

Form **990**

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

2022

Department of the Treasury
Internal Revenue Service

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.

Open to Public Inspection

A For the 2022 calendar year, or tax year beginning **JUL 1, 2022** and ending **JUN 30, 2023**

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization VOICES FOR CHILDREN Doing business as Number and street (or P.O. box if mail is not delivered to street address) Room/suite 2851 MEADOW LARK DRIVE City or town, state or province, country, and ZIP or foreign postal code SAN DIEGO, CA 92123	D Employer identification number 95-3786047 E Telephone number (858) 569-2019
I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		G Gross receipts \$ 8,438,796.
J Website: WWW.SPEAKUPNOW.ORG		H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. See instructions
K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other		L Year of formation: 1982 M State of legal domicile: CA
F Name and address of principal officer: ANDREW CHRISTOPHER SAME AS C ABOVE		

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: WE RECRUIT, TRAIN, AND SUPERVISE VOLUNTEERS TO ADVOCATE FOR ABUSED CHILDREN IN FOSTER CARE. 2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets. 3 Number of voting members of the governing body (Part VI, line 1a) 3 28 4 Number of independent voting members of the governing body (Part VI, line 1b) 4 28 5 Total number of individuals employed in calendar year 2022 (Part V, line 2a) 5 89 6 Total number of volunteers (estimate if necessary) 6 0 7a Total unrelated business revenue from Part VIII, column (C), line 12 7a 0. 7b Net unrelated business taxable income from Form 990-T, Part I, line 11 7b 0.																									
Revenue	<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th></th> <th style="text-align: right;">Prior Year</th> <th style="text-align: right;">Current Year</th> </tr> </thead> <tbody> <tr> <td>8 Contributions and grants (Part VIII, line 1h)</td> <td style="text-align: right;">11,903,713.</td> <td style="text-align: right;">8,023,930.</td> </tr> <tr> <td>9 Program service revenue (Part VIII, line 2g)</td> <td style="text-align: right;">0.</td> <td style="text-align: right;">0.</td> </tr> <tr> <td>10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)</td> <td style="text-align: right;">19,460.</td> <td style="text-align: right;">203,497.</td> </tr> <tr> <td>11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)</td> <td style="text-align: right;">-201,193.</td> <td style="text-align: right;">-262,689.</td> </tr> <tr> <td>12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)</td> <td style="text-align: right;">11,721,980.</td> <td style="text-align: right;">7,964,738.</td> </tr> </tbody> </table>		Prior Year	Current Year	8 Contributions and grants (Part VIII, line 1h)	11,903,713.	8,023,930.	9 Program service revenue (Part VIII, line 2g)	0.	0.	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	19,460.	203,497.	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	-201,193.	-262,689.	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	11,721,980.	7,964,738.							
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Part II Signature Block

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 Here	Signature of officer ANDREW CHRISTOPHER, TREASURER	Date
Paid Preparer Use Only	Print/Type preparer's name LUKAS DAVIS	Preparer's signature
	Firm's name CONSIDINE & CONSIDINE	Date 05/10/24
	Firm's address 8989 RIO SAN DIEGO DRIVE, SUITE 250 SAN DIEGO, CA 92108-1604	Check if self-employed <input type="checkbox"/> PTIN P00668234
		Firm's EIN 95-2694444
		Phone no. 619.231.1977

May the IRS discuss this return with the preparer shown above? See instructions Yes No

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission: VOICES FOR CHILDREN TRANSFORMS THE LIVES OF ABUSED CHILDREN BY PROVIDING THEM WITH COURT APPOINTED SPECIAL ADVOCATES (CASAS).

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? [] Yes [X] No

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? [] Yes [X] No

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.

4a (Code:) (Expenses \$ 5,755,905. including grants of \$ 99,067.) (Revenue \$) VOICES FOR CHILDREN (VFC) RECRUITS, TRAINS, AND MANAGES OVER 900 VOLUNTEERS ANNUALLY TO SERVE AS COURT APPOINTED SPECIAL ADVOCATES (CASAS) AND IS THE ONLY NONPROFIT ORGANIZATION DESIGNATED BY THE STATE OF CALIFORNIA AND THE SUPERIOR COURTS OF SAN DIEGO AND RIVERSIDE COUNTIES TO PROVIDE THESE CASA SERVICES. VFC WAS FOUNDED IN 1980 IN SAN DIEGO COUNTY, AND SINCE 2015, HAS ALSO OPERATED THE CASA PROGRAM FOR RIVERSIDE COUNTY. CASA VOLUNTEERS PLAY AN IMPORTANT ROLE IN THE FOSTER CARE SYSTEM, BUILDING TRUSTING RELATIONSHIPS WITH CHILDREN AND INTERFACING WITH THE PROFESSIONALS IN ORDER TO IDENTIFY AND PROTECT THE BEST INTERESTS OF CHILDREN IN FOSTER CARE WHO HAVE EXPERIENCED ABUSE, NEGLECT, OR ABANDONMENT. CURRENTLY ALL OF THE NEARLY 2,500 CHILDREN IN SAN DIEGO COUNTY FOSTER CARE RECEIVE ASSESSMENT SERVICES AND 1,734

4b (Code:) (Expenses \$ including grants of \$) (Revenue \$)

4c (Code:) (Expenses \$ including grants of \$) (Revenue \$)

4d Other program services (Describe on Schedule O.) (Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses 5,755,905.

Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i>	1 X	
2 Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> ? See instructions	2 X	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</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 during the tax year? <i>If "Yes," complete Schedule C, Part II</i>	4	X
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Rev. Proc. 98-19? <i>If "Yes," complete Schedule C, Part III</i>	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? <i>If "Yes," complete Schedule D, Part I</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? <i>If "Yes," complete Schedule D, Part II</i>	7	X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," 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? <i>If "Yes," complete Schedule D, Part IV</i>	9	X
10 Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? <i>If "Yes," complete Schedule D, Part V</i>	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.		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI</i>	11a X	
b Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII</i>	11b	X
c Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII</i>	11c	X
d Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX</i>	11d X	
e Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>	11e X	
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X</i>	11f X	
12a Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i>	12a X	
b Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional</i>	12b	X
13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>	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? <i>If "Yes," complete Schedule F, Parts I and IV</i>	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? <i>If "Yes," complete Schedule F, Parts II and IV</i>	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 "Yes," 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> See instructions	17	X
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>	18 X	
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>	19	X
20a Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>	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? <i>If "Yes," complete Schedule I, Parts I and II</i>	21	X

Part IV Checklist of Required Schedules (continued)

Table with 3 columns: Question ID, Question Text, Yes, No. Rows include questions 22 through 38 regarding grants, compensation, tax-exempt bonds, excess benefits, and controlled entities.

Part V Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response or note to any line in this Part V []

Table with 3 columns: Question ID, Question Text, Yes, No. Rows include questions 1a, 1b, and 1c regarding Form 1096, Forms W-2G, and backup withholding rules.

Part V Statements Regarding Other IRS Filings and Tax Compliance *(continued)*

		Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return		
	2a 89		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	X	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?		X
b	If "Yes," has it filed a Form 990-T for this year? <i>If "No" to line 3b, provide an explanation on Schedule O</i>		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?		X
b	If "Yes," enter the name of the foreign country See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		X
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
7	Organizations that may receive deductible contributions under section 170(c).		
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		X
d	If "Yes," indicate the number of Forms 8282 filed during the year		
	7d		
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		
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?		
9	Sponsoring organizations maintaining donor advised funds.		
a	Did the sponsoring organization make any taxable distributions under section 4966?		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		
10	Section 501(c)(7) organizations. Enter:		
a	Initiation fees and capital contributions included on Part VIII, line 12	10a	
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b	
11	Section 501(c)(12) organizations. Enter:		
a	Gross income from members or shareholders	11a	
b	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b	
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b	
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		
a	Is the organization licensed to issue qualified health plans in more than one state? Note: See the instructions for additional information the organization must report on Schedule O.	13a	
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b	
c	Enter the amount of reserves on hand	13c	
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a	X
b	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 excess parachute payment(s) during the year? If "Yes," see the instructions and file Form 4720, Schedule N.	15	X
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.	16	X
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953? If "Yes," complete Form 6069.	17	

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

Section A. Governing Body and Management

		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O.		
	1a 28		
b	Enter the number of voting members included on line 1a, above, who are independent		
	1b 28		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person?		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		X
6	Did the organization have members or stockholders?		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a	The governing body?	X	
b	Each committee with authority to act on behalf of the governing body?	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O		X

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?		X
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?		
10b			
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	X	
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990.		
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	X	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done	X	
12c		X	
13	Did the organization have a written whistleblower policy?	X	
14	Did the organization have a written document retention and destruction policy?	X	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
a	The organization's CEO, Executive Director, or top management official	X	
b	Other officers or key employees of the organization	X	
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.		
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?		
16b			

Section C. Disclosure

- 17** List the states with which a copy of this Form 990 is required to be filed CA
- 18** Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
 Own website Another's website Upon request Other (explain on Schedule O)
- 19** Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
- 20** State the name, address, and telephone number of the person who possesses the organization's books and records
JAMES SCOFFIN CPA CFO - (858) 598-2228
2851 MEADOW LARK DRIVE, SAN DIEGO, CA 92123

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

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

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

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

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's **current** key employees, if any. See the instructions for definition of "key employee."
 - List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.
 - List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
 - List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.
- See the instructions for the order in which to list the persons above.

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) KELLY DOUGLAS PRESIDENT/CEO	50.00			X				252,903.	0.	0.
(2) JESSICA MUNOZ EXECUTIVE DIRECTOR	40.00			X				151,717.	0.	0.
(3) REBECCA RADER CHIEF PHILANTHROPY OFFICER	40.00			X				149,849.	0.	0.
(4) STEPHEN MOORE CHIEF PROGRAM OFFICER	40.00			X				128,040.	0.	0.
(5) JAMES SCOFFIN CFO	20.00			X				89,286.	0.	0.
(6) ANNETTE BRADBURY CHAIR	1.00	X		X				0.	0.	0.
(7) KRISTI PFISTER VICE CHAIR	1.00	X		X				0.	0.	0.
(8) GEORGE LAI SECRETARY	1.00	X		X				0.	0.	0.
(9) ANDREA PAYNE MOSER TREASURER	1.00	X		X				0.	0.	0.
(10) ANNEELISE GOETZ PAST CHAIR	1.00	X		X				0.	0.	0.
(11) LUISA AYALA MEMBER	1.00	X						0.	0.	0.
(12) MARY BENIRSCHKE MEMBER	1.00	X						0.	0.	0.
(13) ANDY CHRISTOPHER MEMBER	1.00	X						0.	0.	0.
(14) PATTY COHEN MEMBER	1.00	X						0.	0.	0.
(15) SERGIO DEL PRADO MEMBER	1.00	X						0.	0.	0.
(16) P. RANDOLPH FINCH, JR., ESQ MEMBER	1.00	X						0.	0.	0.
(17) JENNY LI-HOCHBERG MEMBER	1.00	X						0.	0.	0.

