	sales	of invent	ory	►				
S							Business Code				
eou	11	а									
enu		b									
se l		с									
Miscellaneous Revenue		d	All other revenue								
		е	Total. Add lines 11a-11d								
	12		Total revenue. See instruction	ons .			►	1,607,880.	0.	0.	4,485.
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2020.04000 CHILDREN TODAY, INC.

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Form 990 (2020) CHILDREN TODAY, INC.

Form	990	(2020)
	990	(2020)

CHILDREN TODAY, INC. Part IX Statement of Functional Expenses

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

Do	Check if Schedule O contains a respons not include amounts reported on lines 6b,	(A)	(B)	(C)	(D)
	8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to domestic organizations		CAPCILICO	general expenses	expenses
	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	93,469.	15,749.	69,687.	8,033
6	Compensation not included above to disqualified			,	-,
•	persons (as defined under section 4958(f)(1)) and				
	nerve and described in section $AOEO(a)(O)(D)$				
7	Other salaries and wages	645,491.	584,592.	60,899.	
' 8	Pension plan accruals and contributions (include	010,1910	501,5521		
0	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits	43,093.	37,548.	5,052.	493
		73,878.	59,991.	13,066.	821
0 1	Payroll taxes Fees for services (nonemployees):	13,010.	55,551.	15,000.	021
1	(, , , ,				
a L	E				
b	E	20,500.		20,500.	
с	F	20,300.		20,300.	
	, , , , , , , , , , , , , , , , , , ,				
e	с с с с с с с с с с с с с с с с с с с	977.		977.	
f	Investment management fees	977.		977.	
g		10 247		10 247	
	column (A) amount, list line 11g expenses on Sch 0.)	10,247. 1,506.	1,506.	10,247.	
12	Advertising and promotion				
3	Office expenses	25,441.	19,856.	5,585.	
4	Information technology				
15	Royalties	10 110	11 CCO	440	
6	Occupancy	12,116.	11,668.	448.	
7	Travel				
8	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	100	80		
9	Conferences, conventions, and meetings	128.	70.	58.	
0	Interest	32,134.		32,134.	
1	Payments to affiliates	110 000	05 010		
2	Depreciation, depletion, and amortization	118,082.	85,019.	25,978.	7,085
3	Insurance	107,812.	99,397.	8,048.	367
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	CHILDREN'S SUPPLIES	49,945.	49,945.		
b	REPAIRS AND MAINTENANCE	33,197.	29,862.	3,335.	
с	MISCELLANEOUS EVENTS	23,260.	23,260.		
d	FOOD SUPPLIES	18,182.	18,182.		
е	All other expenses	25,403.	10,502.	14,768.	133
5	Total functional expenses. Add lines 1 through 24e	1,334,861.	1,047,147.	270,782.	16,932
6	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)				

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11 2020.04000 CHILDREN TODAY, INC.

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Pa	rt X	Balance Sheet						
		Check if Schedule O contains a response or not	te to any line in	this Part X				
					(A) Beginning of year		(B) End of year	
	1	Cash - non-interest-bearing			622,918.	1	1,169,929.	
	2	Savings and temporary cash investments				2		
	3	Pledges and grants receivable, net		3				
	4	Accounts receivable, net			230,109.	4	21,391.	
	5	Loans and other receivables from any current or						
		trustee, key employee, creator or founder, subst	tantial contribu	tor, or 35%				
		controlled entity or family member of any of thes	se persons			5		
	6	Loans and other receivables from other disquali	Loans and other receivables from other disqualified persons (as defined					
		under section 4958(f)(1)), and persons described	d in section 49	58(c)(3)(B)		6		
ets	7	Notes and loans receivable, net			7			
Assets	8	Inventories for sale or use			8			
4	9	Prepaid expenses and deferred charges			2,395.	9	0.	
	10a	Land, buildings, and equipment: cost or other		604 000				
		basis. Complete Part VI of Schedule D	10a 4	,694,983.	4 170 000		4 0 6 1 1 4 4	
		Less: accumulated depreciation	633,839.	4,179,226.	10c	4,061,144.		
	11	Investments - publicly traded securities			11			
	12	Investments - other securities. See Part IV, line 1		12				
	13	Investments - program-related. See Part IV, line				13		
	14	Intangible assets			80,561.	14	92,373.	
	15	Other assets. See Part IV, line 11			5,115,209.	15 16	5,344,837.	
	16 17	Total assets. Add lines 1 through 15 (must equal Accounts payable and accrued expenses			51,369.	17	24,852.	
	18	Grants payable		51,5050	18	21/0321		
	19	Deferred revenue		5,000.	19	5,500.		
	20	Tax-exempt bond liabilities		.,	20			
	21	Escrow or custodial account liability. Complete I				21		
ŝ	22	Loans and other payables to any current or form						
litie		trustee, key employee, creator or founder, subst						
Liabilities		controlled entity or family member of any of thes				22		
	23	Secured mortgages and notes payable to unrela			641,601.	23	620,742.	
	24	Unsecured notes and loans payable to unrelated	-			24		
	25	Other liabilities (including federal income tax, pa	yables to relate	ed third				
		parties, and other liabilities not included on lines	s 17-24). Compl	ete Part X				
		of Schedule D				25		
	26	Total liabilities. Add lines 17 through 25			697,970.	26	651,094.	
s		Organizations that follow FASB ASC 958, che	eck here 🕨 🗋	X				
JCe		and complete lines 27, 28, 32, and 33.			4 000 500			
alaı	27	Net assets without donor restrictions			4,290,582.	27	4,547,397. 146,346.	
Вр	28	Net assets with donor restrictions	126,657.	28	146,346.			
<u>n</u>		Organizations that do not follow FASB ASC 9	58, check here	● ▶ └── │				
٩. ۳		and complete lines 29 through 33.						
Net Assets or Fund Balances	29	Capital stock or trust principal, or current funds				29		
SSE	30	Paid-in or capital surplus, or land, building, or ec				30		
et⊿	31	Retained earnings, endowment, accumulated in			4,417,239.	31	4,693,743.	
Ź	32	Total net assets or fund balances			5,115,209.	32	5,344,837.	
_	33	Total liabilities and net assets/fund balances			5,115,209.	33	,4,03/•	

Form **990** (2020)

