

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

OMB No. 1545-0047

2009

Open to Public Inspection

The organization may have to use a copy of this return to satisfy state reporting requirements.

A For the 2009 calendar year, or tax year beginning **JUL 1, 2009** and ending **JUN 30, 2010**

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	Please use IRS label or print or type. See Special Instructions.	C Name of organization CHILDREN INCORPORATED		D Employer identification number 54-0761510
		Doing Business As		E Telephone number (804) 359-4562
		Number and street (or P.O. box if mail is not delivered to street address) Room/suite 4205 DOVER ROAD		G Gross receipts \$ 5,959,516.
		City or town, state or country, and ZIP + 4 RICHMOND, VA 23221		H(a) Is this a group return for affiliates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all affiliates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. (see instructions) H(c) Group exemption number
F Name and address of principal officer: RICHARD E. BALTIMORE SAME AS C ABOVE				
I Tax-exempt status: <input checked="" type="checkbox"/> 501(c) (3) (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527				
J Website: WWW.CHILDREN-INC.ORG				
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: 1964 M State of legal domicile: VA				

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: TO PROVIDE RESOURCES FOR CHILDREN IN NEED IN THE UNITED STATES AND ABROAD, BECAUSE CHILDREN		
	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	13
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	9
	5 Total number of employees (Part V, line 2a)	5	38
	6 Total number of volunteers (estimate if necessary)	6	200
	7a Total gross unrelated business revenue from Part VIII, column (C), line 12	7a	0.
b Net unrelated business taxable income from Form 990-T, line 34	7b	0.	
Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year 6,281,511.	Current Year 5,767,655.
	9 Program service revenue (Part VIII, line 2g)		
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	-638,261.	191,861.
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	4,006.	
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	5,647,256.	5,959,516.
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	4,093,813.	3,968,870.
	14 Benefits paid to or for members (Part IX, column (A), line 4)		
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	1,823,654.	1,608,174.
	16a Professional fundraising fees (Part IX, column (A), line 11e)		
	b Total fundraising expenses (Part IX, column (D), line 25)	413,275.	
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	964,649.	742,771.
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	6,882,116.	6,319,815.	
19 Revenue less expenses. Subtract line 18 from line 12	-1,234,860.	-360,299.	
Net Assets or Fund Balances	20 Total assets (Part X, line 18)	Beginning of Current Year 4,266,565.	End of Year 3,884,880.
	21 Total liabilities (Part X, line 26)	530,862.	437,437.
	22 Net assets or fund balances. Subtract line 21 from line 20	3,735,703.	3,447,443.

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: *Richard E. Baltimore*
Signature of officer _____ Date _____
RICHARD E. BALTIMORE, CHAIRMAN OF THE BOARD
Type or print name and title

Paid Preparer's Use Only

Preparer's signature: _____ Date: **02/25/11** Check if self-employed: Preparer's identifying number (see instructions): _____
 Firm's name (or yours if self-employed), address, and ZIP + 4: **CHERRY, BEKAERT & HOLLAND, L.L.P.**
200 SOUTH 10TH STREET, SUITE 900
RICHMOND, VA 23219
 EIN: _____ Phone no.: **(804) 673-4224**

May the IRS discuss this return with the preparer shown above? (see instructions) Yes No

Part III Statement of Program Service Accomplishments

1 Briefly describe the organization's mission: SEE SCHEDULE O FOR CONTINUATION TO ASSIST CHILDREN OF ALL RACES AND CREEDS THROUGHOUT THE WORLD, ADMINISTERING TO THEIR PHYSICAL, PSYCHOLOGICAL AND EMOTIONAL NEEDS. THE ORGANIZATION AIMS TO ASSIST AND COOPERATE WITH OTHER ORGANIZATIONS AND INSTITUTIONS WHICH ARE DEDICATED TO THE SUPPORT, EDUCATION AND

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? [] Yes [X] No If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? [] Yes [X] No If "Yes," describe these changes on Schedule O.

4 Describe the exempt purpose achievements for each of the organization's three largest program services by expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses \$ 5,144,764. including grants of \$ 2,858,494.) (Revenue \$) CHILD CARE ASSISTANCE - MONTHLY SUBSIDY PAYMENTS, SPECIAL GIFTS AND CLOTHING FOR CHILDREN IN PROJECTS LOCATED IN THE U.S. AND COUNTRIES AROUND THE WORLD.

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

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

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

4e Total program service expenses \$ 5,144,764.

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>	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?		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>		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? <i>If "Yes," complete Schedule C, Part II</i>		X
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? <i>If "Yes," complete Schedule C, Part III</i>		
6	Did the organization maintain any donor advised funds or any similar funds or accounts where 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>		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>		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>		X
9	Did the organization report an amount in Part X, line 21; 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>		X
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>	X	
11	Is the organization's answer to any of the following questions "Yes"? <i>If so, complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable</i>	X	
	• 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>		
	• 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>		
	• 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>		
	• 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>		
	• Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X.</i>		
	• 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? <i>If "Yes," complete Schedule D, Part X.</i>		
12	Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI, XII, and XIII.</i>	X	
12A	Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional</i>		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?		X
14b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? <i>If "Yes," complete Schedule F, Part I</i>	X	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? <i>If "Yes," complete Schedule F, Part II</i>	X	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? <i>If "Yes," complete Schedule F, Part III</i>		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>		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>		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>		X
20	Did the organization operate one or more hospitals? <i>If "Yes," complete Schedule H</i>		X

Part IV Checklist of Required Schedules (continued)

	Yes	No
21 Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>	X	
22 Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>	X	
23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>		X
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25</i>		X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
25a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>		X
b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>		X
26 Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? <i>If "Yes," complete Schedule L, Part II</i>		X
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? <i>If "Yes," complete Schedule L, Part III</i>		X
28 Was the organization a party to a business transaction with one of the following parties, (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):		
a A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		X
b A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		X
c An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>		X
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	X	
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>		X
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>		X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>		X
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>		X
34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1</i>		X
35 Is any related organization a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>		X
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>		X
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>		X
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?	X	

Note. All Form 990 filers are required to complete Schedule O.

Part V Statements Regarding Other IRS Filings and Tax Compliance

		Yes	No
1a	Enter the number reported in Box 3 of Form 1099, Annual Summary and Transmittal of U.S. Information Returns. Enter -0- if not applicable		
1b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable		
1c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?		
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		
2b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? <i>Note.</i> If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions)	X	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?		X
3b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O		
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
4b	If "Yes," enter the name of the foreign country: _____ See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		X
5b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		X
5c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?		
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?		X
6b	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).		
7a	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
7b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		
7c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		X
7d	If "Yes," indicate the number of Forms 8282 filed during the year		
7e	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		X
7f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		X
7g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?		
7h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?		
9	Sponsoring organizations maintaining donor advised funds.		
9a	Did the organization make any taxable distributions under section 4968?		
9b	Did the organization make a distribution to a donor, donor advisor, or related person?		
10	Section 501(c)(7) organizations. Enter:		
10a	Initiation fees and capital contributions included on Part VIII, line 12		
10b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities		
11	Section 501(c)(12) organizations. Enter:		
11a	Gross income from members or shareholders		
11b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)		
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?		
12b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year		

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

Section A. Governing Body and Management

	Yes	No
1a Enter the number of voting members of the governing body		
1b Enter the number of voting members that are independent		
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 or trustees, or key employees to a management company or other person?		X
4 Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?		X
5 Did the organization become aware during the year of a material diversion of the organization's assets?		X
6 Does the organization have members or stockholders?		X
7a Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?		X
7b Are any decisions of the governing body subject to approval by members, stockholders, or other persons?		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 in Schedule O		X

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

	Yes	No
10a Does the organization have local chapters, branches, or affiliates?		X
10b If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?		
11 Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	X	
11A Describe in Schedule O the process, if any, used by the organization to review this Form 990.		
12a Does the organization have a written conflict of interest policy? If "No," go to line 13	X	
12b Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	X	
12c Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	X	
13 Does the organization have a written whistleblower policy?	X	
14 Does 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 in Schedule O. (See instructions.)		
16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?		X
16b If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?		