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(18) THE HON. SUSAN D. HUGUENOR (RET MEMBER)	1.00	X						0.	0.	0.
(19) ERBIN KEITH, ESQ MEMBER	1.00	X						0.	0.	0.
(20) MIA KELLY, ESQ MEMBER	1.00	X						0.	0.	0.
(21) RICHARD KINTZ, ESQ MEMBER	1.00	X						0.	0.	0.
(22) JENNY MCKENNA MEMBER	1.00	X						0.	0.	0.
(23) KATHERINE NICOLETTI MEMBER	1.00	X						0.	0.	0.
(24) HOLLIS R. PETERSON, ESQ MEMBER	1.00	X						0.	0.	0.
(25) NANCY R. PFEIFFER MEMBER	1.00	X						0.	0.	0.
(26) JUSTIN GOVER MEMBER	1.00	X						0.	0.	0.
1b Subtotal								771,795.	0.	0.
c Total from continuation sheets to Part VII, Section A								0.	0.	0.
d Total (add lines 1b and 1c)								771,795.	0.	0.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **4**

	Yes	No
3 Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>		X
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i>	X	
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>		X

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation
PADRES LP, 100 PARK BLVD PETCO PARK, SAN DIEGO, CA 92101	EVENT SERVICES	232,995.

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization **1**

SEE PART VII, SECTION A CONTINUATION SHEETS

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(27) PENNY E. ROBBINS MEMBER	1.00	X						0.	0.	0.
(28) MONIQUE RODRIGUEZ MEMBER	1.00	X						0.	0.	0.
(29) LAURA ROOS MEMBER	1.00	X						0.	0.	0.
(30) LAUREE SAHBA MEMBER	1.00	X						0.	0.	0.
(31) KATIE SULLIVAN MEMBER	1.00	X						0.	0.	0.
(32) MAGDA MARQUET MEMBER	1.00	X						0.	0.	0.
(33) MARK WERNIG MEMBER	1.00	X						0.	0.	0.
Total to Part VII, Section A, line 1c										

Part VIII Statement of Revenue

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

			(A)	(B)	(C)	(D)	
			Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512 - 514	
Contributions, Gifts, Grants and Other Similar Amounts	1 a Federated campaigns	1a					
	b Membership dues	1b					
	c Fundraising events	1c	2,205,436.				
	d Related organizations	1d					
	e Government grants (contributions)	1e	2,562,488.				
	f All other contributions, gifts, grants, and similar amounts not included above ...	1f	3,256,006.				
	g Noncash contributions included in lines 1a-1f	1g	\$ 383,527.				
	h Total. Add lines 1a-1f		8,023,930.				
Program Service Revenue	2 a _____	Business Code					
	b _____						
	c _____						
	d _____						
	e _____						
	f All other program service revenue						
	g Total. Add lines 2a-2f						
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)		205,766.			205,766.	
	4 Income from investment of tax-exempt bond proceeds						
	5 Royalties		50.			50.	
	6 a Gross rents	6a	(i) Real				
			(ii) Personal				
	b Less: rental expenses ...	6b					
	c Rental income or (loss)	6c					
	d Net rental income or (loss)						
	7 a Gross amount from sales of assets other than inventory	7a	(i) Securities				
			(ii) Other				
	b Less: cost or other basis and sales expenses	7b	2,269.				
	c Gain or (loss)	7c	-2,269.				
d Net gain or (loss)		-2,269.			-2,269.		
8 a Gross income from fundraising events (not including \$ 2,205,436. of contributions reported on line 1c). See Part IV, line 18	8a		209,050.				
			471,789.				
b Less: direct expenses	8b						
c Net income or (loss) from fundraising events			-262,739.		-262,739.		
9 a Gross income from gaming activities. See Part IV, line 19	9a						
b Less: direct expenses	9b						
c Net income or (loss) from gaming activities							
10 a Gross sales of inventory, less returns and allowances	10a						
b Less: cost of goods sold	10b						
c Net income or (loss) from sales of inventory							
Miscellaneous Revenue	11 a _____	Business Code					
	b _____						
	c _____						
	d All other revenue						
	e Total. Add lines 11a-11d						
12 Total revenue. See instructions			7,964,738.	0.	0.	-59,192.	

Part IX Statement of Functional Expenses

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

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

<i>Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.</i>	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21				
2 Grants and other assistance to domestic individuals. See Part IV, line 22	99,067.	99,067.		
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	796,517.	435,316.	126,488.	234,713.
6 Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	4,515,250.	3,598,753.	319,178.	597,319.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9 Other employee benefits	419,033.	318,149.	43,615.	57,269.
10 Payroll taxes	382,831.	291,929.	30,055.	60,847.
11 Fees for services (nonemployees):				
a Management				
b Legal	3,788.		3,788.	
c Accounting	30,012.	1,212.	28,800.	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees	1,646.		1,646.	
g Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Sch O.)	33,370.	18,556.	502.	14,312.
12 Advertising and promotion	208,494.	208,494.		
13 Office expenses	35,830.	29,792.	3,031.	3,007.
14 Information technology				
15 Royalties				
16 Occupancy	345,384.	275,514.	25,634.	44,236.
17 Travel				
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings				
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	73,901.	60,048.	5,082.	8,771.
23 Insurance	66,340.	66,340.		
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 O.)				
a MILEAGE & MEALS	145,291.	137,284.	3,907.	4,100.
b DUES & SUBSCRIPTIONS	108,104.	52,878.	25,132.	30,094.
c TELEPHONE	63,171.	52,272.	4,452.	6,447.
d MATERIALS	53,061.	45,812.	4,218.	3,031.
e All other expenses	102,705.	64,489.	1,410.	36,806.
25 Total functional expenses. Add lines 1 through 24e	7,483,795.	5,755,905.	626,938.	1,100,952.
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

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

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing	1,990,869.	1	871,724.
	2 Savings and temporary cash investments	5,509,075.	2	9,141,014.
	3 Pledges and grants receivable, net	3,871,355.	3	2,354,074.
	4 Accounts receivable, net		4	
	5 Loans and other receivables from 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		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	153,225.	9	159,222.
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 883,884.		
	b Less: accumulated depreciation	10b 686,413.	225,989.	10c 197,471.
	11 Investments - publicly traded securities		11	
	12 Investments - other securities. See Part IV, line 11		12	
	13 Investments - program-related. See Part IV, line 11	296,234.	13	323,442.
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11	29,025.	15	1,899,568.
16 Total assets. Add lines 1 through 15 (must equal line 33)	12,075,772.	16	14,946,515.	
Liabilities	17 Accounts payable and accrued expenses	506,122.	17	559,549.
	18 Grants payable		18	
	19 Deferred revenue	372,922.	19	949,197.
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Loans and other payables to 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		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D	51,372.	25	1,792,765.
	26 Total liabilities. Add lines 17 through 25	930,416.	26	3,301,511.
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 27, 28, 32, and 33.			
	27 Net assets without donor restrictions	8,138,288.	27	9,329,741.
	28 Net assets with donor restrictions	3,007,068.	28	2,315,263.
	Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 29 through 33.			
	29 Capital stock or trust principal, or current funds		29	
	30 Paid-in or capital surplus, or land, building, or equipment fund		30	
	31 Retained earnings, endowment, accumulated income, or other funds		31	
	32 Total net assets or fund balances	11,145,356.	32	11,645,004.
33 Total liabilities and net assets/fund balances	12,075,772.	33	14,946,515.	

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	7,964,738.
2	Total expenses (must equal Part IX, column (A), line 25)	2	7,483,795.
3	Revenue less expenses. Subtract line 2 from line 1	3	480,943.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	11,145,356.
5	Net unrealized gains (losses) on investments	5	18,705.
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain on Schedule O)	9	0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	11,645,004.

Part XII Financial Statements and Reporting

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

	Yes	No
1 Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other		
If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.		
2a Were the organization's financial statements compiled or reviewed by an independent accountant?		X
If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both:		
<input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		
b Were the organization's financial statements audited by an independent accountant?	X	
If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:		
<input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		
c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?	X	
If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.		
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Uniform Guidance, 2 C.F.R. Part 200, Subpart F?	X	
b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits	X	

Form 990 (2022)

SCHEDULE A
(Form 990)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.
Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2022

Open to Public
Inspection

Name of the organization VOICES FOR CHILDREN	Employer identification number 95-3786047
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Part I Reason for Public Charity Status. (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.)

- 1 A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**
- 2 A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E (Form 990).)
- 3 A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**
- 4 A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state: _____
- 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II.)
- 6 A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**
- 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
- 8 A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
- 9 An agricultural research organization described in **section 170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: _____
- 10 An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2).** (Complete Part III.)
- 11 An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).**
- 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2).** See **section 509(a)(3).** Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.
 - a **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**
 - b **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**
 - c **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**
 - d **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**
 - e Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.
 - f Enter the number of supported organizations
 - g Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-10 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
Total						

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	4,410,663.	5,396,585.	8,584,085.	8,563,081.	8,023,930.	34,978,344.
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge ...						
4 Total. Add lines 1 through 3	4,410,663.	5,396,585.	8,584,085.	8,563,081.	8,023,930.	34,978,344.
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						3,909,976.
6 Public support. Subtract line 5 from line 4.						31,068,368.

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
7 Amounts from line 4	4,410,663.	5,396,585.	8,584,085.	8,563,081.	8,023,930.	34,978,344.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources ...	21,140.	20,322.	24,535.	20,735.	205,766.	292,498.
9 Net income from unrelated business activities, whether or not the business is regularly carried on ...						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
11 Total support. Add lines 7 through 10						35,270,842.

12 Gross receipts from related activities, etc. (see instructions) **12**

13 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here**

Section C. Computation of Public Support Percentage

14 Public support percentage for 2022 (line 6, column (f), divided by line 11, column (f))	14	88.09 %
15 Public support percentage from 2021 Schedule A, Part II, line 14	15	87.41 %

16a 33 1/3% support test - 2022. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization

b 33 1/3% support test - 2021. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization

17a 10% -facts-and-circumstances test - 2022. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and **stop here.** Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization

b 10% -facts-and-circumstances test - 2021. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and **stop here.** Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization

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

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

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						

14 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here**

Section C. Computation of Public Support Percentage

15 Public support percentage for 2022 (line 8, column (f), divided by line 13, column (f))	15	%
16 Public support percentage from 2021 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2022 (line 10c, column (f), divided by line 13, column (f))	17	%
18 Investment income percentage from 2021 Schedule A, Part III, line 17	18	%

19a 33 1/3% support tests - 2022. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

b 33 1/3% support tests - 2021. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Part IV Supporting Organizations

(Complete only if you checked a box on line 12 of 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

	Yes	No
1 Are all of the organization's supported organizations listed by name in the organization's governing documents? <i>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.</i>		
2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>		
3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer lines 3b and 3c below.</i>		
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)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>		
c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>		
4a Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.</i>		
b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>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.</i>		
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)? <i>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.</i>		
5a Did the organization add, substitute, or remove any supported organizations during the tax year? <i>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).</i>		
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? <i>If "Yes," provide detail in Part VI.</i>		
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? <i>If "Yes," complete Part I of Schedule L (Form 990).</i>		
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? <i>If "Yes," complete Part I of Schedule L (Form 990).</i>		
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))? <i>If "Yes," provide detail in Part VI.</i>		
b Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If "Yes," provide detail in Part VI.</i>		
c Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? <i>If "Yes," provide detail in Part VI.</i>		
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)? <i>If "Yes," answer line 10b below.</i>		
b Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)</i>		

Part IV Supporting Organizations (continued)

	Yes	No
11 Has the organization accepted a gift or contribution from any of the following persons?		
a A person who directly or indirectly controls, either alone or together with persons described on lines 11b and 11c below, the governing body of a supported organization?		
b A family member of a person described on line 11a above?		
c A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide detail in Part VI .		
11a		
11b		
11c		

Section B. Type I Supporting Organizations

	Yes	No
1 Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) 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.		
1		
2		

Section C. Type II Supporting Organizations

	Yes	No
1 Were a majority of the organization's directors or trustees during the tax year also a majority of the directors 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		

Section 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?		
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).		
3 By reason of the relationship described on 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.		
1		
2		
3		

Section E. Type III Functionally Integrated Supporting Organizations

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

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.

Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1	
2	Recoveries of prior-year distributions	2	
3	Other gross income (see instructions)	3	
4	Add lines 1 through 3.	4	
5	Depreciation and depletion	5	
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6	
7	Other expenses (see instructions)	7	
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8	

Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):		
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	Total (add lines 1a, 1b, and 1c)	1d	
e	Discount claimed for blockage or other factors (explain in detail in Part VI):		
2	Acquisition indebtedness applicable to non-exempt-use assets	2	
3	Subtract line 2 from line 1d.	3	
4	Cash deemed held for exempt use. Enter 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	

Section 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	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).		

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

Section D - Distributions		Current Year
1	Amounts paid to supported organizations to accomplish exempt purposes	1
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	2
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	3
4	Amounts paid to acquire exempt-use assets	4
5	Qualified set-aside amounts (prior IRS approval required - provide 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 organization is responsive (provide details in Part VI). See instructions.	8
9	Distributable amount for 2022 from Section C, line 6	9
10	Line 8 amount divided by line 9 amount	10

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2022	(iii) Distributable Amount for 2022
1	Distributable amount for 2022 from Section C, line 6		
2	Underdistributions, if any, for years prior to 2022 (reasonable cause required - explain in Part VI). See instructions.		
3	Excess distributions carryover, if any, to 2022		
a	From 2017		
b	From 2018		
c	From 2019		
d	From 2020		
e	From 2021		
f	Total of lines 3a through 3e		
g	Applied to underdistributions of prior years		
h	Applied to 2022 distributable amount		
i	Carryover from 2017 not applied (see instructions)		
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.		
4	Distributions for 2022 from Section D, line 7: \$		
a	Applied to underdistributions of prior years		
b	Applied to 2022 distributable amount		
c	Remainder. Subtract lines 4a and 4b from line 4.		
5	Remaining underdistributions for years prior to 2022, 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 2022. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.		
7	Excess distributions carryover to 2023. Add lines 3j and 4c.		
8	Breakdown of line 7:		
a	Excess from 2018		
b	Excess from 2019		
c	Excess from 2020		
d	Excess from 2021		
e	Excess from 2022		

Part VI

Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

Multiple horizontal lines for supplemental information.

Schedule B
(Form 990)

Department of the Treasury
Internal Revenue Service

Schedule of Contributors

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

OMB No. 1545-0047

2022

Name of the organization

VOICES FOR CHILDREN

Employer identification number

95-3786047

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

501(c)(3) (enter number) organization

4947(a)(1) nonexempt charitable trust **not** treated as a private foundation

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

4947(a)(1) nonexempt charitable trust treated as a private foundation

501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.

Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of **(1)** \$5,000; or **(2)** 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year \$ _____

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990).

Name of organization VOICES FOR CHILDREN	Employer identification number 95-3786047
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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	 <hr/> <hr/> <hr/>	\$ <u>200,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2	 <hr/> <hr/> <hr/>	\$ <u>217,658.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
3	 <hr/> <hr/> <hr/>	\$ <u>218,495.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
4	 <hr/> <hr/> <hr/>	\$ <u>560,287.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
5	 <hr/> <hr/> <hr/>	\$ <u>578,420.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
6	 <hr/> <hr/> <hr/>	\$ <u>871,354.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization VOICES FOR CHILDREN	Employer identification number 95-3786047
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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
		\$ _____	
		\$ _____	
		\$ _____	
		\$ _____	
		\$ _____	
		\$ _____	
		\$ _____	
		\$ _____	

Name of organization VOICES FOR CHILDREN	Employer identification number 95-3786047
--	---

Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info. once.) \$ _____
Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift

Transferee's name, address, and ZIP + 4

Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift

Transferee's name, address, and ZIP + 4

Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift

Transferee's name, address, and ZIP + 4

Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift

Transferee's name, address, and ZIP + 4

Relationship of transferor to transferee

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

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

OMB No. 1545-0047

2022

Open to Public Inspection

Name of the organization: VOICES FOR CHILDREN; Employer identification number: 95-3786047

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

Table with 3 columns: Question, (a) Donor advised funds, (b) Funds and other accounts. Rows include total number at end of year, aggregate values, and yes/no questions about donor property and grant fund usage.

Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

Table with 3 columns: Question, (a) Donor advised funds, (b) Funds and other accounts. Rows include purpose of easements, number of easements, and monitoring expenses.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

Table with 3 columns: Question, (a) Donor advised funds, (b) Funds and other accounts. Rows include reporting requirements for art and historical treasures.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

- 3 Using the organization's acquisition, accession, and other records, check any of the following that make significant use of its collection items (check all that apply):
- a Public exhibition
 - b Scholarly research
 - c Preservation for future generations
 - d Loan or exchange program
 - e Other _____
- 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.
- 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

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

- 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No
- b If "Yes," explain the arrangement in Part XIII and complete the following table:
- | | Amount |
|---------------------------------|--------|
| c Beginning balance | 1c |
| d Additions during the year | 1d |
| e Distributions during the year | 1e |
| f Ending balance | 1f |
- 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No
- b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII

Part V Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	316,891.	365,782.	162,500.	162,500.	162,500.
b Contributions			115,308.		
c Net investment earnings, gains, and losses	30,252.	-47,070.	89,458.		5,127.
d Grants or scholarships					
e Other expenditures for facilities and programs					4,374.
f Administrative expenses	1,646.	1,821.	1,484.		753.
g End of year balance	345,497.	316,891.	365,782.	162,500.	162,500.

- 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
- a Board designated or quasi-endowment _____ %
 - b Permanent endowment _____ %
 - c Term endowment _____ %
- The percentages on lines 2a, 2b, and 2c should equal 100%.
- 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:
- | | Yes | No |
|-----------------------------|--------------------------|-------------------------------------|
| (i) Unrelated organizations | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| (ii) Related organizations | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
- b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?
- 4 Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements				
d Equipment				
e Other		883,884.	686,413.	197,471.
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				197,471.

Part VII Investments - Other Securities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely held equity interests		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)		

Part VIII Investments - Program Related.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)		

Part IX Other Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1) RENT DEPOSIT	29,025.
(2) RIGHT OF USE ASSET	1,870,543.
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)	

Part X Other Liabilities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) LEASE LIABILITY	1,792,765.
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)	

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

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.

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

1	Total revenue, gains, and other support per audited financial statements	1	8,278,859.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains (losses) on investments	2a	18,705.
b	Donated services and use of facilities	2b	27,357.
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII.)	2d	471,789.
e	Add lines 2a through 2d	2e	517,851.
3	Subtract line 2e from line 1	3	7,761,008.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	1,646.
b	Other (Describe in Part XIII.)	4b	202,084.
c	Add lines 4a and 4b	4c	203,730.
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12.)	5	7,964,738.

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

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

1	Total expenses and losses per audited financial statements	1	7,779,211.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	27,357.
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIII.)	2d	471,789.
e	Add lines 2a through 2d	2e	499,146.
3	Subtract line 2e from line 1	3	7,280,065.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	1,646.
b	Other (Describe in Part XIII.)	4b	202,084.
c	Add lines 4a and 4b	4c	203,730.
5	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18.)	5	7,483,795.

Part XIII Supplemental Information.

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

PART X, LINE 2:

THE ORGANIZATION FOLLOWS ACCOUNTING STANDARDS WHICH PROVIDE ACCOUNTING AND DISCLOSURE GUIDANCE ABOUT POSITIONS TAKEN BY AN ENTITY IN ITS TAX RETURNS THAT MIGHT BE UNCERTAIN. MANAGEMENT HAS CONSIDERED ITS TAX POSITION AND BELIEVES THAT ALL OF THE POSITIONS TAKEN IN ITS EXEMPT ORGANIZATION TAX RETURNS ARE MORE LIKELY THAN NOT TO BE SUSTAINED UPON EXAMINATION. AS OF JUNE 30, 2023 AND 2022, THE ORGANIZATION HAS NOT ACCRUED INTEREST OR PENALTIES RELATED TO UNCERTAIN TAX POSITIONS. THE ORGANIZATION FILES TAX RETURNS IN THE U.S. FEDERAL JURISDICTION AND THE STATE OF CALIFORNIA.

PART XI, LINE 2D - OTHER ADJUSTMENTS:

SPECIAL EVENT EXPENSES 471,789.

Part XIII Supplemental Information (continued)

PART XI, LINE 4B - OTHER ADJUSTMENTS:

SPECIAL EVENT DIRECT BENEFIT TO DONORS 202,084.

PART XII, LINE 2D - OTHER ADJUSTMENTS:

SPECIAL EVENT EXPENSES 471,789.

PART XII, LINE 4B - OTHER ADJUSTMENTS:

SPECIAL EVENT DIRECT BENEFIT TO DONORS 202,084.

Multiple horizontal lines for additional entries.

**SCHEDULE G
(Form 990)**

Supplemental Information Regarding Fundraising or Gaming Activities

OMB No. 1545-0047

Complete if the organization answered "Yes" on Form 990, Part IV, line 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

2022

Department of the Treasury
Internal Revenue Service

Attach to Form 990 or Form 990-EZ.

Open to Public Inspection

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

Name of the organization **VOICES FOR CHILDREN** Employer identification number **95-3786047**

Part I Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.

- 1** Indicate whether the organization raised funds through any of the following activities. Check all that apply.
- a Mail solicitations
 - b Internet and email solicitations
 - c Phone solicitations
 - d In-person solicitations
 - e Solicitation of non-government grants
 - f Solicitation of government grants
 - g Special fundraising events
- 2 a** Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? Yes No
- b** If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
Total						

- 3** List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.
-
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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.

		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events
		STARRY STARRY NIGHT (event type)	UPLIFTING VOICES (event type)	2 (total number)	(add col. (a) through col. (c))
Revenue	1	1,894,900.	318,196.	201,390.	2,414,486.
	2	1,735,175.	301,121.	169,140.	2,205,436.
	3	159,725.	17,075.	32,250.	209,050.
Direct Expenses	4				
	5		2,388.	8,907.	11,295.
	6	284,238.	12,422.	40,140.	336,800.
	7		8,588.		8,588.
	8				
	9	78,761.	25,246.	11,099.	115,106.
	10	Direct expense summary. Add lines 4 through 9 in column (d)			
11	Net income summary. Subtract line 10 from line 3, column (d)				-262,739.

Part III Gaming. Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))	
Revenue	1					
Direct Expenses	2					
	3					
	4					
	5					
	6	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No		
	7	Direct expense summary. Add lines 2 through 5 in column (d)				
	8	Net gaming income summary. Subtract line 7 from line 1, column (d)				

9 Enter the state(s) in which the organization conducts gaming activities: CA

a Is the organization licensed to conduct gaming activities in each of these states? Yes No

b If "No," explain: ORGANIZATION FILED A NON-PROFIT RAFFLE REPORT WITH THE OFFICE OF THE ATTORNEY GENERAL.