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Form	990 (2020) CHILDREN TODAY, INC.	95-4	635295	Pag	je 12
Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				
1 2 3 4 5 6 7 8 9	Total revenue (must equal Part VIII, column (A), line 12) Total expenses (must equal Part IX, column (A), line 25) Revenue less expenses. Subtract line 2 from line 1 Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A)) Net unrealized gains (losses) on investments Donated services and use of facilities Investment expenses. Prior period adjustments Other changes in net assets or fund balances (explain on Schedule O) Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,	1 2 3 4 5 6 7 8 9	1,607 1,334 273 4,417	1,8 3,0 7,2	<u>61.</u> 19.
	column (B))	10	4,693	3,7	43.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				X
1 2a	Accounting method used to prepare the Form 990: Cash X Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule Were the organization's financial statements compiled or reviewed by an independent accountant?		-	Yes	No X
b	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed separate basis, consolidated basis, or both: Separate basis Consolidated basis Both consolidated and separate basis Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate		2b	x	
с	consolidated basis, or both: Image: Consolidated basis Image: Consolidated basis Image: Consolidated basis Image: Consolidated basis Image: Consolidated basis If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the 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 Scl As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si Act and OMB Circular A-133?	ngle Audi	За		x
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b	000 /	

Form **990** (2020)

032012 12-23-20

SCHEDULE A

Department of the Treasury

Internal Revenue Service

(Form 990 or 990-EZ)

Public Charity Status and Public Support Complete if the organization is a section 501(c)(3) organization or a section

4947(a)(1) nonexempt charitable trust. Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047						
2020						
Open to Public Inspection						
 , identification number						

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Nan	ne of t	the organization							identification number		
			DREN TODAY						5-4635295		
Pa	rt I	Reason for Public (Charity Status.	(All organizations must c	omplete t	nis part.) S	See instruction	ns.			
The	organ	ization is not a private found									
1		A church, convention of ch	urches, or association	on of churches describe	d in sectio	on 170(b)(*	1)(A)(i).				
2		A school described in sect	ion 170(b)(1)(A)(ii). (Attach Schedule E (Forn	n 990 or 9	90-EZ).)					
3		A hospital or a cooperative	hospital service org	anization described in s e	ection 170	(b)(1)(A)(i	ii).				
4		A medical research organiz	ation operated in co	njunction with a hospita	l describe	d in sectio	n 170(b)(1)(A)(iii). Enter	the hospital's name,		
		city, and state:									
5		An organization operated for	or the benefit of a co	llege or university owne	d or opera	ted by a g	overnmental	unit descrik	bed in		
		section 170(b)(1)(A)(iv). (C	Complete Part II.)								
6		A federal, state, or local gov	vernment or governr	nental unit described in	section 17	70(b)(1)(A)	(v).				
7	Χ	An organization that norma	Ily receives a substa	intial part of its support f	from a gov	ernmental	unit or from	the general	public described in		
		section 170(b)(1)(A)(vi). (Complete Part II.)									
8		A community trust describe	ed in section 170(b)	(1)(A)(vi). (Complete Par	t II.)						
9		An agricultural research org	ganization described	in section 170(b)(1)(A)(ix) operate	ed in conju	unction with a	land-grant	college		
		or university or a non-land-g	grant college of agric	ulture (see instructions).	Enter the	name, city	y, and state o	f the colleg	e or		
		university:									
10		An organization that norma	Illy receives (1) more	than 33 1/3% of its sup	port from	contributio	ons, members	ship fees, a	nd 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 busir	ness taxable income	(less section 511 tax) fr	om busine	sses acqu	ired by the o	rganization	after June 30, 1975.		
		See section 509(a)(2). (Cor									
11		An organization organized a	•		•						
12		An organization organized a	-	-	-			-			
		more publicly supported or							Check the box in		
		lines 12a through 12d that				-		-			
а		Type I. A supporting orga	-	-	•			•••••			
		the supported organization			a majority	of the dire	ctors or trust	ees of the s	supporting		
	_	organization. You must o	-								
b		Type II. A supporting org	-				•		-		
		control or management o			ame perso	ons that co	ontrol or mana	age the sup	ported		
_		organization(s). You mus							1		
С		☐ Type III functionally inte						ally integrate	ed with,		
ام		its supported organization						utod organi	-ation(a)		
d		Type III non-functionally that is not functionally int						-			
		that is not functionally int		• •	•		-	u an alleni	iveness		
		requirement (see instruct									
е		Check this box if the orga functionally integrated, or					а турет, туре	; п, туре п			
f	Ente	er the number of supported of	• •		0 0						
י מ		vide the following information									
9		i) Name of supported	(ii) EIN	(iii) Type of organization	(iv) Is the orga	nization listed ng document?	(v) Amount o	f monetary	(vi) Amount of other		
		organization		(described on lines 1-10 above (see instructions))	Yes	No	support (see i	nstructions)	support (see instructions)		
Tota	al										
LHA	For F	Paperwork Reduction Act N	lotice, see the Instr	ructions for Form 990 o	or 990-EZ.	032021 01-	25-21 Sche	dule A (For	m 990 or 990-EZ) 2020		

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Schedule A (Form 990 or 990 EZ) 2020 CHILDREN TODAY, INC.

Part II

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

fails to qualify under the tests listed below, please complete Part III.)