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed **VA, AL, AK, AZ, CA, CT, FL, IL, ME, MD, MA, MI**
- 18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply.
 Own website Another's website Upon request
- 19 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public.
- 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization: **KATHRYN GARVIN - (804) 359-4562**
4205 DOVER ROAD, RICHMOND, VA 23221

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

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. Use Schedule J-2 if additional space is needed.

• 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. See instructions for definition of "key employee."

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

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

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

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

Check this box if the organization did not compensate any current officer, director, or trustee.

(A) Name and Title	(B) Average hours per week	(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			
MARIAN G. CUMMINS PRESIDENT & CEO	45.00	X		X				101,924.	0.	23,440.
RICHARD E. BALTIMORE CHAIRMAN OF THE BOARD	1.00	X		X				0.	0.	0.
DANA D. MCDANIEL VICE CHAIRMAN	1.00	X		X				0.	0.	0.
VIRGINIA F. MARCHETTI SECRETARY	1.00	X		X				0.	0.	0.
TIMOTHY E. CARPENTER TREASURER	1.00	X		X				0.	0.	0.
MANA BEHBIN DIRECTOR	1.00	X						0.	0.	0.
J. CALVIN CLARKE, III DIRECTOR	1.00	X						0.	0.	0.
E. GRICE GALLEHER DIRECTOR	1.00	X						0.	0.	0.
RICHARD A. POPKIN DIRECTOR	1.00	X						0.	0.	0.
HERMAN E. WOOD, III DIRECTOR	1.00	X						0.	0.	0.
JUDY BUCHANAN DIRECTOR	1.00	X						0.	0.	0.
KEITH DULL DIRECTOR	1.00	X						0.	0.	0.
THOMAS J. LAWSON DIRECTOR	1.00	X						0.	0.	0.
JAMES K. WALKER DIRECTOR	1.00	X						0.	0.	0.
KATHRYN P. GARVIN DIRECTOR OF FINANCE AND ADMINISTRAT	45.00			X				84,583.	0.	375.

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

(A) Name and title	(B) Average hours per week	(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			
1b Total							186,507.	0.	23,815.	

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

	Yes	No
3 Did the organization list any former officer, director or 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 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. **NONE**

(A) Name and business address	(B) Description of services	(C) Compensation

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization **0**

Part VIII: Statement of Revenue			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514	
Contributions, gifts, grants and other similar amounts	1 a Federated campaigns	1a					
	b Membership dues	1b					
	c Fundraising events	1c					
	d Related organizations	1d					
	e Government grants (contributions)	1e					
	f All other contributions, gifts, grants, and similar amounts not included above	1f	5,767,655.				
	g Noncash contributions included in lines 1a-1f: \$		309,882.				
	h Total. Add lines 1a-1f		5,767,655.				
Program Service Revenue	Business Code						
	2 a _____						
	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)		48,912.			48,912.	
	4 Income from investment of tax-exempt bond proceeds						
	5 Royalties						
	6 a Gross Rents	(i) Real	(ii) Personal				
		b Less: rental expenses					
		c Rental income or (loss)					
	d Net rental income or (loss)						
	7 a Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other				
		142,949.					
		b Less: cost or other basis and sales expenses					
		c Gain or (loss)	142,949.				
	d Net gain or (loss)			142,949.		142,949.	
	8 a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18	a					
		b Less: direct expenses	b				
c Net income or (loss) from fundraising events							
9 a Gross income from gaming activities. See Part IV, line 19	a						
	b Less: direct expenses	b					
	c Net income or (loss) from gaming activities						
10 a Gross sales of inventory, less returns and allowances	a						
	b Less: cost of goods sold	b					
	c Net income or (loss) from sales of inventory						
Miscellaneous Revenue		Business Code					
11 a _____							
b _____							
c _____							
d All other revenue							
e Total. Add lines 11a-11d							
12 Total revenue. See instructions.			5,959,516.	0.	0.	191,861.	

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) but are not required to complete columns (B), (C), and (D).

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21	1,817,157.	1,817,157.		
2 Grants and other assistance to individuals in the U.S. See Part IV, line 22	142,212.	142,212.		
3 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16	2,009,501.	2,009,501.		
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	113,154.	37,342.	62,234.	13,578.
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	1,228,352.	695,422.	458,240.	74,690.
8 Pension plan contributions (Include section 401(k) and section 403(b) employer contributions)	31,712.	15,539.	12,685.	3,488.
9 Other employee benefits	131,823.	71,222.	45,929.	14,672.
10 Payroll taxes	103,133.	56,028.	40,288.	6,817.
11 Fees for services (non-employees):				
a Management				
b Legal				
c Accounting				
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees	11,319.		11,319.	
g Other	90,227.	69,110.	8,831.	12,286.
12 Advertising and promotion	184,871.		340.	184,531.
13 Office expenses	108,373.	62,844.	25,956.	19,573.
14 Information technology				
15 Royalties				
16 Occupancy	23,159.	11,129.	10,012.	2,018.
17 Travel	47,567.	40,147.	903.	6,517.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	4,366.	3,270.	487.	609.
20 Interest	792.	337.	265.	190.
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	80,203.	34,086.	26,868.	19,249.
23 Insurance	27,133.	10,736.	14,075.	2,322.
24 Other expenses. Itemize expenses not covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.)				
a BANK SERVICE FEES	51,765.	12,993.	673.	38,099.
b REPAIRS AND MAINTENANCE	38,591.	17,085.	15,839.	5,667.
c MISCELLANEOUS	24,434.	10,995.	11,484.	1,955.
d TAXES AND LICENSES	19,144.	6,630.	7,744.	4,770.
e CONTRACT LABOR	17,400.	16,200.		1,200.
f All other expenses	13,427.	4,779.	7,604.	1,044.
25 Total functional expenses. Add lines 1 through 24f	6,319,815.	5,144,764.	761,776.	413,275.
26 Joint costs. Check here <input type="checkbox"/> if following SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation ...				

Part X Balance Sheet

		(A) Beginning of year		(B) End of year	
Assets	1	Cash - non-interest-bearing	219,832.	1	375,765.
	2	Savings and temporary cash investments	384,759.	2	520,500.
	3	Pledges and grants receivable, net	634,615.	3	345,130.
	4	Accounts receivable, net	5,940.	4	2,764.
	5	Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
	6	Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L		6	
	7	Notes and loans receivable, net		7	
	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges	27,402.	9	46,664.
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 1,818,450.		
	b	Less: accumulated depreciation	10b 375,298.		
			1,441,631.	10c	1,443,152.
	11	Investments - publicly traded securities	1,549,578.	11	1,146,843.
	12	Investments - other securities. See Part IV, line 11		12	
	13	Investments - program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
15	Other assets. See Part IV, line 11	2,808.	15	4,062.	
16	Total assets. Add lines 1 through 15 (must equal line 34)	4,266,565.	16	3,884,880.	
Liabilities	17	Accounts payable and accrued expenses	477,456.	17	371,916.
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		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. Complete Part X of Schedule D	53,406.	25	65,521.
	26	Total liabilities. Add lines 17 through 25	530,862.	26	437,437.
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.				
	27	Unrestricted net assets	968,584.	27	687,247.
	28	Temporarily restricted net assets	2,667,119.	28	2,660,196.
	29	Permanently restricted net assets	100,000.	29	100,000.
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 30 through 34.				
	30	Capital stock or trust principal, or current funds		30	
	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
	32	Retained earnings, endowment, accumulated income, or other funds		32	
	33	Total net assets or fund balances	3,735,703.	33	3,447,443.
	34	Total liabilities and net assets/fund balances	4,266,565.	34	3,884,880.