10a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year? Yes No

b If "Yes," explain: _____

- 11 Does the organization conduct gaming activities with nonmembers? Yes No
- 12 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:

a The organization's facility	13a	%
b An outside facility	13b	%
- 14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name _____
 Address _____

- 15a Does the organization have a contract with a third party from whom the organization receives gaming revenue? Yes No
- b If "Yes," enter the amount of gaming revenue received by the organization \$ _____ and the amount of gaming revenue retained by the third party \$ _____
- c If "Yes," enter name and address of the third party:

Name _____
 Address _____

16 Gaming manager information:

Name _____

Gaming manager compensation \$ _____

Description of services provided _____

Director/officer Employee Independent contractor

17 Mandatory distributions:

- a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? Yes No
- b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year \$ _____

Part IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.

**SCHEDULE I
(Form 990)**

Department of the Treasury
Internal Revenue Service

**Grants and Other Assistance to Organizations,
Governments, and Individuals in the United States**
Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.
Attach to Form 990.
Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2022

**Open to Public
Inspection**

Name of the organization **VOICES FOR CHILDREN** Employer identification number **95-3786047**

Part I General Information on Grants and Assistance

- 1** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes No
- 2** Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance

- 2** Enter total number of section 501(c)(3) and government organizations listed in the line 1 table
- 3** Enter total number of other organizations listed in the line 1 table

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

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
CHILDREN'S ASSISTANCE DONATIONS	0	63,817.	35,250.	FMV	TOYS, GIFT CARDS, BACKPACKS AND OTHER ITEMS FOR FOSTER CHILDREN.

Part IV Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

**SCHEDULE J
(Form 990)**

Department of the Treasury
Internal Revenue Service

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest
Compensated Employees
Complete if the organization answered "Yes" on Form 990, Part IV, line 23.
Attach to Form 990.
Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2022

Open to Public
Inspection

Name of the organization

VOICES FOR CHILDREN

Employer identification number

95-3786047

Part I Questions Regarding Compensation

- 1a** Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.
- | | |
|--|--|
| <input type="checkbox"/> First-class or charter travel | <input type="checkbox"/> Housing allowance or residence for personal use |
| <input type="checkbox"/> Travel for companions | <input type="checkbox"/> Payments for business use of personal residence |
| <input type="checkbox"/> Tax indemnification and gross-up payments | <input type="checkbox"/> Health or social club dues or initiation fees |
| <input type="checkbox"/> Discretionary spending account | <input type="checkbox"/> Personal services (such as maid, chauffeur, chef) |
- b** If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain
- 2** Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?
- 3** Indicate which, if any, of the following the organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.
- | | |
|---|---|
| <input type="checkbox"/> Compensation committee | <input type="checkbox"/> Written employment contract |
| <input type="checkbox"/> Independent compensation consultant | <input checked="" type="checkbox"/> Compensation survey or study |
| <input checked="" type="checkbox"/> Form 990 of other organizations | <input checked="" type="checkbox"/> Approval by the board or compensation committee |
- 4** During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:
- a** Receive a severance payment or change-of-control payment?
- b** Participate in or receive payment from a supplemental nonqualified retirement plan?
- c** Participate in or receive payment from an equity-based compensation arrangement?
- If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.
- Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.**
- 5** For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:
- a** The organization?
- b** Any related organization?
- If "Yes" on line 5a or 5b, describe in Part III.
- 6** For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:
- a** The organization?
- b** Any related organization?
- If "Yes" on line 6a or 6b, describe in Part III.
- 7** For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III
- 8** Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III
- 9** If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

	Yes	No
1b		
2	X	
4a		X
4b		X
4c		X
5a		X
5b		X
6a		X
6b		X
7		X
8		X
9		

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

Schedule J (Form 990) 2022

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

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

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

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC and/or 1099-NEC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1) KELLY DOUGLAS PREISDENT/CEO	(i)	252,903.	0.	0.	0.	0.	252,903.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) JESSICA MUNOZ EXECUTIVE DIRECTOR	(i)	151,717.	0.	0.	0.	0.	151,717.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

Part III Supplemental Information

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

Horizontal lines for supplemental information.

**SCHEDULE M
(Form 990)**

Noncash Contributions

OMB No. 1545-0047

2022

Open to Public Inspection

Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.
Attach to Form 990.

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

Department of the Treasury
Internal Revenue Service

Name of the organization: **VOICES FOR CHILDREN** Employer identification number: **95-3786047**

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art - Works of art				
2 Art - Historical treasures				
3 Art - Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities - Publicly traded	X	13	348,277.	
10 Securities - Closely held stock				
11 Securities - Partnership, LLC, or trust interests				
12 Securities - Miscellaneous				
13 Qualified conservation contribution - Historic structures				
14 Qualified conservation contribution - Other				
15 Real estate - Residential				
16 Real estate - Commercial				
17 Real estate - Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other (<u>SUPPLIES</u>)	X	43	25,357.	
26 Other (<u>EVENT TICKETS</u>)	X	7	9,893.	
27 Other ()				
28 Other ()				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part V, Donee Acknowledgement **29**

	Yes	No
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least 3 years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period?		X
b If "Yes," describe the arrangement in Part II.		
31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?		X
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?		X
b If "Yes," describe in Part II.		
33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.		

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule M (Form 990) 2022

Part II **Supplemental Information.** Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

Multiple horizontal lines for supplemental information.

**SCHEDULE O
(Form 990)**

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on
Form 990 or 990-EZ or to provide any additional information.
Attach to Form 990 or Form 990-EZ.
Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2022

Open to Public
Inspection

Name of the organization

VOICES FOR CHILDREN

Employer identification number

95-3786047

FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS:

CHILDREN IN URGENT NEED OF ADVOCACY WERE SERVED BY A CASA OR CASE LIAISON. IN ADDITION, 521 CHILDREN IN RIVERSIDE COUNTY ARE BEING SERVED BY CASAS. CASAS WORK CLOSELY WITH VFC STAFF TO PREPARE REPORTS FOR EACH JUVENILE COURT HEARING, AND DEVELOP APPROPRIATE ADVOCACY PLANS FOR THE CHILDREN. THIS INFORMATION HELPS SUPERIOR COURT JUDGES MAKE THE MOST INFORMED DECISIONS TO HELP EACH CHILD BE SAFE, HEALTHY, AND SUCCESSFUL. IN ADDITION, THE CASE FILES OF ALL CHILDREN IN SAN DIEGO COUNTY FOSTER CARE ARE REVIEWED ANNUALLY, AND THOUSANDS OF REPORTS ARE WRITTEN AND FILED THAT EVALUATE, UPDATE, AND PRIORITIZE CHILDREN'S CASES, WITH THE ULTIMATE GOAL OF MATCHING THEM WITH TRAINED CASA VOLUNTEERS. IN FEBRUARY 2023, VFC BECAME THE DESIGNATED CASA PROGRAM FOR THE PECHANGA TRIBAL COURT.

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

THE ORGANIZATION'S GOVERNING BODY CONDUCTS A REVIEW OF FORM 990. UPON ACCEPTANCE FORM 990 IS FILED.

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

ALL BOARD MEMBERS UPON ELECTION TO THE BOARD ARE PROVIDED WITH OUR FORMAL WRITTEN CONFLICT OF INTEREST POLICY. WE RETAIN SIGNED STATEMENTS FROM EACH MEMBER CONFIRMING THAT THEY HAVE READ THE CONFLICT OF INTEREST POLICY AND AGREE TO ABIDE BY ITS TERMS AND CONDITIONS.

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

THE ORGANIZATION PERFORMS EVALUATIONS AND REVIEW OF ALL EMPLOYEES ANNUALLY.

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

Schedule O (Form 990) 2022

Name of the organization VOICES FOR CHILDREN	Employer identification number 95-3786047
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COMPENSATION IS BASED ON BOARD APPROVED BUDGET REVIEWS.

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

UPON REQUEST, AND VIA THEIR WEBSITE, THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, ANNUAL REPORTS, AND AUDITED FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC.

FORM 990, PART XII, LINE 2C

THERE WAS NO CHANGE DURING THE YEAR.

2022 DEPRECIATION AND AMORTIZATION REPORT

FORM 990 PAGE 10

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Asset No.	Description	Date Acquired	Method	Life	Conv	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	* Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
2	BOOKCASES	01/01/84	SL	5.00		16	750.				750.	750.		0.	750.
4	BOOKCASE	12/01/83	SL	5.00		16	55.				55.	55.		0.	55.
20	STORAGE CABINETS	12/01/90	SL	5.00		16	406.				406.	406.		0.	406.
54	6 OAK L-SHAPED DESKS	10/19/98	SL	5.00		16	2,600.				2,600.	2,600.		0.	2,600.
55	WALNUT L-SHAPED DESK	10/19/98	SL	5.00		16	396.				396.	396.		0.	396.
56	3 FOOT ROUND TABLE	10/19/98	SL	5.00		16	108.				108.	108.		0.	108.
57	2 2-DRAWER 36" LATERAL FILES	10/19/98	SL	5.00		16	290.				290.	290.		0.	290.
58	WALNUT END TABLE	10/19/98	SL	5.00		16	42.				42.	42.		0.	42.
61	60 CHAIRS	11/05/98	SL	5.00		16	2,044.				2,044.	2,044.		0.	2,044.
62	DOLLY	11/05/98	SL	5.00		16	79.				79.	79.		0.	79.
63	8 TABLES	11/05/98	SL	5.00		16	667.				667.	667.		0.	667.
64	REFRIGERATOR	11/19/98	SL	5.00		16	733.				733.	733.		0.	733.
67	4 TASK CHAIRS	01/13/99	SL	5.00		16	345.				345.	345.		0.	345.
69	4 FILING CABINETS	02/09/99	SL	5.00		16	465.				465.	465.		0.	465.
78	OAK SECRETARY DESKS W/ RETURNS	12/15/99	SL	5.00		16	574.				574.	574.		0.	574.
80	CREDENZA	02/15/00	SL	5.00		16	98.				98.	98.		0.	98.
82	PROJECTOR	01/24/01	SL	5.00		16	2,390.				2,390.	2,390.		0.	2,390.
84	PS BUSINESS INTERIO	11/30/01	SL	7.00		16	2,116.				2,116.	2,116.		0.	2,116.