Se	ction A. Public Support	, [,	,			
	ndar year (or fiscal year beginning in)	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
	Gifts, grants, contributions, and	(,	(,	(-,-,-,-,-,-,-,-,-,-,-,-,-,-,-,-,-,-,-,	(-, -, -, -, -, -, -, -, -, -, -, -, -, -	(-, =====	(-)
-	membership fees received. (Do not						
	include any "unusual grants.")	3,125,915.	1,537,262.	1,538,796.	1,790,926.	1,602,146.	9,595,045.
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	3,125,915.	1,537,262.	1,538,796.	1,790,926.	1,602,146.	9,595,045.
	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)						892,326.
6	Public support. Subtract line 5 from line 4.						8,702,719.
	ction B. Total Support						, ,
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
	Amounts from line 4	3,125,915.	1,537,262.	1,538,796.	1,790,926.	1,602,146.	9,595,045.
	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources	265.	2,865.	2,073.	2,143.	1,846.	9,192.
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on			1,404.			1,404.
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI.)	3,724.	31,952.	8,187.			43,863.
11	Total support. Add lines 7 through 10						9,649,504.
12	Gross receipts from related activities,	etc. (see instruction	ons)	•		12	
13	First 5 years. If the Form 990 is for th				-	01(c)(3)	
	organization, check this box and stop	here					
Se	ction C. Computation of Publ	ic Support Pe	rcentage				
14	Public support percentage for 2020 (I	ine 6, column (f), d	ivided by line 11, o	olumn (f))		14	90.19 %
15	Public support percentage from 2019	Schedule A, Part	II, line 14			15	87.03 %
16a	33 1/3% support test - 2020. If the c	organization did no	t check the box or	line 13, and line 1	4 is 33 1/3% or m	iore, check this bo	ox and
	stop here. The organization qualifies	as a publicly supp	orted organization				► X
k	33 1/3% support test - 2019. If the c	organization did no	t check a box on li	ne 13 or 16a, and I	line 15 is 33 1/3%	or more, check th	nis box
	and stop here. The organization qual	ifies as a publicly s	upported organiza	ation			►
17a	10% -facts-and-circumstances tes	t - 2020. If the orga	anization did not c	heck a box on line	13, 16a, or 16b, a	nd line 14 is 10%	or more,
	and if the organization meets the fact	s-and-circumstanc	es test, check this	box and stop here	e. Explain in Part \	/I how the organiz	ation
	meets the facts-and-circumstances te	est. The organizatio	on qualifies as a pu	blicly supported o	rganization		
k	10% -facts-and-circumstances test	t - 2019. If the orga	anization did not c	heck a box on line	13, 16a, 16b, or 1	7a, and line 15 is	10% or
	more, and if the organization meets th	ne facts-and-circun	nstances test, che	ck this box and sto	p here. Explain ir	Part VI how the	
	organization meets the facts-and-circu	umstances test. Th	ne organization qua	alifies as a publicly	supported organi	zation	►
18	Private foundation. If the organizatio	n did not check a l	oox on line 13, 16a	a, 16b, 17a, or 17b	, check this box a	nd see instruction	s 🕨 🛄
					Sche	dule A (Form 990	or 990-EZ) 2020

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Schedule A (Form 990 or 990-EZ) 2020 CHILDREN TODAY, INC.

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(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.)

Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 20	020 (f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Gross receipts from admissions,						
	merchandise sold or services per-						
	formed, or facilities furnished in any activity that is related to the						
	organization's tax-exempt purpose						
3	Gross receipts from activities that						
	are not an unrelated trade or bus-						
	iness under section 513						
4	Tax revenues levied for the organ-						·
-	ization's benefit and either paid to						
	or expended on its behalf						
5	The value of services or facilities						
0	furnished by a governmental unit to						
	the organization without charge						
6							
	Total. Add lines 1 through 5						
18	3 received from disqualified persons						
h	Amounts included on lines 2 and 3 received		+	+			<u>_</u>
	from other than disqualified persons that						
	exceed the greater of \$5,000 or 1% of the						
	amount on line 13 for the year						
	Add lines 7a and 7b						
	Public support. (Subtract line 7c from line 6.)						
	ndar year (or fiscal year beginning in)	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 20	020 (f) Total
	Amounts from line 6	(4) 2010	(6) 2017	(0) 2010	(0) 2010	(0)20	
	Gross income from interest,						
100	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources						
b	Unrelated business taxable income						
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						
	Add lines 10a and 10b						
1	Net income from unrelated business activities not included in line 10b,						
	whether or not the business is						
	regularly carried on						
2	Other income. Do not include gain						
	or loss from the sale of capital assets (Explain in Part VI.)			<u> </u>			
3	Total support. (Add lines 9, 10c, 11, and 12.)						
	First 5 years. If the Form 990 is for th	ne organization's f	irst, second, third,	fourth, or fifth tax	year as a section s	501(c)(3) or	rganization,
	check this box and stop here				-		>
	ction C. Computation of Publ						
15	Public support percentage for 2020 (I	ine 8, column (f),	divided by line 13,	column (f))		15	9
16	Public support percentage from 2019	Schedule A, Par	t III, line 15			16	9
Sec	ction D. Computation of Invest	stment Incom	e Percentage	ļ			
17	Investment income percentage for 20	20 (line 10c, colu	mn (f), divided by	ine 13, column (f))		17	9
8	Investment income percentage from 2					18	9
19a	33 1/3% support tests - 2020. If the						nd line 17 is not
	more than 33 1/3%, check this box a	-					
b	33 1/3% support tests - 2019. If the						
~	line 18 is not more than 33 1/3%, che						
20	Private foundation. If the organizatio						
	23 01-25-21			, c, onoon t			orm 990 or 990-EZ) 2020
				16			
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1

2

3a

3b

3c

4a

4b

4c

5a

5b

5c

6

7

8

9a

9b

9c

10a

Yes No

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 or 990-EZ).*
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- **9a** Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? *If* "Yes," *provide detail in* **Part VI.**
- **b** Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? *If* "Yes," *provide detail in* **Part VI.**
- c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? *If "Yes," provide detail in* **Part VI.**
- **10a** Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? *If* "Yes," *answer 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.)

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Schedule A (Form 990 or 990-EZ) 2020

10b

1

2

No

No

Yes

2a

2b

За

3b

			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in lines 11b and			
	11c below, the governing body of a supported organization?	11a		
b	A family member of a person described in line 11a above?	11b		
с	A 35% controlled entity of a person described in 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
	Did the sevencies had, manches of the expression had, officies estimate in their official expression of encourt			

	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)
	effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported
	organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the
	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.
2	Did the organization operate for the benefit of any supported organization other than the supported

organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.

Section C	. Type	II Supporting	Organizations	

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

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

Section E. Type III Functionally Integrated Supporting Organizations

- The organization satisfied the Activities Test. Complete line 2 below. а
- The organization is the parent of each of its supported organizations. Complete line 3 below. b

с		The organization supported	a governmental entity	. Describe in Part VI how	you supported a govern	mental entity (see instructions).
---	--	----------------------------	-----------------------	---------------------------	------------------------	-----------------------------------

- 2 Activities Test. Answer lines 2a and 2b below.
- a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.
- b Did the activities described in line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.
- 3 Parent of Supported Organizations. Answer lines 3a and 3b below.
- a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? If "Yes" or "No" provide details in Part VI.
- b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.