Part XI Financial Statements and Reporting

		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 in Schedule O.		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		X
2b	Were the organization's financial statements audited by an independent accountant?	X	
2c	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 in Schedule O.		
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a consolidated basis, separate basis, or both: <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		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 in Schedule O and describe any steps taken to undergo such audits.		

Form 990 (2009)

SCHEDULE A
(Form 990 or 990-EZ)

Public Charity Status and Public Support

OMB No. 1545-0047

2009

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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. ▶ See separate instructions.

Name of the organization

CHILDREN, INCORPORATED

Employer identification number

54-0761510

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 11, 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.)
- 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 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.)
- 10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4).
- 11 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 that describes the type of supporting organization and complete lines 11e through 11h.
 - a Type I
 - b Type II
 - c Type III - Functionally Integrated
 - d Type III - Other
- e By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2).
- f If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box
- g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

	Yes	No
(i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization? _____	11g(i)	
(ii) A family member of a person described in (i) above? _____	11g(ii)	
(iii) A 35% controlled entity of a person described in (i) or (ii) above? _____	11g(iii)	
- h Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see Instructions))	(iv) Is the organization in col. (i) listed in your governing document?		(v) Did you notify the organization in col. (i) of your support?		(vi) Is the organization in col. (i) organized in the U.S.?		(vii) Amount of support
			Yes	No	Yes	No	Yes	No	
Total									

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

Schedule A (Form 990 or 990-EZ) 2009

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.)

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	6464344.	6960015.	6392166.	6281511.	5767655.	31865691.
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	6464344.	6960015.	6392166.	6281511.	5767655.	31865691.
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)						
6 Public support. Subtract line 5 from line 4.						31865691.

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
7 Amounts from line 4	6464344.	6960015.	6392166.	6281511.	5767655.	31865691.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	188,959.	166,015.	221,533.	105,004.	48,912.	730,423.
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 IV.)	3,888.	61,245.	15,545.	4,006.		84,684.
11 Total support. Add lines 7 through 10						32680798.
12 Gross receipts from related activities, etc. (see instructions)					12	
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here						<input type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2009 (line 6, column (f) divided by line 11, column (f))	14	97.51	%
15 Public support percentage from 2008 Schedule A, Part II, line 14	15	97.26	%
16a 33 1/3% support test - 2009. 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	<input checked="" type="checkbox"/>		
b 33 1/3% support test - 2008. 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	<input type="checkbox"/>		
17a 10% -facts-and-circumstances test - 2009. 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 IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization	<input type="checkbox"/>		
b 10% -facts-and-circumstances test - 2008. 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 IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization	<input type="checkbox"/>		
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	<input type="checkbox"/>		

Part III Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(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) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(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 in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13 Total support (Add lines 9, 10c, 11, and 12.)						

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

Section C. Computation of Public Support Percentage

15 Public support percentage for 2009 (line 8, column (f) divided by line 13, column (f))	15	%
16 Public support percentage from 2008 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2009 (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from 2008 Schedule A, Part III, line 17	18	%

19a **33 1/3% support tests - 2009.** 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 - 2008.** 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

Schedule D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12. Attach to Form 990. See separate instructions.

OMB No. 1545-0047

2009

Open to Public Inspection

Name of the organization

CHILDREN, INCORPORATED

Employer identification number

54-0761510

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

Table with 2 columns: (a) Donor advised funds, (b) Funds and other accounts. Rows include: 1 Total number at end of year, 2 Aggregate contributions to (during year), 3 Aggregate grants from (during year), 4 Aggregate value at end of year, 5 Did the organization inform all donors... Yes/No, 6 Did the organization inform all grantees... Yes/No.

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

1 Purpose(s) of conservation easements held by the organization (check all that apply). 2 Complete lines 2a through 2d if the organization held a qualified conservation contribution... 3 Number of conservation easements modified... 4 Number of states where property subject to conservation easement is located... 5 Does the organization have a written policy regarding the periodic monitoring... 6 Staff and volunteer hours devoted to monitoring... 7 Amount of expenses incurred in monitoring... 8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? 9 In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement...

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

1a If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items. 1b If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenues included in Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items: a Revenues included in Form 990, Part VIII, line 1 b Assets included in Form 990, Part X

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 are a 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 programs
- e Other _____

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV.

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 organization answered "Yes" to 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 XIV 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? Yes No

b If "Yes," explain the arrangement in Part XIV.

Part V Endowment Funds. Complete if the organization answered "Yes" to 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	82,634.	108,809.			
b Contributions					
c Net investment earnings, gains, and losses	-480.	-26,175.			
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance	82,154.	82,634.			

2 Provide the estimated percentage of the year end balance held as:

- a Board designated or quasi-endowment _____%
- b Permanent endowment 100.00 %
- c Term endowment _____%

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		X
(ii) related organizations		X
b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?		

(i) unrelated organizations _____

(ii) related organizations _____

b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? _____

4 Describe in Part XIV the intended uses of the organization's endowment funds.

Part VI Investments - Land, Buildings, and Equipment. See Form 990, Part X, line 10.

Description of investment	(a) Cost or other basis (Investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		279,621.		279,621.
b Buildings		1,123,053.	136,692.	986,361.
c Leasehold improvements				
d Equipment		415,776.	238,606.	177,170.
e Other				
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).)				1,443,152.

Part XI Reconciliation of Change in Net Assets from Form 990 to Audited Financial Statements

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	5,959,516.
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	6,319,815.
3	Excess or (deficit) for the year. Subtract line 2 from line 1	3	-360,299.
4	Net unrealized gains (losses) on investments	4	72,039.
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV.)	8	
9	Total adjustments (net). Add lines 4 through 8	9	72,039.
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	10	-288,260.

Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

1	Total revenue, gains, and other support per audited financial statements	1	6,020,236.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains on investments	2a	72,039.
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIV.)	2d	
e	Add lines 2a through 2d	2e	72,039.
3	Subtract line 2e from line 1	3	5,948,197.
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	11,319.
b	Other (Describe in Part XIV.)	4b	
c	Add lines 4a and 4b	4c	11,319.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	5,959,516.

Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

1	Total expenses and losses per audited financial statements	1	6,308,496.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIV.)	2d	
e	Add lines 2a through 2d	2e	0.
3	Subtract line 2e from line 1	3	6,308,496.
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	11,319.
b	Other (Describe in Part XIV.)	4b	
c	Add lines 4a and 4b	4c	11,319.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	6,319,815.

Part XIV Supplemental Information

Complete this part to 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, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also complete this part to provide any additional information.

PART V, LINE 4: THE ORGANIZATION'S ENDOWMENT CONSISTS OF ONE

INDIVIDUAL FUND ESTABLISHED FOR THE PURPOSE THAT THE PRINCIPAL IS TO BE HELD INDEFINITELY AND INCOME FROM WHICH IS EXPENDABLE IS TO FUND AS MANY SPONSORSHIPS AS POSSIBLE.

PART X: MANAGEMENT HAS EVALUATED THE EFFECT OF NEW GUIDANCE

SURROUNDING UNCERTAIN TAX POSITIONS THAT BECAME EFFECTIVE THIS YEAR AND

CONCLUDED THAT THE ORGANIZATION HAD NO SIGNIFICANT FINANCIAL STATEMENT

**Schedule F
(Form 990)**

Department of the Treasury
Internal Revenue Service

Statement of Activities Outside the United States

▶ Complete if the organization answered "Yes" to Form 990,
Part IV, line 14b, 15, or 16.
▶ Attach to Form 990. ▶ See separate instructions.