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91	OAK DESKS	06/01/03	SL	5.00		16	551.				551.	551.		0.	551.
101	HERMAN MILLER DESK CHAIRS	06/22/06	SL	5.00		16	6,000.				6,000.	6,000.		0.	6,000.
105	BOOKCASE	04/05/07	SL	5.00		16	75.				75.	75.		0.	75.
106	OAK LEFT HAND L-DESK	04/05/07	SL	5.00		16	377.				377.	377.		0.	377.
107	OAK LEFT HAND L-DESK	04/05/07	SL	5.00		16	458.				458.	458.		0.	458.
108	OAK RIGHT HAND L-DESK	04/05/07	SL	5.00		16	458.				458.	458.		0.	458.
112	COMPUTER	06/16/08	SL	5.00		16	5,137.				5,137.	5,137.		0.	5,137.
114	PRINTERS	03/17/08	SL	5.00		16	3,424.				3,424.	3,424.		0.	3,424.
116	BLACKBAUD	02/17/09	SL	7.00		16	22,881.				22,881.	22,881.		0.	22,881.
120	EQUIPMENT	04/21/09	SL	5.00		16	1,445.				1,445.	1,445.		0.	1,445.
121	FLEPPER DOOR	01/15/09	SL	5.00		16	1,031.				1,031.	1,031.		0.	1,031.
122	INTERIORS	12/01/08	SL	5.00		16	15,658.				15,658.	15,658.		0.	15,658.
124	SIGN INSTALLALTION	10/30/08	SL	7.00		16	2,581.				2,581.	2,581.		0.	2,581.
126	WORKSTATION SET	10/01/08	SL	7.00		16	140,926.				140,926.	140,926.		0.	140,926.
132	LASERJET P4515 PRINTER	05/24/10	SL	5.00		16	1,675.				1,675.	1,675.		0.	1,675.
133	LASERJET P4515 PRINTER	05/24/10	SL	5.00		16	1,675.				1,675.	1,675.		0.	1,675.
135	ADOBE CREATIVE SUITE 4 SOFTWARE	06/28/10	SL	5.00		16	750.				750.	750.		0.	750.
136	SERVER	12/03/10	SL	5.00		16	7,961.				7,961.	7,961.		0.	7,961.

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137	TABLE AND CHAIR	12/14/10	SL	5.00		16	582.				582.	582.		0.	582.
138	LASERJET P451	01/11/11	SL	5.00		16	1,728.				1,728.	1,728.		0.	1,728.
139	VOSTRO 3500	02/18/11	SL	5.00		16	856.				856.	856.		0.	856.
140	USED IT EQUIP	07/28/11	SL	5.00		16	15,720.				15,720.	15,720.		0.	15,720.
141	REFRIGERATOR	02/24/12	SL	5.00		16	960.				960.	960.		0.	960.
142	PERIMUTTER - PLASTIC CHARIS	02/24/12	SL	5.00		16	524.				524.	524.		0.	524.
143	BDR BACKUP	03/15/12	SL	5.00		16	3,248.				3,248.	3,248.		0.	3,248.
144	OFFICE FURNITURE - 2ND DESK JAMES	04/27/12	SL	5.00		16	638.				638.	638.		0.	638.
145	OFFICE FURNITURE & PHONES	04/27/12	SL	5.00		16	1,351.				1,351.	1,351.		0.	1,351.
147	FURNITURE & EQUIPMENT	12/31/12	SL	5.00		16	2,118.				2,118.	2,118.		0.	2,118.
148	FURNITURE & EQUIPMENT	02/06/13	SL	7.00		16	1,529.				1,529.	1,529.		0.	1,529.
149	FURNITURE & EQUIPMENT	02/23/13	SL	5.00		16	322.				322.	322.		0.	322.
151	PHONE SYSTEM	04/08/13	SL	5.00		16	6,258.				6,258.	6,258.		0.	6,258.
152	PHONE SYSTEM	04/08/13	SL	5.00		16	6,006.				6,006.	6,006.		0.	6,006.
153	FURNITURE & EQUIPMENT	05/03/13	SL	7.00		16	324.				324.	324.		0.	324.
154	FURNITURE & EQUIPMENT	05/08/13	SL	7.00		16	4,817.				4,817.	4,817.		0.	4,817.
155	EQUIPMENT	05/15/13	SL	7.00		16	1,242.				1,242.	1,242.		0.	1,242.
156	EQUIPMENT	05/30/13	SL	7.00		16	2,252.				2,252.	2,252.		0.	2,252.

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157	HP PRINTER & NOTEBOOK PC FOR JULI	07/08/12	SL	5.00		16	711.				711.	711.		0.	711.
158	COMPUTER	11/19/12	SL	5.00		16	1,725.				1,725.	1,725.		0.	1,725.
159	COMPUTER	12/31/12	SL	5.00		16	400.				400.	400.		0.	400.
160	EPSON EX3212 PROJECTOR	03/05/13	SL	5.00		16	432.				432.	432.		0.	432.
161	DELL COMPUTER	03/26/13	SL	5.00		16	7,913.				7,913.	7,913.		0.	7,913.
162	COMPUTER	03/30/13	SL	5.00		16	7,828.				7,828.	7,828.		0.	7,828.
163	SOFTWARE	04/06/13	SL	5.00		16	1,141.				1,141.	1,141.		0.	1,141.
164	DELL COMPUTER	04/17/13	SL	5.00		16	1,642.				1,642.	1,642.		0.	1,642.
165	DELL COMPUTER	04/23/13	SL	5.00		16	498.				498.	498.		0.	498.
166	DELL COMPUTER	04/23/13	SL	5.00		16	1,710.				1,710.	1,710.		0.	1,710.
167	DELL COMPUTER	04/24/13	SL	5.00		16	966.				966.	966.		0.	966.
168	DELL COMPUTER	04/26/13	SL	5.00		16	1,956.				1,956.	1,956.		0.	1,956.
169	COMPUTER	05/15/13	SL	5.00		16	388.				388.	388.		0.	388.
170	COMPUTER	06/05/13	SL	5.00		16	973.				973.	973.		0.	973.
171	COMPUTER	06/30/13	SL	5.00		16	447.				447.	447.		0.	447.
172	COMPUTER	06/30/13	SL	5.00		16	223.				223.	223.		0.	223.
173	COMPUTERS	10/05/13	SL	5.00		16	717.				717.	717.		0.	717.
174	FURNITURE	10/16/13	SL	7.00		16	3,395.				3,395.	3,395.		0.	3,395.

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175	FURNITURE	10/31/13	SL	7.00		16	580.				580.	580.		0.	580.
176	DONATED FURNITURE	10/31/13	SL	7.00		16	3,598.				3,598.	3,344.		0.	3,344.
177	3 DELL XPS WORKSTATIONS	11/03/13	SL	5.00		16	2,197.				2,197.	2,197.		0.	2,197.
178	6 VIEWSONIC MONITORS	11/05/13	SL	5.00		16	748.				748.	748.		0.	748.
179	TECHSOUP - SOFTWARE LICENSE	11/06/13	SL	5.00		16	820.				820.	820.		0.	820.
180	GM BUSINESS INTERIORS - CUBICLE PARTS	12/13/13	SL	7.00		16	1,537.				1,537.	1,537.		0.	1,537.
181	CASA MANAGER SOFTWARE	12/09/13	SL	5.00		16	43,390.				43,390.	43,390.		0.	43,390.
182	OFFICE FURNITURE - MIRAMAR OFFICE	01/06/14	SL	7.00		16	700.				700.	700.		0.	700.
183	COMPUTER EQUIPMENT	02/06/14	SL	5.00		16	518.				518.	518.		0.	518.
184	8 DELL INSERION LAPTOPS	04/03/14	SL	5.00		16	3,751.				3,751.	3,751.		0.	3,751.
185	COMPUTER EQUIPMENT	04/06/14	SL	5.00		16	525.				525.	525.		0.	525.
186	5 KOBE MOBILE TRAINING TABLES	05/06/14	SL	7.00		16	959.				959.	959.		0.	959.
187	3 DELL XPS 8700 DESKTOPS	05/03/14	SL	5.00		16	2,188.				2,188.	2,188.		0.	2,188.
188	DELL DESKTOP + 3 VIEWSONIC MONITORS	05/05/14	SL	5.00		16	1,198.				1,198.	1,198.		0.	1,198.
196	DESKS	08/14/14	SL	7.00		16	1,597.				1,597.	1,597.		0.	1,597.
197	APPLE IPADS	08/06/14	SL	5.00		16	1,516.				1,516.	1,516.		0.	1,516.
198	CASA MANAGER CUSTOMIZATION	08/22/14	SL	5.00		16	1,155.				1,155.	1,155.		0.	1,155.
199	12 DELL XPS 8700 WORKSTATIONS	09/03/14	SL	5.00		16	9,467.				9,467.	9,467.		0.	9,467.

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200	LAPTOP	11/05/14	SL	5.00		16	702.				702.	702.		0.	702.
201	LAPTOPS	03/05/15	SL	5.00		16	1,705.				1,705.	1,705.		0.	1,705.
202	SHOER OFFICE FURNITURE - DESKS	04/27/15	SL	7.00		16	4,153.				4,153.	4,153.		0.	4,153.
203	COMPUTER EQUIP	04/05/15	SL	5.00		16	632.				632.	632.		0.	632.
204	DELL DESKTOPS	06/03/15	SL	5.00		16	6,986.				6,986.	6,986.		0.	6,986.
205	DELL DESKTOPS	06/04/15	SL	5.00		16	6,997.				6,997.	6,997.		0.	6,997.
206	DELL DESKTOPS	06/12/15	SL	5.00		16	3,223.				3,223.	3,223.		0.	3,223.
207	DELL DESKTOPS	06/12/15	SL	5.00		16	3,868.				3,868.	3,868.		0.	3,868.
208	LATERAL FILES - SHORE	06/30/15	SL	7.00		16	1,239.				1,239.	1,239.		0.	1,239.
209	DELL DESKTOPS	09/05/15	SL	5.00		16	739.				739.	739.		0.	739.
210	CARPET	06/30/16	SL	7.00		16	10,718.				10,718.	9,314.		1,404.	10,718.
211	PORTBALE PROJECTOR	06/30/16	SL	5.00		16	856.				856.	856.		0.	856.
212	DONATED ARTWORK	06/15/16	SL	7.00		16	12,285.				12,285.	10,675.		1,610.	12,285.
213	PRINTER - COURT REPORTS	09/05/16	SL	5.00		16	765.				765.	765.		0.	765.
214	COMPUTER	11/05/16	SL	5.00		16	458.				458.	458.		0.	458.
215	DONOR WALL	12/07/16	SL	7.00		16	700.				700.	558.		100.	658.
216	COMPUTER	12/05/16	SL	5.00		16	578.				578.	578.		0.	578.
217	2 INSPIRON 3650 COMPUTERS	01/05/17	SL	5.00		16	1,071.				1,071.	1,071.		0.	1,071.

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218	1 DELL INSPIRON COMPUTER	01/05/17	SL	5.00		16	612.				612.	612.		0.	612.
219	DONOR WALL	02/09/17	SL	7.00		16	2,150.				2,150.	1,663.		307.	1,970.
220	DONOR WALL	03/01/17	SL	7.00		16	2,150.				2,150.	1,637.		307.	1,944.
221	TYCO INTGRTD SECURITY SYS - NEW ACCESS CONTROL	03/02/17	SL	5.00		16	4,433.				4,433.	4,433.		0.	4,433.
222	LAPTOPS - QTY 3	03/05/17	SL	5.00		16	2,051.				2,051.	2,051.		0.	2,051.
223	LAPTOPS - QTY 3	03/05/17	SL	5.00		16	1,740.				1,740.	1,740.		0.	1,740.
224	PRINTER-LASERJET	03/05/17	SL	5.00		16	663.				663.	663.		0.	663.
225	COMPUTER	04/05/17	SL	5.00		16	689.				689.	689.		0.	689.
226	TYCO ALARM SYSTEM	05/01/17	SL	5.00		16	19,201.				19,201.	17,927.		0.	17,927.
227	FURNITURE	09/28/17	SL	7.00		16	542.				542.	372.		77.	449.
228	COMPUTER	10/28/17	SL	5.00		16	630.				630.	599.		31.	630.
229	EQUIPMENT - CAMERA LENS	02/13/18	SL	5.00		16	700.				700.	618.		82.	700.
230	EQUIPMENT - CAMERA	02/28/18	SL	5.00		16	1,380.				1,380.	1,219.		161.	1,380.
231	COMPUTER	03/28/18	SL	5.00		16	638.				638.	555.		83.	638.
232	TELEPHONE DEPOSIT	07/01/18	SL	5.00		16	30,310.				30,310.	24,248.		6,062.	30,310.
233	FURNITURE	06/12/18	SL	7.00		16	1,671.				1,671.	976.		239.	1,215.
234	DELL BUSINESS	07/01/18	SL	5.00		16	23,142.				23,142.	18,512.		4,630.	23,142.
235	COMPUTER - MACBOOK	07/28/18	SL	5.00		16	2,063.				2,063.	1,617.		413.	2,030.