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Schedule A (Form 990 or 990-EZ) 2020

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Schedule A (Form 990 or 990-EZ) 2020 CHILDREN TODAY, INC.

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

1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (*explain in* **Part VI**). See instructions. All other Type III non-functionally integrated supporting organizations must complete 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			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions).	6		
7	Check here if the current year is the organization's first as a non-functional	ally integrate	d Type III supporting or	anization (see

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

Schedule A (Form 990 or 990-EZ) 2020

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Schedule A (Form 990 or 990-EZ) 2020 CHILDREN TODAY, INC.

Par	t V Type III Non-Functionally Integrated 509	(a)(3) Supporting Orga	anizations (continued)	-
Secti	on D - Distributions			Current Year
1	Amounts paid to supported organizations to accomplish exe	mpt purposes	1	
2	Amounts paid to perform activity that directly furthers exemp	ot purposes of supported		
	organizations, in excess of income from activity	2		
3	Administrative expenses paid to accomplish exempt purpose	es of supported organization	is 3	
4	Amounts paid to acquire exempt-use assets		4	
5	Qualified set-aside amounts (prior IRS approval required - pro	ovide details in Part VI)	5	
6	Other distributions (describe in Part VI). See instructions.		6	
7	Total annual distributions. Add lines 1 through 6.		7	
8	Distributions to attentive supported organizations to which the	ne organization is responsive	e	
	(provide details in Part VI). See instructions.		8	
9	Distributable amount for 2020 from Section C, line 6		9	
10	Line 8 amount divided by line 9 amount		10	
Secti	on E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2020	(iii) Distributable Amount for 2020
1	Distributable amount for 2020 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2020 (reason-			
	able cause required - explain in Part VI). See instructions.			
3	Excess distributions carryover, if any, to 2020			
а	From 2015			
b	From 2016			
c	From 2017			
d	From 2018			
e	From 2019			
f	Total of lines 3a through 3e			
g	Applied to underdistributions of prior years			
h	Applied to 2020 distributable amount			
i	Carryover from 2015 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4	Distributions for 2020 from Section D,			
	line 7: \$			
a	Applied to underdistributions of prior years			
b	Applied to 2020 distributable amount			
c	Remainder. Subtract lines 4a and 4b from line 4.			
5	Remaining underdistributions for years prior to 2020, if			
	any. Subtract lines 3g and 4a from line 2. For result greater			
	than zero, explain in Part VI. See instructions.			
6	Remaining underdistributions for 2020. Subtract lines 3h			
	and 4b from line 1. For result greater than zero, explain in			
	Part VI. See instructions.			
7	Excess distributions carryover to 2021. Add lines 3j			
	and 4c.			
	Breakdown of line 7:			
	Excess from 2016			
b	Excess from 2017			
C	Excess from 2018			
d	Excess from 2019			
е	Excess from 2020			

Schedule A (Form 990 or 990-EZ) 2020

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Part VI Supp Part IV line 1; I Section	Demental Information. Pr /, Section A, lines 1, 2, 3b, 3c, 4 Part IV, Section D, lines 2 and 3 n D, lines 5, 6, and 8; and Part V	rovide the explanations re b, 4c, 5a, 6, 9a, 9b, 9c, 1 3; Part IV, Section E, lines V, Section E, lines 2, 5, ar	equired by Part II, li 1a, 11b, and 11c; F 1c, 2a, 2b, 3a, and Id 6. Also complete	ine 10; Part II, Part IV, Sectio d 3b; Part V, lii e this part for a	line 17a or 17b; Part n B, lines 1 and 2; Pa ne 1; Part V, Section any additional informa	III, line 12; art IV, Section C, B, line 1e; Part V, ation.
(See in	nstructions.)					
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032028 01-25-21			21			
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Department of the Treasury Internal Revenue Service

or 990-PF

Schedule of Contributors

INC.

Attach to Form 990, Form 990-EZ, or Form 990-PF.
 Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2020

Employer identification number

Name	of the	organ	ization

CHILDREN TODAY,

Organization type (check one): Filers of: Section: Form 990 or 990-EZ Image: 501(c)(Image: 3) (enter number) organization Image: 4947(a)(1) nonexempt charitable trust not treated as a private foundation Image: 527 political organization Form 990-PF 501(c)(3) exempt private foundation Image: 4947(a)(1) nonexempt charitable trust treated as a private foundation Image: 501(c)(3) exempt private foundation Image: 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 or 990-EZ), 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 $\dots \longrightarrow$

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), 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 that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

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

Name of organization

95-4635295

CHILDREN TODAY, INC.

Part I **Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed. (a) (b) (c) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution 1 X Person Payroll 454,013. Noncash \$ (Complete Part II for noncash contributions.) (a) (b) (c) (d) Name, address, and ZIP + 4 **Total contributions** No. Type of contribution 7 X Person Payroll 205,269. Noncash \$ (Complete Part II for noncash contributions.) (d) (a) (b) (c) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution 8 X Person Payroll 173,900. Noncash \$ (Complete Part II for noncash contributions.) (c) (d) (a) (b) **Total contributions** No. Name, address, and ZIP + 4 Type of contribution 2 Х Person Payroll 150,000. Noncash \$ (Complete Part II for noncash contributions.) (a) (b) (c) (d) Type of contribution No. Name, address, and ZIP + 4 **Total contributions** 3 X Person Payroll 100,000. Noncash (Complete Part II for noncash contributions.) (d) (b) (c) (a) Name, address, and ZIP + 4 **Total contributions** Type of contribution No. 4 X Person Pavroll 50,000. Noncash \$ (Complete Part II for noncash contributions.) 023452 11-25-20 Schedule B (Form 990, 990-EZ, or 990-PF) (2020) 23

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2020.04000 CHILDREN TODAY, INC.

13430728 161399 2105

Name of organization

Employer identification number

95-4635295

CHILDREN TODAY, INC.

Part I	Contributors (see instructions). Use duplicate copies of Part I if a	additional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5		\$35,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
6		\$35,000.	Person X 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 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 Noncash (Complete Part II for noncash contributions.)
023452 11-25	⁵⁻²⁰ 2		n 990, 990-EZ, or 990-PF) (2020)

NC. 2105__1

2020.04000 CHILDREN TODAY, INC.

13430728 161399 2105

Name of organization

Employer identification number

95-4635295

CHILDREN TODAY, INC.

Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

(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. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
3453 11-25-20	25	Schedule B (Form	990, 990-EZ, or 990-PF

Part III	REN TODAY, INC. Exclusively religious, charitable, etc., contributions	o to organizationa descuit - d	in costic= 7		95 - 4635295		
art III	from any one contributor. Complete columns (a) thr	ough (e) and the following line	entry For o	rganizations			
	completing Part III, enter the total of exclusively religious, chari	itable, etc., contributions of \$1,000	or less for th	e year. (Enter this info. ond	e.) ► \$		
	Use duplicate copies of Part III if additional spa	ace is needed.					
a) No. from	(b) Purpose of gift	(c) Use of gift		(d) Desc	ription of how gift is held		
Part I				(,			
	_						
	_						
	_						
F							
		(e) Transfer of	gift				
			_		• · · •		
-	Transferee's name, address, and a	<u> 2IP + 4</u>	Re	elationship of tra	nsferor to transferee		
a) No.							
from Part I	(b) Purpose of gift	(c) Use of gift		(d) Desc	ription of how gift is held		
	[-						
	-						
F	(e) Transfer of gift						
	Transferee's name, address, and a	ZIP + 4	Re	lationship of tra	nsferor to transferee		
				•			
a) No. from	(b) Purpose of gift	(c) Use of gift		(d) Des	ription of how gift is held		
Part I		(0) 000 01 gift		(4) 2000			
	-						
-							
		(e) Transfer of	gift				
	Transforce's name address and		De	lationship of tra	noforar to transforas		
F	Transferee's name, address, and a				nsferor to transferee		
a) No. from	(L) D						
Part I	(b) Purpose of gift	(c) Use of gift		(d) Desc	ription of how gift is held		
L		(e) Transfer of	gift				
F							
F			Relationship of transferor to transferee				
	Transferee's name, address, and a	ZIP + 4	ne				
-	Transferee's name, address, and a	ZIP + 4	ne				
	Transferee's name, address, and a	ZIP + 4	ne				
-	Transferee's name, address, and a	ZIP + 4					
-	Transferee's name, address, and 2	ZIP + 4 					

SCHEDULE D

(Form	990)
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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.



Name	of	the	organization
nume	U 1	uic	organization

Department of the Treasury

Internal Revenue Service

Employer identification number 95-4635295

	CHILDREN TODAY, IN	С.	95-4635295
Pa			Accounts. Complete if the
	organization answered "Yes" on Form 990, Part IV, lin		
			(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 Did the organization inform all donors and donor advisors in v	writing that the appets held in denor advised for	ndo
5	are the organization's property, subject to the organization's	0	
6	Did the organization inform all grantees, donors, and donor a		
6			
	for charitable purposes and not for the benefit of the donor of		
Pa		repiration annuared "Vee" on Form 000. Dat IV	
			7, line 7.
1	Purpose(s) of conservation easements held by the organizati		
	Preservation of land for public use (for example, recrea		corically important land area
	Protection of natural habitat	Preservation of a cert	tified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualif	fied conservation contribution in the form of a c	onservation 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		2b
с	Number of conservation easements on a certified historic str	ucture included in (a)	2c
d	Number of conservation easements included in (c) acquired a	after 7/25/06, and not on a historic structure	
	listed in the National Register		2d
3	Number of conservation easements modified, transferred, rel	leased, extinguished, or terminated by the orga	nization during the tax
	year ►		
4	Number of states where property subject to conservation east	sement is located 🕨	
5	Does the organization have a written policy regarding the per	riodic monitoring, inspection, handling of	
	violations, and enforcement of the conservation easements it	t holds?	Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting,	handling of violations, and enforcing conservat	tion easements during the year
	▶		
7	Amount of expenses incurred in monitoring, inspecting, hand	lling of violations, and enforcing conservation e	asements during the year
	►\$		
8	Does each conservation easement reported on line 2(d) above	ve satisfy the requirements of section 170(h)(4)(B)(i)
	and section 170(h)(4)(B)(ii)?		Yes 📖 No
9	In Part XIII, describe how the organization reports conservati		
	balance sheet, and include, if applicable, the text of the footr	note to the organization's financial statements t	hat describes the
	organization's accounting for conservation easements.		
Pai	t III Organizations Maintaining Collections or	f Art, Historical Treasures, or Other	Similar Assets.
	Complete if the organization answered "Yes" on Form	1990, Part IV, line 8.	
1a	If the organization elected, as permitted under FASB ASC 95	58, not to report in its revenue statement and ba	alance sheet works
	of art, historical treasures, or other similar assets held for put	olic exhibition, education, or research in further	ance of public
	service, provide in Part XIII the text of the footnote to its finar	ncial statements that describes these items.	
b	If the organization elected, as permitted under FASB ASC 95	8, to report in its revenue statement and balan	ce sheet works of
	art, historical treasures, or other similar assets held for public	exhibition, education, or research in furtherand	ce of public service,
	provide the following amounts relating to these items:		
	(i) Revenue included on Form 990, Part VIII, line 1		• \$
			N A
2	If the organization received or held works of art, historical tre	asures, or other similar assets for financial gain	, provide
	the following amounts required to be reported under FASB A	SC 958 relating to these items:	
а	Revenue included on Form 990, Part VIII, line 1		▶ \$
b	Assets included in Form 990, Part X		
LHA	For Paperwork Reduction Act Notice, see the Instruction	s for Form 990.	Schedule D (Form 990) 2020
03205	12-01-20		

13430728 161399 2105

27 2020.04000 CHILDREN TODAY, INC.