OMB No. 1545-0047

2009

Open to Public
Inspection

Name of the organization CHILDREN, INCORPORATED	Employer identification number 54-0761510
---	---

Part I General Information on Activities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 14b.

- For grantmakers. 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
- For grantmakers. Describe in Part IV the organization's procedures for monitoring the use of grant funds outside the United States.
- Activities per Region. (Use Schedule F-1 (Form 990) if additional space is needed.)

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
CENTRAL AMERICA AND THE CARIBBEAN	0	0	PROGRAM SERVICES & GRANTS TO RECIPIENTS	CHILD CARE ASSISTANCE, MONTHLY SUBSIDY PAYMENTS, CLOTHING & SPECIAL GIFTS TO	457,172.
EAST ASIA AND THE PACIFIC	0	0	PROGRAM SERVICES & GRANTS TO RECIPIENTS	CHILD CARE ASSISTANCE, MONTHLY SUBSIDY PAYMENTS, CLOTHING & SPECIAL GIFTS TO	186,162.
MIDDLE EAST AND NORTH AFRICA	0	0	PROGRAM SERVICES & GRANTS TO RECIPIENTS	CHILD CARE ASSISTANCE, MONTHLY SUBSIDY PAYMENTS, CLOTHING & SPECIAL GIFTS TO	50,749.
NORTH AMERICA	0	0	PROGRAM SERVICES & GRANTS TO RECIPIENTS	CHILD CARE ASSISTANCE, MONTHLY SUBSIDY PAYMENTS, CLOTHING & SPECIAL GIFTS TO	99,778.
SOUTH AMERICA	0	0	PROGRAM SERVICES & GRANTS TO RECIPIENTS	CHILD CARE ASSISTANCE, MONTHLY SUBSIDY PAYMENTS, CLOTHING & SPECIAL GIFTS TO	667,435.
SOUTH ASIA	0	0	PROGRAM SERVICES & GRANTS TO RECIPIENTS	CHILD CARE ASSISTANCE, MONTHLY SUBSIDY PAYMENTS, CLOTHING & SPECIAL GIFTS TO	333,450.
SUB-SAHARAN AFRICA	0	0	PROGRAM SERVICES & GRANTS TO RECIPIENTS	CHILD CARE ASSISTANCE, MONTHLY SUBSIDY PAYMENTS, CLOTHING & SPECIAL GIFTS TO	195,298.
OTHER - LATIN AMERICA	0	0	PROGRAM SERVICES & GRANTS TO RECIPIENTS	CHILD CARE ASSISTANCE, MONTHLY SUBSIDY PAYMENTS, CLOTHING & SPECIAL GIFTS TO	19,457.
Totals ▶	0	0			2,009,501.

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

Schedule F (Form 990) 2009

SEE PART IV FOR COLUMN (E) DESCRIPTIONS

54-0761510

CHILDREN, INCORPORATED

Schedule F (Form 990) 2009

Part II Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Check this box if no one recipient received more than \$5,000

Use Schedule F-1 (Form 990) if additional space is needed.

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA AND THE CARIBBEAN	EDUCATIONAL & BASIC NEEDS SUPPORT	230,420.	EFT, WIRE TRANSFER, OR CHECK	0.		
		EAST ASIA AND THE PACIFIC	EDUCATIONAL & BASIC NEEDS SUPPORT	383,341.	EFT, WIRE TRANSFER, OR CHECK	0.		
		MIDDLE EAST AND NORTH AFRICA	EDUCATIONAL & BASIC NEEDS SUPPORT	64,477.	EFT, WIRE TRANSFER, OR CHECK	0.		
		NORTH AMERICA	EDUCATIONAL & BASIC NEEDS SUPPORT	256,776.	EFT, WIRE TRANSFER, OR CHECK	0.		
		SOUTH AMERICA	EDUCATIONAL & BASIC NEEDS SUPPORT	427,345.	EFT, WIRE TRANSFER, OR CHECK	0.		
		SOUTH ASIA	EDUCATIONAL & BASIC NEEDS SUPPORT	457,636.	EFT, WIRE TRANSFER, OR CHECK	0.		
		SUB-SAHARAN AFRICA	EDUCATIONAL & BASIC NEEDS SUPPORT	87,152.	EFT, WIRE TRANSFER, OR CHECK	0.		
		OTHER - LATIN AMERICA	EDUCATIONAL & BASIC NEEDS SUPPORT	17,205.	EFT, WIRE TRANSFER, OR CHECK	0.		

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter **357**

3 Enter total number of other organizations or entities

Part IV Supplemental Information

Complete this part to provide the information required in Part I, line 2, and any additional information.

SCHEDULE F, PART I, LINE 2: CHILDREN, INC MONITORS THE USE OF GRANT FUNDS OUTSIDE THE US THROUGH PERIODIC CONTACT WITH THESE ORGANIZATIONS, MAINTAINING RELATIONSHIPS, AND VARIOUS REPORTS.

PART I, LINE 3, COLUMN (E):

REGION: CENTRAL AMERICA AND THE CARIBBEAN.

(E) SPECIFIC TYPES OF SERVICES IN REGION: CHILD CARE ASSISTANCE, MONTHLY SUBSIDY PAYMENTS, CLOTHING & SPECIAL GIFTS TO RECIPIENTS

REGION: EAST ASIA AND THE PACIFIC

(E) SPECIFIC TYPES OF SERVICES IN REGION: CHILD CARE ASSISTANCE, MONTHLY SUBSIDY PAYMENTS, CLOTHING & SPECIAL GIFTS TO RECIPIENTS

REGION: MIDDLE EAST AND NORTH AFRICA

(E) SPECIFIC TYPES OF SERVICES IN REGION: CHILD CARE ASSISTANCE, MONTHLY SUBSIDY PAYMENTS, CLOTHING & SPECIAL GIFTS TO RECIPIENTS

REGION: NORTH AMERICA

(E) SPECIFIC TYPES OF SERVICES IN REGION: CHILD CARE ASSISTANCE, MONTHLY SUBSIDY PAYMENTS, CLOTHING & SPECIAL GIFTS TO RECIPIENTS

REGION: SOUTH AMERICA

(E) SPECIFIC TYPES OF SERVICES IN REGION: CHILD CARE ASSISTANCE, MONTHLY SUBSIDY PAYMENTS, CLOTHING & SPECIAL GIFTS TO RECIPIENTS

REGION: SOUTH ASIA

(E) SPECIFIC TYPES OF SERVICES IN REGION: CHILD CARE ASSISTANCE, MONTHLY SUBSIDY PAYMENTS, CLOTHING & SPECIAL GIFTS TO RECIPIENTS

Part IV Supplemental Information

Complete this part to provide the information required in Part I, line 2, and any additional information.