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236	TELEPHONE - TELDATA SYSTEM	07/17/18	SL	5.00		16	15,059.				15,059.	11,797.		3,012.	14,809.
237	COMPUTER	07/20/18	SL	5.00		16	648.				648.	509.		130.	639.
238	COMPUTER EQUIP	09/18/18	SL	5.00		16	740.				740.	555.		148.	703.
239	COMPUTER EQUIP	09/28/18	SL	5.00		16	2,178.				2,178.	1,635.		436.	2,071.
240	COPIER	10/08/18	SL	5.00		16	4,843.				4,843.	3,633.		969.	4,602.
241	EQUIPMENT	10/28/18	SL	5.00		16	614.				614.	451.		123.	574.
242	FURNITURE	11/28/18	SL	7.00		16	2,230.				2,230.	1,143.		319.	1,462.
243	COMPUTER EQUIP	11/28/18	SL	5.00		16	2,300.				2,300.	1,648.		460.	2,108.
244	CHAIR RAIL	12/18/18	SL	7.00		16	890.				890.	445.		127.	572.
245	LAPTOP	02/13/19	SL	5.00		16	36,156.				36,156.	23,121.		7,231.	30,352.
246	COMPUTERS	05/28/19	SL	5.00		16	1,661.				1,661.	1,024.		332.	1,356.
247	COMPUTERS	09/28/19	SL	5.00		16	2,052.				2,052.	1,128.		410.	1,538.
248	TELDATA PHONES FOR MEDOWLARK	12/17/19	SL	5.00		16	1,022.				1,022.	510.		204.	714.
249	LENOVO LAPTOPS	01/14/20	SL	5.00		16	20,051.				20,051.	9,076.		4,010.	13,086.
250	LENOVO LAPTOPS	02/01/20	SL	5.00		16	5,629.				5,629.	2,721.		1,126.	3,847.
251	COMPUTERS	05/28/20	SL	5.00		16	2,423.				2,423.	1,010.		485.	1,495.
252	COMPUTERS	05/28/20	SL	5.00		16	2,850.				2,850.	1,188.		570.	1,758.
253	COMPUTERS	05/28/20	SL	5.00		16	1,468.				1,468.	612.		294.	906.

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254	FURNITURE	07/01/20	SL	7.00		16	2,239.				2,239.	640.		320.	960.
255	FURNITURE	07/28/19	SL	7.00		16	1,371.				1,371.	572.		196.	768.
256	COMPUTERS	07/28/19	SL	5.00		16	712.				712.	415.		142.	557.
257	CDW - SERVER	08/19/20	SL	5.00		16	16,762.				16,762.	6,146.		3,352.	9,498.
258	COMPUTERS	10/28/20	SL	5.00		16	1,454.				1,454.	485.		291.	776.
259	COMPUTERS	04/28/21	SL	5.00		16	2,151.				2,151.	502.		430.	932.
260	BKM DONATRED FURNITURE	11/01/20	SL	7.00		16	27,000.				27,000.	6,428.		3,857.	10,285.
261	FURNITURE - KIDS	11/28/20	SL	5.00		16	658.				658.	209.		132.	341.
262	FURNITURE - KIDS	03/28/21	SL	7.00		16	2,387.				2,387.	426.		341.	767.
263	FURNITURE - KIDS	04/06/21	SL	7.00		16	552.				552.	99.		79.	178.
264	FURNITURE - KIDS	05/28/21	SL	7.00		16	240.				240.	37.		34.	71.
265	LOBBY SIGNAGE	06/08/21	SL	7.00		16	1,330.				1,330.	206.		190.	396.
266	LOBBY TV	06/22/21	SL	5.00		16	1,226.				1,226.	245.		245.	490.
267	COMPUTERS	07/28/21	SL	5.00		16	1,815.				1,815.	363.		363.	726.
268	FURNITURE	08/10/21	SL	5.00		16	1,330.				1,330.	244.		266.	510.
269	LAPTOPS, DOCKING STATIONS, MONITORS, ETC.	08/09/21	SL	5.00		16	3,074.				3,074.	564.		615.	1,179.
270	LAPTOPS, DOCKING STATIONS, MONITORS, ETC.	08/10/21	SL	5.00		16	12,299.				12,299.	2,255.		2,460.	4,715.
271	LAPTOPS, DOCKING STATIONS, MONITORS, ETC.	08/25/21	SL	5.00		16	20,139.				20,139.	3,357.		4,028.	7,385.

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272	LAPTOPS, DOCKING STATIONS, MONITORS, ETC.	08/28/21	SL	5.00		16	603.				603.	100.		121.	221.
273	LAPTOPS, DOCKING STATIONS, MONITORS, ETC.	08/28/21	SL	5.00		16	4,096.				4,096.	683.		819.	1,502.
274	LAPTOPS, DOCKING STATIONS, MONITORS, ETC.	09/28/21	SL	5.00		16	2,048.				2,048.	307.		410.	717.
275	LAPTOPS, DOCKING STATIONS, MONITORS, ETC.	09/28/21	SL	5.00		16	1,587.				1,587.	238.		317.	555.
276	COMPUTER EQUIPMENT	10/02/21	SL	5.00		16	7,118.				7,118.	1,068.		1,424.	2,492.
277	AVI SYSTEMS - DEPOSIT FOR TRAINING ROOM	12/31/21	NC	.000	HY		12,549.				12,549.			0.	
278	COMPUTER EQUIPMENT	01/28/22	SL	5.00		16	6,169.				6,169.	617.		1,234.	1,851.
279	COMPUTER EQUIPMENT	02/22/22	SL	5.00		16	1,135.				1,135.	76.		227.	303.
280	COMPUTER EQUIPMENT	02/28/22	SL	5.00		16	6,222.				6,222.	415.		1,244.	1,659.
281	COMPUTER EQUIPMENT	02/28/22	SL	5.00		16	2,707.				2,707.	180.		541.	721.
282	AVI SYSTEMS - DEPOSIT FOR TRAINING ROOM	02/28/22	NC	.000	HY		7,678.				7,678.			0.	
283	COMPUTER EQUIPMENT (FOR MONTH OF MARCH)	04/20/22	SL	5.00		16	28,928.				28,928.	1,413.		5,786.	7,199.
284	FURNITURE (RS)	04/28/22	SL	7.00		16	3,325.				3,325.	119.		475.	594.
285	FURNITURE (RS)	05/28/22	SL	7.00		16	2,784.				2,784.	66.		398.	464.
286	COMPUER EQUIPMENT	05/28/22	SL	5.00		16	6,901.				6,901.	230.		1,380.	1,610.
287	AVI SYSTEMS - DEPOSIT FOR TRAINING ROOM	06/30/22	NC	.000	HY		5,453.				5,453.			0.	
288	COMPUER EQUIPMENT	12/31/22	SL	5.00		16	45,383.				45,383.			6,292.	6,292.
	* TOTAL 990 PAGE 10 DEPR						883,884.				883,884.	612,512.		73,901.	686,413.

2022 DEPRECIATION AND AMORTIZATION REPORT

FORM 990 PAGE 10

990

Asset No.	Description	Date Acquired	Method	Life	Conv	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	* Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation	
	CURRENT YEAR ACTIVITY															
	BEGINNING BALANCE						838,501.			0.	838,501.	612,512.			680,121.	
	ACQUISITIONS						45,383.			0.	45,383.	0.			6,292.	
	DISPOSITIONS/RETIRED						0.			0.	0.	0.			0.	
	ENDING BALANCE						883,884.			0.	883,884.	612,512.			686,413.	
	ENDING ACCUM DEPR											686,413.				
	ENDING BOOK VALUE											197,471.				

(D) - Asset disposed

* ITC, Salvage, Bonus, Commercial Revitalization Deduction, GO Zone

Department of the Treasury
Internal Revenue Service

Attach to your tax return.

Go to www.irs.gov/Form4562 for instructions and the latest information.

Attachment
Sequence No. **179**

Name(s) shown on return

Business or activity to which this form relates

Identifying number

VOICES FOR CHILDREN

FORM 990 PAGE 10

95-3786047

Part I Election To Expense Certain Property Under Section 179 Note: If you have any listed property, complete Part V before you complete Part I.

1	Maximum amount (see instructions)	1	1,080,000.
2	Total cost of section 179 property placed in service (see instructions)	2	
3	Threshold cost of section 179 property before reduction in limitation	3	2,700,000.
4	Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-	4	
5	Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions	5	
6	(a) Description of property	(b) Cost (business use only)	(c) Elected cost
7	Listed property. Enter the amount from line 29	7	
8	Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7	8	
9	Tentative deduction. Enter the smaller of line 5 or line 8	9	
10	Carryover of disallowed deduction from line 13 of your 2021 Form 4562	10	
11	Business income limitation. Enter the smaller of business income (not less than zero) or line 5	11	
12	Section 179 expense deduction. Add lines 9 and 10, but don't enter more than line 11	12	
13	Carryover of disallowed deduction to 2023. Add lines 9 and 10, less line 12	13	

Note: Don't use Part II or Part III below for listed property. Instead, use Part V.

Part II Special Depreciation Allowance and Other Depreciation (Don't include listed property.)

14	Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year	14	
15	Property subject to section 168(f)(1) election	15	
16	Other depreciation (including ACRS)	16	73,901.

Part III MACRS Depreciation (Don't include listed property. See instructions.)

Section A

17	MACRS deductions for assets placed in service in tax years beginning before 2022	17	
18	If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here <input type="checkbox"/>		

Section B - Assets Placed in Service During 2022 Tax Year Using the General Depreciation System

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only - see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a	3-year property					
b	5-year property					
c	7-year property					
d	10-year property					
e	15-year property					
f	20-year property					
g	25-year property		25 yrs.		S/L	
h	Residential rental property	/	27.5 yrs.	MM	S/L	
		/	27.5 yrs.	MM	S/L	
i	Nonresidential real property	/	39 yrs.	MM	S/L	
		/		MM	S/L	

Section C - Assets Placed in Service During 2022 Tax Year Using the Alternative Depreciation System

20a	Class life				S/L	
b	12-year		12 yrs.		S/L	
c	30-year	/	30 yrs.	MM	S/L	
d	40-year	/	40 yrs.	MM	S/L	

Part IV Summary (See instructions.)