Sche	dule D (Form 990) 2020 CHILDRE	N TODAY, II	NC.					95-46	3529	5 р	age 2
Par	t III Organizations Maintaining C	Collections of A	rt, His	storical Tr	easures, c	or Othe					
3	Using the organization's acquisition, accessi	on, and other record	ls, cheo	ck any of the	following that	t make s	significant	use of its			
	collection items (check all that apply):										
а	Public exhibition	d		Loan or excl	hange progra	ım					
b	Scholarly research	е		Other							
с	Preservation for future generations										
4	Provide a description of the organization's co	ollections and explai	n how t	they further t	he organizatio	on's exe	mpt purp	ose in Par	t XIII.		
5	During the year, did the organization solicit o	or receive donations of	of art, ł	nistorical trea	sures, or othe	er simila	r assets		_		_
	to be sold to raise funds rather than to be ma								Yes		No
Par	t IV Escrow and Custodial Arran		ete if th	e organizatio	n answered "	Yes" on	Form 99	D, Part IV,	line 9, or		
	reported an amount on Form 990, Pa										
1a	Is the organization an agent, trustee, custod		-						-		-
	on Form 990, Part X?							L	Yes		No
b	If "Yes," explain the arrangement in Part XIII	and complete the fo	llowing	table:							
									Amoun	t	
	Beginning balance										
	Additions during the year										
-	Distributions during the year										
f	Ending balance										
	Did the organization include an amount on F							L	Yes		_ No
Par	If "Yes," explain the arrangement in Part XIII. t V Endowment Funds. Complete i										
1 41		(a) Current year		Prior year	(c) Two year			lears hack	(e) Four	Veare	hack
10	Beginning of year balance	80,561.	(0)	68,339.	. ,	2,272.		64,056.			332.
	Contributions	1,450.		200.	,.	.,		01,000.			25.
	Net investment earnings, gains, and losses	11,339.		12,895.	-3	3,099.		9,005.		4	417.
	Grants or scholarships	,,		,•		,		-,			
	Other expenditures for facilities										
Ũ	and programs										
f	Administrative expenses	977.		873.		834.		789.			718.
	End of year balance	92,373.		80,561.	68	3,339.		72,272.		64	056.
2	Provide the estimated percentage of the cur	rent year end balanc	e (line	1g, column (a							
а	Board designated or quasi-endowment	100.0000	%	0, (
	Permanent endowment .0000	%									
	Term endowment .0000	%									
	The percentages on lines 2a, 2b, and 2c sho	ould equal 100%.									
3a	Are there endowment funds not in the posse	ession of the organization	ation th	nat are held a	nd administe	red for t	he organi	zation	-		
	by:									Yes	No
	(i) Unrelated organizations								3a(i)	Х	
	(ii) Related organizations										Х
b	If "Yes" on line 3a(ii), are the related organization	ations listed as requir	red on	Schedule R?					. 3b		
4	Describe in Part XIII the intended uses of the		owment	t funds.							
Par	t VI Land, Buildings, and Equipm										
	Complete if the organization answere		-	1							
	Description of property	(a) Cost or o		(b) Cost		. ,	ccumulate		(d) Boo	k valu	е
		basis (investn	nent)	basis (. ,	de	preciation			<u>, ,</u>	76
	Land				4,476.		100 2	61			76.
	Buildings			<u> </u>	3,693.		480,3	01.	3,33	5,3	52.
	Leasehold improvements				4,908.		24,9				0.
	Equipment				<u>4,908.</u> 1,906.		<u>24,9</u> 128,5			3,3	
	Other		V col		-	•	120,0	<u>,</u>	4,06		
Tota	. Add lines 1a through 1e. (Column (d) must e	qual Form 990, Part	л, coiu	ппп (в), Iné T	<i>uc.)</i>			Schedule	-	-	
								JUNEQUIE	ᆔᇉᇊᇬᆔ	1 330	LUZU

security or category (including name of sec vatives equity interests t equal Form 990, Part X, col. (B) line 12 estments - Program Relate plete if the organization answered ' Description of investment	2.) ►	(c) Method of valuation: Cost or o	
equity interests t equal Form 990, Part X, col. (B) line 12 estments - Program Relate plete if the organization answered '	2.) ▶		
t equal Form 990, Part X, col. (B) line 12 estments - Program Relate plete if the organization answered '	2.) ►		
estments - Program Relate plete if the organization answered '	ed.		
estments - Program Relate plete if the organization answered '	ed.		
estments - Program Relate plete if the organization answered '	ed.		
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estments - Program Relate plete if the organization answered '	ed.		
estments - Program Relate plete if the organization answered '	ed.		
estments - Program Relate plete if the organization answered '	ed.		
plete if the organization answered '			
Description of investment	"Yes" on Form 990, Part IV, line	e 11c. See Form 990, Part X, line 13.	
	(b) Book value	(c) Method of valuation: Cost or	end-of-year market value
		-	
t equal Form 990 Part X, col. (B) line 1:	3)		
	"Yes" on Form 990 Part IV line	e 11d. See Form 990. Part X. line 15	
			(b) Book value
			<u> </u>
			-
	<u>(B) line 15.)</u>		
	"Yes" on Form 990, Part IV, line	e 11e or 11f. See Form 990, Part X, line	
(a) Description of liability			(b) Book value
come taxes			
	er Assets. plete if the organization answered) must equal Form 990, Part X, col. er Liabilities. plete if the organization answered	plete if the organization answered "Yes" on Form 990, Part IV, line (a) Description	Per Assets. Iplete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15. (a) Description (a) Description (b) must equal Form 990, Part X, col. (B) line 15.) (c) must equal Form 990, Part X, col. (B) line 15.) (c) must equal Form 990, Part X, col. (B) line 15.) (c) must equal Form 990, Part X, col. (B) line 15.) (c) must equal Form 990, Part X, col. (B) line 15.) (c) must equal Form 990, Part X, col. (B) line 15.) (c) must equal Form 990, Part X, col. (C) line 15.) (c) must equal Form 990, Part X, col. (C) line 15.) (c) must equal Form 990, Part X, col. (C) line 15.) (c) must equal Form 990, Part X, col. (C) line 15.) (c) must equal Form 990, Part X, col. (C) line 15.)

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... X

Schedule D (Form 990) 2020

13430728 161399 2105

Sche	edule D (Form 990) 2020 CHILDREN TODAY, INC.			95-	4635295 Page 4
Pa	t XI Reconciliation of Revenue per Audited Financial Statem	ents With	Revenue per R	eturr	۱.
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a	a.			
1	Total revenue, gains, and other support per audited financial statements			1	1,610,388.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
а	Net unrealized gains (losses) on investments	. 2a	3,485.		
b	Donated services and use of facilities	. 2b			
с	Recoveries of prior year grants				
d			-977.		
е	Add lines 2a through 2d			2e	2,508.
3	Subtract line 2e from line 1			3	1,607,880.
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	1,607,880.
Pa	rt XII Reconciliation of Expenses per Audited Financial Staten		Expenses per	Retu	rn.
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a	а.			
1	Total expenses and losses per audited financial statements			1	1,333,884.
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	Other losses	2c			
d	Other (Describe in Part XIII.)	2d			
е	Add lines 2a through 2d			2e	0.
3	Subtract line 2e from line 1			3	1,333,884.
-				L V	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
4 a					
-	Amounts included on Form 990, Part IX, line 25, but not on line 1:	4a	977.		
-	Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b Other (Describe in Part XIII.) Add lines 4a and 4b	4a 4b	977.	4c	977.
a b c 5	Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b Other (Describe in Part XIII.)	4a 4b	977.		977. 1,334,861.