REGION: SUB-SAHARAN AFRICA

(E) SPECIFIC TYPES OF SERVICES IN REGION: CHILD CARE ASSISTANCE, MONTHLY
SUBSIDY PAYMENTS, CLOTHING & SPECIAL GIFTS TO RECIPIENTS

REGION: OTHER - LATIN AMERICA

(E) SPECIFIC TYPES OF SERVICES IN REGION: CHILD CARE ASSISTANCE, MONTHLY
SUBSIDY PAYMENTS, CLOTHING & SPECIAL GIFTS TO RECIPIENTS

**SCHEDULE I
(Form 990)**

**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.

2009

Open to Public
Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization: **CHILDREN, INCORPORATED**
Employer identification number: **54-0761510**

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. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use Part IV and Schedule I-1 (Form 990) 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 non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ALLEGHANY HIGH SCHOOL RT. 2, BOX 19 - TROJAN AVE. SPARTA, NC 28675	56-6000985	501(C)(3)	39,250.	0.			EDUCATION & BASIC NEEDS SUPPORT
ARLINGTON ELEMENTARY SCHOOL (KY) 122 ARCEME STREET LEXINGTON, KY 40505		501(C)(3)	6,738.	0.			EDUCATION & BASIC NEEDS SUPPORT
ASHE COUNTY HIGH SCHOOL, NC P. O. BOX 450 WEST JEFFERSON, NC 28694	56-6000988	501(C)(3)	14,788.	0.			EDUCATION & BASIC NEEDS SUPPORT
ASHE COUNTY MIDDLE SCHOOL P. O. BOX 259 WARRENSVILLE, NC 28693	56-6000988	501(C)(3)	11,710.	0.			EDUCATION & BASIC NEEDS SUPPORT
BATH COUNTY HIGH SCHOOL 645 CHENAULT DR. OWINGSVILLE, KY 40360	61-6001341	501(C)(3)	11,957.	0.			EDUCATION & BASIC NEEDS SUPPORT
BATH COUNTY MIDDLE SCHOOL 335 W. MAIN ST. OWINGSVILLE, KY 40360	61-6001341	501(C)(3)	10,928.	0.			EDUCATION & BASIC NEEDS SUPPORT

2 Enter total number of section 501(c)(3) and government organizations: **125.**

3 Enter total number of other organizations: **0.**

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

Part III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Use Part IV and Schedule I-1 (Form 990) 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 non-cash assistance
EDUCATION AND BASIC NEEDS SUPPORT	6913	142,212.	0.		

Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.

SCHEDULE I, PART I, LINE 2: CHILDREN, INC MONITORS THE USE OF GRANT FUNDS
 IN THE US THROUGH PERIODIC CONTACT WITH THESE ORGANIZATIONS, MAINTAINING
 RELATIONSHIPS, AND VARIOUS REPORTS.

2009

Open to Public
InspectionContinuation Sheet for Schedule I (Form 990)
Attach to Form 990 to list additional information for
Schedule I (Form 990), Part II or Part III.Employer identification number
54-0761510

Name of the organization

CHILDREN, INCORPORATED

Part I Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BEAVER CREEK ELEMENTARY SCHOOL 8000 HWY. 7 SOUTH TOPMOST, KY 41862	61-6001297	501(C)(3)	10,848.	0.			EDUCATION & BASIC NEEDS SUPPORT
BELFRY HIGH SCHOOL, KY 27678 U.S. HWY. 119 N. BELFRY, KY 41514	61-6001345	501(C)(3)	26,997.	0.			EDUCATION & BASIC NEEDS SUPPORT
BELFRY MIDDLE SCHOOL P. O. BOX 850 BELFRY, KY 41514	61-6001345	501(C)(3)	16,366.	0.			EDUCATION & BASIC NEEDS SUPPORT
BETHEL ELEMENTARY SCHOOL (NC) 138 BETHEL SCHOOL RD. SUGAR GROVE, NC 28679	56-6001130	501(C)(3)	7,010.	0.			EDUCATION & BASIC NEEDS SUPPORT
BLACKBERRY ELEMENTARY SCHOOL 40 BIG BLUE SPRINGS RD. RANDSOM, KY 41558	61-6001345	501(C)(3)	8,444.	0.			EDUCATION & BASIC NEEDS SUPPORT
BLUE RIDGE ELEMENTARY SCHOOL P. O. BOX 229 WARRENSVILLE, NC 28693	56-6000988	501(C)(3)	20,700.	0.			EDUCATION & BASIC NEEDS SUPPORT
BOBCAT KIDS (OJO AMARILLO SCHOOL) PO BOX 586 FRUITLAND, NM 87416	14-0001849	501(C)(3)	8,779.	0.			EDUCATION & BASIC NEEDS SUPPORT
BOWMAN MIDDLE SCHOOL P. O. BOX 46 BAKERSVILLE, NC 28705	56-6001075	501(C)(3)	7,607.	0.			EDUCATION & BASIC NEEDS SUPPORT

Schedule I-1 (Form 990) 2009

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

**SCHEDULE I-1
(Form 990)**

Department of the Treasury
Internal Revenue Service

Continuation Sheet for Schedule I (Form 990)
▶ Attach to Form 990 to list additional information for
Schedule I (Form 990), Part II or Part III.

OMB No. 1545-0047

2009

Open to Public
Inspection

Name of the organization

CHILDREN, INCORPORATED

Employer identification number

54-0761510

Part III Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II).

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BOYD COUNTY HIGH SCHOOL 12307 MIDLAND TRAIL ASHLAND, KY 41102	61-6001260	501(C)(3)	8,817.	0.			EDUCATION & BASIC NEEDS SUPPORT
BOYD COUNTY MIDDLE SCHOOL 12307 MIDLAND TRAIL ASHLAND, KY 41102	61-6001260	501(C)(3)	6,396.	0.			EDUCATION & BASIC NEEDS SUPPORT
BRADSHAW ELEMENTARY SCHOOL P. O. BOX 704 BRADSHAW, WV 24817		501(C)(3)	15,010.	0.			EDUCATION & BASIC NEEDS SUPPORT
BREATHTF CO. HIGH SCHOOL 2307 BOBCAT LANE JACKSON, KY 41339	61-6001304	501(C)(3)	9,557.	0.			EDUCATION & BASIC NEEDS SUPPORT
CAMPTON ELEMENTARY SCHOOL 1750 KY HWY. 715 ROGERS, KY 41365	61-6001257	501(C)(3)	8,481.	0.			EDUCATION & BASIC NEEDS SUPPORT
CARR CREEK ELEM. SCHOOL P. O. BOX 114 LITT CARR, KY 41834	61-6001297	501(C)(3)	14,242.	0.			EDUCATION & BASIC NEEDS SUPPORT
CHINLE BOARDING SCHOOL P. O. BOX 70 MANY FARMS, AZ 85538	86-0477898	115(1)	6,844.	0.			EDUCATION & BASIC NEEDS SUPPORT
CORDIA COMBINED SCHOOL 6050 LOTTS CREEK RD. HAZARD, KY 41701	61-6001297	501(C)(3)	7,197.	0.			EDUCATION & BASIC NEEDS SUPPORT

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

Schedule I-1 (Form 990) 2009

2009

Open to Public
InspectionContinuation Sheet for Schedule I (Form 990)
Attach to Form 990 to list additional information for
Schedule I (Form 990), Part II or Part III.Employer identification number
54-0761510

Name of the organization

CHILDREN, INCORPORATED

Part I Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part I.)							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CROSSROADS ELEMENTARY SCHOOL 4755 U.S. RT. 60 EAST OWINGSVILLE, KY 40360		501(C)(3)	6,953.	0.			EDUCATION & BASIC NEEDS SUPPORT
CRUM MIDDLE SCHOOL P. O. BOX 9 CRUM, WV 25669	55-6000409	501(C)(3)	5,106.	0.			EDUCATION & BASIC NEEDS SUPPORT
CUBA HIGH SCHOOL P. O. BOX 70 CUBA, NM 87013		501(C)(3)	7,787.	0.			EDUCATION & BASIC NEEDS SUPPORT
DENNEHOTSO BOARDING SCHOOL P. O. BOX 2570 DENNEHOTSO, AZ 86535		115(1)	10,618.	0.			EDUCATION & BASIC NEEDS SUPPORT
DEYTON ELEMENTARY SCHOOL 508 HARRIS ST. SPRUCE PINE, NC 28777		501(C)(3)	5,202.	0.			EDUCATION & BASIC NEEDS SUPPORT
DORTON ELEMENTARY SCHOOL, KY P. O. BOX 260 DORTON, KY 41520	61-6001345	501(C)(3)	9,064.	0.			EDUCATION & BASIC NEEDS SUPPORT
DUNLOW ELEMENTARY SCHOOL RT. 1, BOX 308 DUNLOW, WV 25511	55-6000409	501(C)(3)	11,018.	0.			EDUCATION & BASIC NEEDS SUPPORT
DZILTH COMMUNITY GRANT SCHOOL 35 ROAD 7585 #5003 BLOOMFIELD, NM 87413		115(1)	30,378.	0.			EDUCATION & BASIC NEEDS SUPPORT

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

Schedule I-1 (Form 990) 2009

Continuation Sheet for Schedule I (Form 990)
 Attach to Form 990 to list additional information for
 Schedule I (Form 990), Part II or Part III.