21	Listed property. Enter amount from line 28	21	
22	Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations - see instr.	22	73,901.
23	For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

Part V Listed Property (Include automobiles, certain other vehicles, certain aircraft, and property used for entertainment, recreation, or amusement.)
Note: For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete only 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable.

Section A - Depreciation and Other Information (Caution: See the instructions for limits for passenger automobiles.)

24a Do you have evidence to support the business/investment use claimed? Yes No 24b If "Yes," is the evidence written? Yes No
(a) Type of property (list vehicles first) (b) Date placed in service (c) Business/investment use percentage (d) Cost or other basis (e) Basis for depreciation (business/investment use only) (f) Recovery period (g) Method/Convention (h) Depreciation deduction (i) Elected section 179 cost
25 Special depreciation allowance for qualified listed property placed in service during the tax year and used more than 50% in a qualified business use
26 Property used more than 50% in a qualified business use:
27 Property used 50% or less in a qualified business use:
28 Add amounts in column (h), lines 25 through 27. Enter here and on line 21, page 1
29 Add amounts in column (i), line 26. Enter here and on line 7, page 1

Section B - Information on Use of Vehicles

Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person. If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles.

30 Total business/investment miles driven during the year (don't include commuting miles)
31 Total commuting miles driven during the year
32 Total other personal (noncommuting) miles driven
33 Total miles driven during the year. Add lines 30 through 32
34 Was the vehicle available for personal use during off-duty hours?
35 Was the vehicle used primarily by a more than 5% owner or related person?
36 Is another vehicle available for personal use?

Section C - Questions for Employers Who Provide Vehicles for Use by Their Employees

Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who aren't more than 5% owners or related persons.

37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees?
38 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners
39 Do you treat all use of vehicles by employees as personal use?
40 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received?
41 Do you meet the requirements concerning qualified automobile demonstration use?
Note: If your answer to 37, 38, 39, 40, or 41 is "Yes," don't complete Section B for the covered vehicles.

Part VI Amortization

(a) Description of costs (b) Date amortization begins (c) Amortizable amount (d) Code section (e) Amortization period or percentage (f) Amortization for this year
42 Amortization of costs that begins during your 2022 tax year:
43 Amortization of costs that began before your 2022 tax year
44 Total. Add amounts in column (f). See the instructions for where to report

2023 DEPRECIATION AND AMORTIZATION REPORT

- NEXT YEAR FEDERAL - VOICES FOR CHILDREN

Asset No.	Description	Date Acquired	Method	Life	Unadjusted Cost Or Basis	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Amount Of Depreciation
2	BOOKCASES	010184	SL	5.00	750.		750.	750.	0.
4	BOOKCASE	120183	SL	5.00	55.		55.	55.	0.
20	STORAGE CABINETS	120190	SL	5.00	406.		406.	406.	0.
54	6 OAK L-SHAPED DESKS	101998	SL	5.00	2,600.		2,600.	2,600.	0.
55	WALNUT L-SHAPED DESK	101998	SL	5.00	396.		396.	396.	0.
56	3 FOOT ROUND TABLE	101998	SL	5.00	108.		108.	108.	0.
57	2 2-DRAWER 36" LATERAL FILES	101998	SL	5.00	290.		290.	290.	0.
58	WALNUT END TABLE	101998	SL	5.00	42.		42.	42.	0.
61	60 CHAIRS	110598	SL	5.00	2,044.		2,044.	2,044.	0.
62	DOLLY	110598	SL	5.00	79.		79.	79.	0.
63	8 TABLES	110598	SL	5.00	667.		667.	667.	0.
64	REFRIGERATOR	111998	SL	5.00	733.		733.	733.	0.
67	4 TASK CHAIRS	011399	SL	5.00	345.		345.	345.	0.
69	4 FILING CABINETS	020999	SL	5.00	465.		465.	465.	0.
78	OAK SECRETARY DESKS W/ RETURNS	121599	SL	5.00	574.		574.	574.	0.
80	CREDENZA	021500	SL	5.00	98.		98.	98.	0.
82	PROJECTOR	012401	SL	5.00	2,390.		2,390.	2,390.	0.
84	PS BUSINESS INTERIO	113001	SL	7.00	2,116.		2,116.	2,116.	0.
91	OAK DESKS	060103	SL	5.00	551.		551.	551.	0.
101	HERMAN MILLER DESK CHAIRS	062206	SL	5.00	6,000.		6,000.	6,000.	0.
105	BOOKCASE	040507	SL	5.00	75.		75.	75.	0.
106	OAK LEFT HAND L-DESK	040507	SL	5.00	377.		377.	377.	0.
107	OAK LEFT HAND L-DESK	040507	SL	5.00	458.		458.	458.	0.
108	OAK RIGHT HAND L-DESK	040507	SL	5.00	458.		458.	458.	0.
112	COMPUTER	061608	SL	5.00	5,137.		5,137.	5,137.	0.
114	PRINTERS	031708	SL	5.00	3,424.		3,424.	3,424.	0.
116	BLACKBAUD	021709	SL	7.00	22,881.		22,881.	22,881.	0.
120	EQUIPMENT	042109	SL	5.00	1,445.		1,445.	1,445.	0.
121	FLEPPER DOOR	011509	SL	5.00	1,031.		1,031.	1,031.	0.
122	INTERIORS	120108	SL	5.00	15,658.		15,658.	15,658.	0.
124	SIGN INSTALLALTION	103008	SL	7.00	2,581.		2,581.	2,581.	0.
126	WORKSTATION SET	100108	SL	7.00	140,926.		140,926.	140,926.	0.
132	LASERJET P4515 PRINTER	052410	SL	5.00	1,675.		1,675.	1,675.	0.
133	LASERJET P4515 PRINTER	052410	SL	5.00	1,675.		1,675.	1,675.	0.

(D) - Asset disposed

* ITC, Section 179, Salvage, HR 3090, Commercial Revitalization Deduction, GO Zone

2023 DEPRECIATION AND AMORTIZATION REPORT

- NEXT YEAR FEDERAL - VOICES FOR CHILDREN

Asset No.	Description	Date Acquired	Method	Life	Unadjusted Cost Or Basis	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Amount Of Depreciation
135	ADOBE CREATIVE SUITE 4 SOFTWARE	062810	SL	5.00	750.		750.	750.	0.
136	SERVER	120310	SL	5.00	7,961.		7,961.	7,961.	0.
137	TABLE AND CHAIR	121410	SL	5.00	582.		582.	582.	0.
138	LASERJET P451	011111	SL	5.00	1,728.		1,728.	1,728.	0.
139	VOSTRO 3500	021811	SL	5.00	856.		856.	856.	0.
140	USED IT EQUIP	072811	SL	5.00	15,720.		15,720.	15,720.	0.
141	REFRIGERATOR	022412	SL	5.00	960.		960.	960.	0.
142	PERIMUTTER - PLASTIC CHARIS	022412	SL	5.00	524.		524.	524.	0.
143	BDR BACKUP	031512	SL	5.00	3,248.		3,248.	3,248.	0.
144	OFFICE FURNITURE - 2ND DESK JAMES	042712	SL	5.00	638.		638.	638.	0.
145	OFFICE FURNITURE & PHONES	042712	SL	5.00	1,351.		1,351.	1,351.	0.
147	FURNITURE & EQUIPMENT	123112	SL	5.00	2,118.		2,118.	2,118.	0.
148	FURNITURE & EQUIPMENT	020613	SL	7.00	1,529.		1,529.	1,529.	0.
149	FURNITURE & EQUIPMENT	022313	SL	5.00	322.		322.	322.	0.
151	PHONE SYSTEM	040813	SL	5.00	6,258.		6,258.	6,258.	0.
152	PHONE SYSTEM	040813	SL	5.00	6,006.		6,006.	6,006.	0.
153	FURNITURE & EQUIPMENT	050313	SL	7.00	324.		324.	324.	0.
154	FURNITURE & EQUIPMENT	050813	SL	7.00	4,817.		4,817.	4,817.	0.
155	EQUIPMENT	051513	SL	7.00	1,242.		1,242.	1,242.	0.
156	EQUIPMENT	053013	SL	7.00	2,252.		2,252.	2,252.	0.
157	HP PRINTER & NOTEBOOK PC FOR JULI	070812	SL	5.00	711.		711.	711.	0.
158	COMPUTER	111912	SL	5.00	1,725.		1,725.	1,725.	0.
159	COMPUTER	123112	SL	5.00	400.		400.	400.	0.
160	EPSON EX3212 PROJECTOR	030513	SL	5.00	432.		432.	432.	0.
161	DELL COMPUTER	032613	SL	5.00	7,913.		7,913.	7,913.	0.
162	COMPUTER	033013	SL	5.00	7,828.		7,828.	7,828.	0.
163	SOFTWARE	040613	SL	5.00	1,141.		1,141.	1,141.	0.
164	DELL COMPUTER	041713	SL	5.00	1,642.		1,642.	1,642.	0.
165	DELL COMPUTER	042313	SL	5.00	498.		498.	498.	0.
166	DELL COMPUTER	042313	SL	5.00	1,710.		1,710.	1,710.	0.
167	DELL COMPUTER	042413	SL	5.00	966.		966.	966.	0.
168	DELL COMPUTER	042613	SL	5.00	1,956.		1,956.	1,956.	0.
169	COMPUTER	051513	SL	5.00	388.		388.	388.	0.
170	COMPUTER	060513	SL	5.00	973.		973.	973.	0.

(D) - Asset disposed

* ITC, Section 179, Salvage, HR 3090, Commercial Revitalization Deduction, GO Zone