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

PART V, LINE 4:

THE ORGANIZATION'S BOARD OF DIRECTORS ESTABLISHED AN ENDOWMENT FUND

WHEREBY CERTAIN CONTRIBUTIONS COULD REMAIN INTACT. IN 2009, THE

ORGANIZATION TRANSFERRED \$35,000 TO THE LONG BEACH COMMUNITY FOUNDATION

(LBCF) TO ESTABLISH THE CHILDREN TODAY ENDOWMENT FUND. THE FUNDS ARE

INVESTED IN AN ALLOCATED INVESTMENT POOL. NET INCOME FROM THE FUND MAY BE

DISTRIBUTED ANNUALLY TO THE ORGANIZATION UPON REQUEST.

THE ORGANIZATION GRANTED LBCF VARIANCE POWER OVER THE FUNDS AT THE TIME OF

THE TRANSFER. BUT SINCE THE ORGANIZATION IS A NONPROFIT ORGANIZATION, WHO

SPECIFIED THEMSELVES AS THE BENEFICIARY, THE ORGANIZATION MAY RECOGNIZE

THE BENEFICIAL INTEREST IN THE ASSETS HELD BY LBCF.

Schedule D (Form 990) 2020

13430728 161399 2105

032054 12-01-20

30 2020.04000 CHILDREN TODAY, INC.

PART X, LINE 2:

THE ORGANIZATION HAS RECEIVED TAX-EXEMPT STATUS FROM THE INTERNAL REVENUE SERVICE AND CALIFORNIA FRANCHISE TAX BOARD UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE AND UNDER REVENUE AND TAXATION CODE SECTION 23701D, RESPECTIVELY.

SINCE THE ORGANIZATION IS EXEMPT FROM FEDERAL AND STATE INCOME TAX LIABILITY, NO PROVISION IS MADE FOR CURRENT OR DEFERRED INCOME TAXES. THE ORGANIZATION USES THE SAME ACCOUNTING METHODS FOR TAX AND FINANCIAL REPORTING. MANAGEMENT HAS CONSIDERED ITS TAX POSITIONS AND BELIEVES THAT ALL OF THE POSITIONS TAKEN IN ITS FEDERAL AND STATE EXEMPT ORGANIZATION RETURNS ARE MORE LIKELY THAN NOT TO BE SUSTAINED UPON EXAMINATION. THE ORGANIZATION'S RETURNS ARE SUBJECT TO EXAMINATION BY FEDERAL AND STATE TAXING AUTHORITIES, GENERALLY FOR THREE YEARS AND FOUR YEARS, RESPECTIVELY, AFTER THEY ARE FILED.

PART XI, LINE 2D - OTHER ADJUSTMENTS:

INVESTMENT FEES

PART XII, LINE 4B - OTHER ADJUSTMENTS:

INVESTMENT FEES

Schedule D (Form 990) 2020

032055 12-01-20

13430728 161399 2105

-977.

977.

SCHEDULE G	Suppleme	ntal Information Regarding	Fund	drais	ing or Gaming	Acti	vities	OMB No. 1545-0047
(Form 990 or 990-EZ)		e organization answered "Yes" on				or 19,	, or if the	2020
Department of the Treasury	ŭ	organization entered more than \$15 Attach to Form 990						Open to Public
Internal Revenue Service		to www.irs.gov/Form990 for instru	uction	s and	the latest informat	ion.		Inspection
Name of the organization		N TODAY, INC.					Employer ide 95-4635	ntification number
	complete this par	Complete if the organization answe	red "Y	'es" oi	n Form 990, Part IV,	line 1	7. Form 990-E2	Z filers are not
 Indicate whether th Indicate whether th Mail solicitat Internet and Internet and Phone solicities In-person so 2 a Did the organization key employees list 	e organization rais isons email solicitations tations dicitations on have a written o red in Form 990, P d highest paid indiv	sed funds through any of the followin e Solicitat f Solicitat g Special or oral agreement with any individual part VII) or entity in connection with p viduals or entities (fundraisers) pursu	ion of ion of fundra (incluo rofess	non-g gover lising ding o ional f	overnment grants nment grants events fficers, directors, tru: undraising services?	stees	Yes	
(i) Name and addres or entity (fund	s of individual	(ii) Activity	(iii) fundr have ci or con contribi	ustody trol of	(iv) Gross receipts from activity	to (o	Amount paid or retained by) fundraiser ted in col. (i)	(vi) Amount paid to (or retained by) organization
			Yes	No		10		
		on is registered or licensed to solicit o		b outions	s or has been notified	d it is	exempt from r	egistration
HA For Paparwork P	eduction Act Not	ice, see the Instructions for Form 9	200 ~*	000.1	E7 (Scho	dule C /Earm (990 or 990-EZ) 2020
		ice, see the manucuona for Forms	50 U	330-1	3	Jone		55 01 550-LZJ 2020