SCHEDULE I-1
 (Form 990)

Department of the Treasury
 Internal Revenue Service

Name of the organization

CHILDREN, INCORPORATED

Employer identification number
 54-0761510

Part I: Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
EAST RIDGE HIGH SCHOOL 19471 LICK MOUNTAIN RD. LICK CREEK, KY 41540	61-6001345	501(C)(3)	53,601.	0.			EDUCATION & BASIC NEEDS SUPPORT
EDEN ELEMENTARY P. O. BOX 1683 INEZ, KY 41224	61-6001302	501(C)(3)	10,607.	0.			EDUCATION & BASIC NEEDS SUPPORT
EISENHOWER ACADEMY P. O. BOX 792800 NEW ORLEANS, LA 70179		501(C)(3)	5,613.	0.			EDUCATION & BASIC NEEDS SUPPORT
ELKHORN CITY ELEMENTARY SCHOOL 180 COUGAR DR. ELKHORN CITY, KY 41522		501(C)(3)	31,341.	0.			EDUCATION & BASIC NEEDS SUPPORT
EMMALENA ELEMENTARY SCHOOL P. O. BOX 123 EMMALENA, KY 41740	61-6001297	501(C)(3)	12,919.	0.			EDUCATION & BASIC NEEDS SUPPORT
EZEL ELEMENTARY SCHOOL P. O. BOX 9 EZEL, KY 41425	61-6001441	501(C)(3)	5,802.	0.			EDUCATION & BASIC NEEDS SUPPORT
FAIRVIEW ELEMENTARY 258 MCKNIGHT ST. ASHLAND, KY 41102		501(C)(3)	7,585.	0.			EDUCATION & BASIC NEEDS SUPPORT
FAIRVIEW HIGH SCHOOL 2127 MAIN STREET ASHLAND, KY 41102		501(C)(3)	7,917.	0.			EDUCATION & BASIC NEEDS SUPPORT

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

Schedule I-1 (Form 990) 2009

Continuation Sheet for Schedule I (Form 990)
 Attach to Form 990 to list additional information for
 Schedule I (Form 990), Part II or Part III.

SCHEDULE I-1
(Form 990)
 Department of the Treasury
 Internal Revenue Service

Name of the organization
CHILDREN, INCORPORATED
 Employer identification number
54-0761510

Part I Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part I.)							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
FEDS CREEK ELEMENTARY SCHOOL 221 FEDS CREEK RD. FED CREEK, KY 41524		501(C)(3)	15,134.	0.			EDUCATION & BASIC NEEDS SUPPORT
PEREBEE-HOPE COMMUNITY SCHOOL COMPLEX - 3999 8TH ST SE - WASHINGTON, DC 20032		501(C)(3)	10,193.	0.			EDUCATION & BASIC NEEDS SUPPORT
FLAT GAP ELEMENTARY SCHOOL 1450 KENTUCKY RT. 689 FLAT GAP, KY 41219	61-6001343	501(C)(3)	5,217.	0.			EDUCATION & BASIC NEEDS SUPPORT
GEORGE F. JOHNSON ELEMENTARY SCHOOL - 2172 LONG FORK RD. - VIRGIE, KY 41572		501(C)(3)	7,278.	0.			EDUCATION & BASIC NEEDS SUPPORT
GLADE CREEK ELEMENTARY SCHOOL 32 GLADE CREEK SCHOOL RD. ENNICE, NC 28623	00-0300823	501(C)(3)	13,553.	0.			EDUCATION & BASIC NEEDS SUPPORT
HERALD WHITAKER MIDDLE SCHOOL 221 HORNET DR. SALYERSVILLE, KY 41465	61-6001353	501(C)(3)	11,992.	0.			EDUCATION & BASIC NEEDS SUPPORT
HIGHLAND-TURNER ELEMENTARY SCHOOL 10355 HWY. 30 WEST BOONERSVILLE, KY 41314	61-6001304	501(C)(3)	17,550.	0.			EDUCATION & BASIC NEEDS SUPPORT
HINDMAN ELEMENTARY SCHOOL, KY P. O. BOX 816 HINDMAN, KY 41822	61-6001297	501(C)(3)	17,599.	0.			EDUCATION & BASIC NEEDS SUPPORT

Schedule I-1 (Form 990) 2009

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

**SCHEDULE I-1
(Form 990)**

Department of the Treasury
Internal Revenue Service

Continuation Sheet for Schedule I (Form 990)
▶ Attach to Form 990 to list additional information for
Schedule I (Form 990), Part II or Part III.

OMB No. 1545-0047
2009

Open to Public
Inspection

Name of the organization

CHILDREN, INCORPORATED

Employer identification number
54-0761510

Part I Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
HUEFANO DORMITORY P. O. BOX 639 BLOOMFIELD, NM 87413	85-0463710	115(1)	10,941.	0.			EDUCATION & BASIC NEEDS SUPPORT
HUNTER'S POINT BOARDING SCHOOL P. O. BOX 99 ST. MICHAEL'S, AZ 86511	22-1603684	115(1)	11,348.	0.			EDUCATION & BASIC NEEDS SUPPORT
HURLEY HIGH SCHOOL P. O. BOX 114 WOLFORD, VA 24658		501(C)(3)	9,725.	0.			EDUCATION & BASIC NEEDS SUPPORT
INEZ ELEMENTARY SCHOOL 5000 ELEMENTARY DR. INEZ, KY 41224	61-6001302	501(C)(3)	9,206.	0.			EDUCATION & BASIC NEEDS SUPPORT
INEZ MIDDLE SCHOOL P. O. BOX 5001 INEZ, KY 41224	61-6001302	501(C)(3)	8,351.	0.			EDUCATION & BASIC NEEDS SUPPORT
JAMES A. DUFF ELEMENTARY P. O. BOX 129 EASTERN, KY 41622	61-6001347	501(C)(3)	5,589.	0.			EDUCATION & BASIC NEEDS SUPPORT
JOHNS CREEK ELEMENTARY SCHOOL 8302 META HWY. PIKEVILLE, KY 41501		501(C)(3)	11,232.	0.			EDUCATION & BASIC NEEDS SUPPORT
JOHNSON CENTRAL HIGH SCHOOL 257 N. MAYO TRAIL PAINTSVILLE, KY 41240	61-6001343	501(C)(3)	7,410.	0.			EDUCATION & BASIC NEEDS SUPPORT

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

Schedule I-1 (Form 990) 2009

2009

Open to Public
InspectionContinuation Sheet for Schedule I (Form 990)
Attach to Form 990 to list additional information for
Schedule I (Form 990), Part II or Part III.SCHEDULE I-1
(Form 990)
Department of the Treasury
Internal Revenue ServiceName of the organization
CHILDREN, INCORPORATED
Employer identification number
54-0761510