2023 DEPRECIATION AND AMORTIZATION REPORT

- NEXT YEAR FEDERAL - VOICES FOR CHILDREN

Asset No.	Description	Date Acquired	Method	Life	Unadjusted Cost Or Basis	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Amount Of Depreciation
171	COMPUTER	063013	SL	5.00	447.		447.	447.	0.
172	COMPUTER	063013	SL	5.00	223.		223.	223.	0.
173	COMPUTERS	100513	SL	5.00	717.		717.	717.	0.
174	FURNITURE	101613	SL	7.00	3,395.		3,395.	3,395.	0.
175	FURNITURE	103113	SL	7.00	580.		580.	580.	0.
176	DONATED FURNITURE	103113	SL	7.00	3,598.		3,598.	3,344.	0.
177	3 DELL XPS WORKSTATIONS	110313	SL	5.00	2,197.		2,197.	2,197.	0.
178	6 VIEWSONIC MONITORS	110513	SL	5.00	748.		748.	748.	0.
179	TECHSOUP - SOFTWARE LICENSE	110613	SL	5.00	820.		820.	820.	0.
	GM BUSINESS INTERIORS - CUBICLE								
180	PARTS	121313	SL	7.00	1,537.		1,537.	1,537.	0.
181	CASA MANAGER SOFTWARE	120913	SL	5.00	43,390.		43,390.	43,390.	0.
182	OFFICE FURNITURE - MIRAMAR OFFICE	010614	SL	7.00	700.		700.	700.	0.
183	COMPUTER EQUIPMENT	020614	SL	5.00	518.		518.	518.	0.
184	8 DELL INSERION LAPTOPS	040314	SL	5.00	3,751.		3,751.	3,751.	0.
185	COMPUTER EQUIPMENT	040614	SL	5.00	525.		525.	525.	0.
186	5 KOBE MOBILE TRAINING TABLES	050614	SL	7.00	959.		959.	959.	0.
187	3 DELL XPS 8700 DESKTOPS	050314	SL	5.00	2,188.		2,188.	2,188.	0.
188	DELL DESKTOP + 3 VIEWSONIC MONITORS	050514	SL	5.00	1,198.		1,198.	1,198.	0.
196	DESKS	081414	SL	7.00	1,597.		1,597.	1,597.	0.
197	APPLE IPADS	080614	SL	5.00	1,516.		1,516.	1,516.	0.
198	CASA MANAGER CUSTOMIZATION	082214	SL	5.00	1,155.		1,155.	1,155.	0.
199	12 DELL XPS 8700 WORKSTATIONS	090314	SL	5.00	9,467.		9,467.	9,467.	0.
200	LAPTOP	110514	SL	5.00	702.		702.	702.	0.
201	LAPTOPS	030515	SL	5.00	1,705.		1,705.	1,705.	0.
202	SHOER OFFICE FURNITURE - DESKS	042715	SL	7.00	4,153.		4,153.	4,153.	0.
203	COMPUTER EQUIP	040515	SL	5.00	632.		632.	632.	0.
204	DELL DESKTOPS	060315	SL	5.00	6,986.		6,986.	6,986.	0.
205	DELL DESKTOPS	060415	SL	5.00	6,997.		6,997.	6,997.	0.
206	DELL DESKTOPS	061215	SL	5.00	3,223.		3,223.	3,223.	0.
207	DELL DESKTOPS	061215	SL	5.00	3,868.		3,868.	3,868.	0.
208	LATERAL FILES - SHORE	063015	SL	7.00	1,239.		1,239.	1,239.	0.
209	DELL DESKTOPS	090515	SL	5.00	739.		739.	739.	0.
210	CARPET	063016	SL	7.00	10,718.		10,718.	10,718.	0.

(D) - Asset disposed

* ITC, Section 179, Salvage, HR 3090, Commercial Revitalization Deduction, GO Zone

2023 DEPRECIATION AND AMORTIZATION REPORT

- NEXT YEAR FEDERAL - VOICES FOR CHILDREN

Asset No.	Description	Date Acquired	Method	Life	Unadjusted Cost Or Basis	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Amount Of Depreciation
211	PORTBALE PROJECTOR	063016	SL	5.00	856.		856.	856.	0.
212	DONATED ARTWORK	061516	SL	7.00	12,285.		12,285.	12,285.	0.
213	PRINTER - COURT REPORTS	090516	SL	5.00	765.		765.	765.	0.
214	COMPUTER	110516	SL	5.00	458.		458.	458.	0.
215	DONOR WALL	120716	SL	7.00	700.		700.	658.	42.
216	COMPUTER	120516	SL	5.00	578.		578.	578.	0.
217	2 INSPIRON 3650 COMPUTERS	010517	SL	5.00	1,071.		1,071.	1,071.	0.
218	1 DELL INSPIRON COMPUTER	010517	SL	5.00	612.		612.	612.	0.
219	DONOR WALL	020917	SL	7.00	2,150.		2,150.	1,970.	180.
220	DONOR WALL	030117	SL	7.00	2,150.		2,150.	1,944.	206.
	TYCO INTGRTD SECURITY SYS - NEW								
221	ACCESS CONTROL	030217	SL	5.00	4,433.		4,433.	4,433.	0.
222	LAPTOPS - QTY 3	030517	SL	5.00	2,051.		2,051.	2,051.	0.
223	LAPTOPS - QTY 3	030517	SL	5.00	1,740.		1,740.	1,740.	0.
224	PRINTER-LASERJET	030517	SL	5.00	663.		663.	663.	0.
225	COMPUTER	040517	SL	5.00	689.		689.	689.	0.
226	TYCO ALARM SYSTEM	050117	SL	5.00	19,201.		19,201.	17,927.	0.
227	FURNITURE	092817	SL	7.00	542.		542.	449.	77.
228	COMPUTER	102817	SL	5.00	630.		630.	630.	0.
229	EQUIPMENT - CAMERA LENS	021318	SL	5.00	700.		700.	700.	0.
230	EQUIPMENT - CAMERA	022818	SL	5.00	1,380.		1,380.	1,380.	0.
231	COMPUTER	032818	SL	5.00	638.		638.	638.	0.
232	TELEPHONE DEPOSIT	070118	SL	5.00	30,310.		30,310.	30,310.	0.
233	FURNITURE	061218	SL	7.00	1,671.		1,671.	1,215.	239.
234	DELL BUSINESS	070118	SL	5.00	23,142.		23,142.	23,142.	2.
235	COMPUTER - MACBOOK	072818	SL	5.00	2,063.		2,063.	2,030.	33.
236	TELEPHONE - TELDATA SYSTEM	071718	SL	5.00	15,059.		15,059.	14,809.	250.
237	COMPUTER	072018	SL	5.00	648.		648.	639.	9.
238	COMPUTER EQUIP	091818	SL	5.00	740.		740.	703.	37.
239	COMPUTER EQUIP	092818	SL	5.00	2,178.		2,178.	2,071.	107.
240	COPIER	100818	SL	5.00	4,843.		4,843.	4,602.	241.
241	EQUIPMENT	102818	SL	5.00	614.		614.	574.	40.
242	FURNITURE	112818	SL	7.00	2,230.		2,230.	1,462.	319.
243	COMPUTER EQUIP	112818	SL	5.00	2,300.		2,300.	2,108.	192.

(D) - Asset disposed

* ITC, Section 179, Salvage, HR 3090, Commercial Revitalization Deduction, GO Zone

2023 DEPRECIATION AND AMORTIZATION REPORT

- NEXT YEAR FEDERAL - VOICES FOR CHILDREN

Asset No.	Description	Date Acquired	Method	Life	Unadjusted Cost Or Basis	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Amount Of Depreciation
244	CHAIR RAIL	121818	SL	7.00	890.		890.	572.	127.
245	LAPTOP	021319	SL	5.00	36,156.		36,156.	30,352.	5,804.
246	COMPUTERS	052819	SL	5.00	1,661.		1,661.	1,356.	305.
247	COMPUTERS	092819	SL	5.00	2,052.		2,052.	1,538.	410.
248	TELEDATA PHONES FOR MEDOWLARK	121719	SL	5.00	1,022.		1,022.	714.	204.
249	LENOVO LAPTOPS	011420	SL	5.00	20,051.		20,051.	13,086.	4,010.
250	LENOVO LAPTOPS	020120	SL	5.00	5,629.		5,629.	3,847.	1,126.
251	COMPUTERS	052820	SL	5.00	2,423.		2,423.	1,495.	485.
252	COMPUTERS	052820	SL	5.00	2,850.		2,850.	1,758.	570.
253	COMPUTERS	052820	SL	5.00	1,468.		1,468.	906.	294.
254	FURNITURE	070120	SL	7.00	2,239.		2,239.	960.	320.
255	FURNITURE	072819	SL	7.00	1,371.		1,371.	768.	196.
256	COMPUTERS	072819	SL	5.00	712.		712.	557.	142.
257	CDW - SERVER	081920	SL	5.00	16,762.		16,762.	9,498.	3,352.
258	COMPUTERS	102820	SL	5.00	1,454.		1,454.	776.	291.
259	COMPUTERS	042821	SL	5.00	2,151.		2,151.	932.	430.
260	BKM DONATRED FURNITURE	110120	SL	7.00	27,000.		27,000.	10,285.	3,857.
261	FURNITURE - KIDS	112820	SL	5.00	658.		658.	341.	132.
262	FURNITURE - KIDS	032821	SL	7.00	2,387.		2,387.	767.	341.
263	FURNITURE - KIDS	040621	SL	7.00	552.		552.	178.	79.
264	FURNITURE - KIDS	052821	SL	7.00	240.		240.	71.	34.
265	LOBBY SIGNAGE	060821	SL	7.00	1,330.		1,330.	396.	190.
266	LOBBY TV	062221	SL	5.00	1,226.		1,226.	490.	245.
267	COMPUTERS	072821	SL	5.00	1,815.		1,815.	726.	363.
268	FURNITURE	081021	SL	5.00	1,330.		1,330.	510.	266.
269	LAPTOPS, DOCKING STATIONS, MONITORS, ETC.	080921	SL	5.00	3,074.		3,074.	1,179.	615.
270	LAPTOPS, DOCKING STATIONS, MONITORS, ETC.	081021	SL	5.00	12,299.		12,299.	4,715.	2,460.
271	LAPTOPS, DOCKING STATIONS, MONITORS, ETC.	082521	SL	5.00	20,139.		20,139.	7,385.	4,028.
272	LAPTOPS, DOCKING STATIONS, MONITORS, ETC.	082821	SL	5.00	603.		603.	221.	121.

(D) - Asset disposed

* ITC, Section 179, Salvage, HR 3090, Commercial Revitalization Deduction, GO Zone

2023 DEPRECIATION AND AMORTIZATION REPORT

- NEXT YEAR FEDERAL - VOICES FOR CHILDREN

Asset No.	Description	Date Acquired	Method	Life	Unadjusted Cost Or Basis	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Amount Of Depreciation
273	LAPTOPS, DOCKING STATIONS, MONITORS, ETC.	082821	SL	5.00	4,096.		4,096.	1,502.	819.
274	LAPTOPS, DOCKING STATIONS, MONITORS, ETC.	092821	SL	5.00	2,048.		2,048.	717.	410.
275	LAPTOPS, DOCKING STATIONS, MONITORS, ETC.	092821	SL	5.00	1,587.		1,587.	555.	317.
276	COMPUTER EQUIPMENT	100221	SL	5.00	7,118.		7,118.	2,492.	1,424.
277	AVI SYSTEMS - DEPOSIT FOR TRAINING ROOM	123121	NC	.000	12,549.		12,549.		0.
278	COMPUTER EQUIPMENT	012822	SL	5.00	6,169.		6,169.	1,851.	1,234.
279	COMPUTER EQUIPMENT	022222	SL	5.00	1,135.		1,135.	303.	227.
280	COMPUTER EQUIPMENT	022822	SL	5.00	6,222.		6,222.	1,659.	1,244.
281	COMPUTER EQUIPMENT	022822	SL	5.00	2,707.		2,707.	721.	541.
282	AVI SYSTEMS - DEPOSIT FOR TRAINING ROOM	022822	NC	.000	7,678.		7,678.		0.
283	COMPUTER EQUIPMENT (FOR MONTH OF MARCH)	042022	SL	5.00	28,928.		28,928.	7,199.	5,786.
284	FURNITURE (RS)	042822	SL	7.00	3,325.		3,325.	594.	475.
285	FURNITURE (RS)	052822	SL	7.00	2,784.		2,784.	464.	398.
286	COMPUER EQUIPMENT	052822	SL	5.00	6,901.		6,901.	1,610.	1,380.
287	AVI SYSTEMS - DEPOSIT FOR TRAINING ROOM	063022	NC	.000	5,453.		5,453.		0.
288	COMPUER EQUIPMENT	123122	SL	5.00	45,383.		45,383.	6,292.	9,077.
	* TOTAL 990 PAGE 10 DEPR				883,884.		883,884.	686,413.	56,103.

(D) - Asset disposed

* ITC, Section 179, Salvage, HR 3090, Commercial Revitalization Deduction, GO Zone

Forms included in Electronic Filing

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