032081 11-25-20

Part II Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000

of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

		of fundraising event contributions and gr			_	is greater than \$5,000.
			(a) Event #1	(b) Event #2	(c) Other events	(d) Total events
				FRIENDSGIVIN		(add col. (a) through
				G	1	col. (c))
e			(event type)	(event type)	(total number)	
Revenue	1	Gross receipts	2,500.	21,805.		24,305
	2	Less: Contributions	2,500.	12,917.		15,417.
	3	Gross income (line 1 minus line 2)		8,888.		8,888.
	4	Cash prizes				
es	5	Noncash prizes				
xpens	6	Rent/facility costs				
Direct Expenses	7	Food and beverages		9,791.		9,791.
-	8	Entertainment				
	9	Other direct expenses			50.	2,877.
	10	Direct expense summary. Add lines 4 through			►	12,668.
		Net income summary. Subtract line 10 from I	ine 3, column (d)		►	-3,780
Pa	rt I		answered "Yes" on Forn	n 990, Part IV, line 19, or	reported more than	
		\$15,000 on Form 990-EZ, line 6a.	i	(1) Dull tabe/instant		(N T)) () () (
Hevenue			(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c)
μ	1	Gross revenue				
lses	2	Cash prizes				
Ulrect Expenses	3	Noncash prizes				
Direct	4	Rent/facility costs				
	5	Other direct expenses				
			Yes %	Yes %	Yes %	
	6	Volunteer labor	□ No	No	□ No	
	7	Direct expense summary. Add lines 2 throug	h 5 in column (d)			
	8	Net gaming income summary. Subtract line 7	from line 1. column (d)			
_	-					
	Ent	er the state(s) in which the organization condu	ucts gaming activities:			
9		he consideration lines and the construct mousing of	ctivities in each of these	states?		Yes No
		ne organization licensed to conduct gaming a				
а	ls t	No," explain:				
а	ls t					
a b	Is t If "I	No," explain:				
a b 0a	Is t If "I		evoked, suspended, or t	erminated during the tax	year?	Yes No
a b 0a	Is t If "I	No," explain:	evoked, suspended, or t	erminated during the tax	year?	Yes No
a b Da	Is t If "I	No," explain:	evoked, suspended, or t	erminated during the tax	year?	Yes N

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<u>Sc</u> h	edule G (Form 990 or 990-EZ) 2020 CHILDREN TODAY, INC.	95-4635295	Page 3
	Does the organization conduct gaming activities with nonmembers?		No
	Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed		
	to administer charitable gaming?	Yes	No
13	Indicate the percentage of gaming activity conducted in:		
а	The organization's facility	13a	%
	An outside facility		%
	Enter the name and address of the person who prepares the organization's gaming/special events books and record		
	Name		
	Address		
15a	Does the organization have a contract with a third party from whom the organization receives gaming revenue?	Yes	No No
b	If "Yes," enter the amount of gaming revenue received by the organization > \$ and the amou	int	
	of gaming revenue retained by the third party \$		
с	If "Yes," enter name and address of the third party:		
	Name		
16	Gaming manager information:		
	Name		
	Gaming manager compensation 🕨 \$		
	Description of services provided		
	Director/officer		
17	Mandatory distributions:		
а	Is the organization required under state law to make charitable distributions from the gaming proceeds to		
	retain the state gaming license?	Yes	No No
b	Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in		
-	organization's own exempt activities during the tax year > \$		
Pa	t IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v);	and Part III, lines 9, §	b. 10b.
	15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.	, ,	, ,
03208	3 11-25-20 Schedule C	G (Form 990 or 990-	EZ) 2020
	34		-
20		2105	1

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SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service Name of the organization Supplemental Information to Form 990 or 990-EZ Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

Attach to Form 990 or 990-EZ

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

OMB No. 1545-0047

Employer identification number 95-4635295

CHILDREN TODAY, INC.

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

FOSTERING LONG-TERM FAMILY STABILITY AND SUCCESS.

FORM 990, PART VI, SECTION A, LINE 2:

BONNIE LOWENTHAL IS THE MOTHER OF JOSH LOWENTHAL.

FORM 990, PART VI, SECTION B, LINE 11B:

THE COMPLETED FORM 990 IS PRESENTED BY THE TREASURER AT THE BOARD OF

DIRECTORS MEETING, WHERE IT IS REVIEWED AND APPROVED BY THE BOARD.

FORM 990, PART VI, SECTION B, LINE 12C:

ANNUAL REVIEWS OF POTENTIAL CONFLICTS OF INTEREST ARE CONDUCTED PER WRITTEN

POLICY, AND OUTSIDE EXPERTS MAY BE USED.

EACH DIRECTOR, PRINCIPAL OFFICER, AND MEMBER OF A COMMITTEE WITH GOVERNING BOARD-DELEGATED POWERS SHALL ANNUALLY SIGN A STATEMENT THAT AFFIRMS SUCH PERSON:

A. HAS RECEIVED A COPY OF THE CONFLICT-OF-INTEREST POLICY.

B. HAS READ AND UNDERSTANDS THE POLICY.

C. HAS AGREED TO COMPLY WITH THE POLICY, AND

D. UNDERSTANDS THE ORGANIZATION IS CHARITABLE AND IN ORDER TO MAINTAIN ITS

FEDERAL TAX EXEMPTION IT MUST ENGAGE PRIMARILY IN ACTIVITIES THAT

ACCOMPLISH ONE OR MORE OF ITS TAX-EXEMPT PURPOSES.

 LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.
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Name of the organization CHILDREN TODAY, INC.	Employer identification number $95 - 4635295$
MEMBER HAS FAILED TO DISCLOSE ACTUAL OR POSSIBLE CONFLICTS	S OF INTEREST, IT
SHALL INFORM THE MEMBER OF THE BASIS FOR SUCH BELIEF AND A	AFFORD THE MEMBER
AN OPPORTUNITY TO EXPLAIN THE ALLEGED FAILURE TO DISCLOSE.	•

IF, AFTER HEARING THE MEMBER'S RESPONSE AND AFTER MAKING FURTHER

INVESTIGATION AS WARRANTED BY THE CIRCUMSTANCES, THE GOVERNING BOARD OR COMMITTEE DETERMINES THE MEMBER HAS FAILED TO DISCLOSE AN ACTUAL OR POSSIBLE CONFLICT OF INTEREST, IT SHALL TAKE APPROPRIATE DISCIPLINARY AND CORRECTIVE ACTION.

FORM 990, PART VI, SECTION B, LINE 15A:

ANNUALLY, THE ORGANIZATION OBTAINS COMPARABILITY DATA FROM SIMILAR

ORGANIZATIONS WHEN DETERMINING COMPENSATION PACKAGES.

FORM 990, PART VI, SECTION C, LINE 19:

FINANCIAL STATEMENTS AND FORM 990 ARE AVAILABLE ON THE ORGANIZATION'S

WEBSITE. FORM 990 IS ALSO POSTED ON GUIDESTAR.ORG.

FORM 990, PART XII, LINE 2C:

THERE WERE NO CHANGES IN ITS OVERSIGHT PROCESS OR SELECTION PROCESS

DURING THE TAX YEAR.

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