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
JOHNSON COUNTY MIDDLE SCHOOL 251 N. MAYO TRAIL PAINTSVILLE, KY 41240	61-6001343	501(C)(3)	6,591.	0.			EDUCATION & BASIC NEEDS SUPPORT
KAIIBETO BOARDING SCHOOL P. O. BOX 1420 KAIIBETO, AZ 86053		115(1)	25,589.	0.			EDUCATION & BASIC NEEDS SUPPORT
KAYENTA COMMUNITY SCHOOL P. O. BOX 188 KAYENTA, AZ 86033		115(1)	6,090.	0.			EDUCATION & BASIC NEEDS SUPPORT
KIMPER ELEMENTARY SCHOOL 8151 STATE HWY. 194 E KIMPER, KY 41539		501(C)(3)	6,121.	0.			EDUCATION & BASIC NEEDS SUPPORT
LAKE VALLEY BOARDING SCHOOL P. O. BOX 748 CROWNSPOINT, NM 87313		501(C)(3)	39,714.	0.			EDUCATION & BASIC NEEDS SUPPORT
LAWRENCE COUNTY HIGH 100 BULLDOG LANE LOUISA, KY 41230		501(C)(3)	7,290.	0.			EDUCATION & BASIC NEEDS SUPPORT
LBJ ELEMENTARY SCHOOL 90 LBJ RD. JACKSON, KY 41339		501(C)(3)	11,384.	0.			EDUCATION & BASIC NEEDS SUPPORT
LEWIS COUNTY MIDDLE SCHOOL P. O. BOX 99 VANCEBURG, KY 41179		501(C)(3)	9,267.	0.			EDUCATION & BASIC NEEDS SUPPORT

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

Schedule I-1 (Form 990) 2009

Continuation Sheet for Schedule I (Form 990)
 Attach to Form 990 to list additional information for
 Schedule I (Form 990), Part II or Part III.

SCHEDULE I-1
(Form 990)
 Department of the Treasury
 Internal Revenue Service

Name of the organization		Employer identification number 54-0761510						
CHILDREN, INCORPORATED								
Part I: Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)								
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance	
LOUISA ELEMENTARY SCHOOL 235 E. POWHATAN ST. LOUISA, KY 41230		501(C)(3)	6,895.	0.			EDUCATION & BASIC NEEDS SUPPORT	
LOUISA MIDDLE SCHOOL 9 BULLDOG LN. LOUISA, KY 41230		501(C)(3)	5,585.	0.			EDUCATION & BASIC NEEDS SUPPORT	
MABEL ELEMENTARY SCHOOL 404 MABEL SCHOOL RD. ZIONVILLE, NC 28698	56-6001130	501(C)(3)	8,135.	0.			EDUCATION & BASIC NEEDS SUPPORT	
MAGOFFIN CO. HIGH SCHOOL 201 HORNET DR. SALYERSVILLE, KY 41465	61-6001353	501(C)(3)	15,949.	0.			EDUCATION & BASIC NEEDS SUPPORT	
MAJESTIC ELEMENTARY SCHOOL P. O. BOX 199 MAJESTIC, KY 41547		501(C)(3)	28,046.	0.			EDUCATION & BASIC NEEDS SUPPORT	
MARCUS GARVEY ACADEMY 5830 FIELD STREET DETROIT DETROIT, MI 48213		501(C)(3)	8,527.	0.			EDUCATION & BASIC NEEDS SUPPORT	
MARIANO LAKE COMMUNITY SCHOOL P. O. BOX 787 CROWNPOINT, NM 87313		115(1)	7,221.	0.			EDUCATION & BASIC NEEDS SUPPORT	
MARIE ROBERTS-CANEY ELEMENTARY SCHOOL - 115 RED SKIN RUN - LOST CREEK, KY 41348		501(C)(3)	11,025.	0.			EDUCATION & BASIC NEEDS SUPPORT	

Schedule I-1 (Form 990) 2009

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

2009

Open to Public
InspectionContinuation Sheet for Schedule I (Form 990)
Attach to Form 990 to list additional information for
Schedule I (Form 990), Part II or Part III.Employer identification number
54-0761510

Name of the organization

CHILDREN, INCORPORATED

Part I Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part I)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MARtha JANE POTTER ELEMENTARY SCHOOL - 55 KONA DR. - WHITESBURG, KY 41858		501(C)(3)	5,145.	0.			EDUCATION & BASIC NEEDS SUPPORT
MENIFEE COUNTY MIDDLE SCHOOL 57 INDIAN CREEK RD. FRENCHBURG, KY 40322	61-6001279	501(C)(3)	11,139.	0.			EDUCATION & BASIC NEEDS SUPPORT
MENIFEE ELEMENTARY P. O. BOX 39 DENNISTON, KY 40316	61-6001279	501(C)(3)	6,142.	0.			EDUCATION & BASIC NEEDS SUPPORT
MENIFEE HIGH SCHOOL 119 INDIAN CREEK RD. FRENCHBURG, KY 40322	61-6001279	501(C)(3)	6,203.	0.			EDUCATION & BASIC NEEDS SUPPORT
MILLARD ELEMENTARY SCHOOL 8015 MILLARD HWY. PIKEVILLE, KY 41501	61-6001345	501(C)(3)	9,260.	0.			EDUCATION & BASIC NEEDS SUPPORT
MITCHELL HIGH SCHOOL 416 LEDGER SCHOOL RD. BAKERSVILLE, NC 28705	54-0761510	501(C)(3)	11,983.	0.			EDUCATION & BASIC NEEDS SUPPORT
MORGAN COUNTY HIGH SCHOOL 150 ROAD TO SUCCESS WEST LIBERTY, KY 41472	61-6001441	501(C)(3)	10,199.	0.			EDUCATION & BASIC NEEDS SUPPORT
MORGAN COUNTY MIDDLE SCHOOL P. O. BOX 256 WEST LIBERTY, KY 41472	61-6001441	501(C)(3)	14,213.	0.			EDUCATION & BASIC NEEDS SUPPORT

Schedule I-1 (Form 990) 2009

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

Continuation Sheet for Schedule I (Form 990)
 Attach to Form 990 to list additional information for
 Schedule I (Form 990), Part II or Part III.

SCHEDULE I-1
 (Form 990)
 Department of the Treasury
 Internal Revenue Service

Name of the organization: **CHILDREN, INCORPORATED**
 Employer identification number: **54-0761510**

Part I: Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part I.)									
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
NORTH MAGOFFIN ELEMENTARY SCHOOL, KY - 1991 HWY. 460 WEST - SALYERSVILLE, KY 41465		501(C)(3)	22,058.	0.			EDUCATION & BASIC NEEDS SUPPORT		
OAK GROVE / BELLEMEADE ELEMENTARY (VA.) - 2220 INGRAM AVENUE - RICHMOND, VA 23224		501(C)(3)	5,285.	0.			EDUCATION & BASIC NEEDS SUPPORT		
OJO ENCINO DAY SCHOOL P. O. BOX 7 CUBA, NM 87013		115(1)	13,446.	0.			EDUCATION & BASIC NEEDS SUPPORT		
OWINGSVILLE ELEMENTARY SCHOOL 50 CHENAUHT DR. OWINGSVILLE, KY 40360		501(C)(3)	5,637.	0.			EDUCATION & BASIC NEEDS SUPPORT		
PAGE HIGH SCHOOL P. O. BOX 1927 PAGE, AZ 85040		501(C)(3)	7,275.	0.			EDUCATION & BASIC NEEDS SUPPORT		
PHELPS ELEMENTARY SCHOOL P. O. BOX 529 PHELPS, KY 41553		501(C)(3)	22,174.	0.			EDUCATION & BASIC NEEDS SUPPORT		
PHELPS HIGH SCHOOL P. O. BOX 131 PHELPS, KY 41553	61-6001345	501(C)(3)	20,279.	0.			EDUCATION & BASIC NEEDS SUPPORT		
PIKE COUNTY CENTRAL HIGH SCHOOL 100 WINNERS' CIRCLE PIKEVILLE, KY 41501		501(C)(3)	6,744.	0.			EDUCATION & BASIC NEEDS SUPPORT		

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. **Schedule I-1 (Form 990) 2009**

2009

Continuation Sheet for Schedule I (Form 990)
Attach to Form 990 to list additional information for
Schedule I (Form 990), Part II or Part III.

Open to Public
Inspection

Name of the organization

Employer identification number
54-0761510

CHILDREN, INCORPORATED

Part I Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part I)							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PINEY CREEK ELEMENTARY SCHOOL 559 PINEY CREEK SCHOOL RD. PINEY CREEK, NC 28663	00-0302738	501(C)(3)	8,140.	0.			EDUCATION & BASIC NEEDS SUPPORT
PINON COMMUNITY SCHOOL P. O. BOX 159 PINON, AZ 86501	86-0615622	115(1)	10,558.	0.			EDUCATION & BASIC NEEDS SUPPORT
PRESTONSBURG ELEMENTARY SCHOOL 140 SOUTH CLARK ROAD PRESTONSBURG, KY 41653		501(C)(3)	6,455.	0.			EDUCATION & BASIC NEEDS SUPPORT
PUEBLO PINTADO BOARDING SCHOOL P. O. BOX 80 CUBA, NM 87013		115(1)	30,553.	0.			EDUCATION & BASIC NEEDS SUPPORT
PUEENTE DE HOZHO MAGNET SCHOOL 3401 N. 4TH STREET FLAGSTAFF, AZ 86001		501(C)(3)	11,193.	0.			EDUCATION & BASIC NEEDS SUPPORT
RANGER ELEMENTARY SCHOOL 59 VANATTERS CREEK RANGER, WV 25557	55-6000341	501(C)(3)	5,013.	0.			EDUCATION & BASIC NEEDS SUPPORT
RED ROCK DAY SCHOOL P. O. DRAWER 2007 RED VALLEY, AZ 86544		115(1)	30,677.	0.			EDUCATION & BASIC NEEDS SUPPORT
RICHFIELD RESIDENTIAL HALL 765 WEST 1ST AVE RICHFIELD RICHFIELD, UT 84701		501(C)(3)	7,145.	0.			EDUCATION & BASIC NEEDS SUPPORT

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

Schedule I-1 (Form 990) 2009

Continuation Sheet for Schedule I (Form 990)
 Attach to Form 990 to list additional information for
 Schedule I (Form 990), Part II or Part III.

SCHEDULE I-1
 (Form 990)
 Department of the Treasury
 Internal Revenue Service

Name of the organization: **CHILDREN, INCORPORATED**
 Employer identification number: **54-0761510**

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ROBINSON CREEK ELEMENTARY SCHOOL P. O. BOX 400 ROBINSON CREEK, KY 41560		501(C)(3)	18,568.	0.			EDUCATION & BASIC NEEDS SUPPORT
ROSEBUD BOARDING SCHOOL P. O. BOX 69 MISSION, SD 57555		115(1)	9,193.	0.			EDUCATION & BASIC NEEDS SUPPORT
ROUSSEAU ELEMENTARY SCHOOL 13462 HWY. 30 EAST ROUSSEAU, KY 41366		501(C)(3)	5,885.	0.			EDUCATION & BASIC NEEDS SUPPORT
RUNYON ELEMENTARY SCHOOL 24 RUNYON BRANCH RD. PINSONFORK, KY 41555	61-6002345	501(C)(3)	12,701.	0.			EDUCATION & BASIC NEEDS SUPPORT
SALYERSVILLE ELEMENTARY SCHOOL 204 HORNET DR. SALYERSVILLE, KY 41465	61-6001353	501(C)(3)	22,275.	0.			EDUCATION & BASIC NEEDS SUPPORT
SANDY RIVER MIDDLE SCHOOL P. O. BOX 704 BRADSHAW, WV 24817		501(C)(3)	33,537.	0.			EDUCATION & BASIC NEEDS SUPPORT
SEBASTIAN MIDDLE SCHOOL 244 LEJ RD. JACKSON, KY 41339		501(C)(3)	10,359.	0.			EDUCATION & BASIC NEEDS SUPPORT
SHELBY VALLEY HIGH SCHOOL 125 DOUGLAS PARK PIKEVILLE, KY 41501		501(C)(3)	24,774.	0.			EDUCATION & BASIC NEEDS SUPPORT

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. **Schedule I-1 (Form 990) 2009**

Continuation Sheet for Schedule I (Form 990)
 Attach to Form 990 to list additional information for
 Schedule I (Form 990), Part II or Part III.

SCHEDULE I-1
 (Form 990)
 Department of the Treasury
 Internal Revenue Service

Employer identification number
54-0761510

Name of the organization

CHILDREN, INCORPORATED

Part I Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part I.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SHELDON CLARK HIGH SCHOOL P. O. BOX 1765 INEZ, KY 41224	616001302	501(C)(3)	19,371.	0.			EDUCATION & BASIC NEEDS SUPPORT
SHONTO SCHOOL P. O. BOX 7900 SHONTO, AZ 86054		115(1)	49,305.	0.			EDUCATION & BASIC NEEDS SUPPORT
SOUTH MAGOFFIN ELEMENTARY SCHOOL, KY - 171 HALF MOUNTAIN RD. - SALYERSVILLE, KY 41465		501(C)(3)	18,886.	0.			EDUCATION & BASIC NEEDS SUPPORT
SOUTHSIDE ELEMENTARY SCHOOL P. O. BOX 500 BELEFRY, KY 41514		501(C)(3)	8,816.	0.			EDUCATION & BASIC NEEDS SUPPORT
SPARTA ELEMENTARY SCHOOL 450 N. MAIN ST. SPARTA, NC 28675		501(C)(3)	38,878.	0.			EDUCATION & BASIC NEEDS SUPPORT
ST. MICHAELS SPECIAL ED SCHOOL P.O. BOX 100 ST. MICHAEL'S, AZ 86511	86-0224865	115(1)	8,316.	0.			EDUCATION & BASIC NEEDS SUPPORT
SUMMER HILL/RUFFIN RD ELEMENTARY (VA) - 2717 ALEXANDER AVENUE - RICHMOND, VA 23234	54-6001556	501(C)(3)	7,307.	0.			EDUCATION & BASIC NEEDS SUPPORT
SWANSBORO ELEMENTARY SCHOOL 3160 MIDLOTHIAN TRNPK. RICHMOND, VA 23224		501(C)(3)	9,076.	0.			EDUCATION & BASIC NEEDS SUPPORT

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

Schedule I-1 (Form 990) 2009

Name of the organization

CHILDREN, INCORPORATED

Employer identification number
54-0761510

Part I Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II).

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
TOHAALI' COMMUNITY SCHOOL P. O. BOX 9857 HWY 566 NEWCOMB, NM 87455	85-0197413	115(1)	5,810.	0.			EDUCATION & BASIC NEEDS SUPPORT
TO HAJILLEE COMMUNITY SCHOOL P. O. BOX 3438 LAGUNA, NM 87026		115(r)	12,778.	0.			EDUCATION & BASIC NEEDS SUPPORT
TSEYI GAI HIGH SCHOOL P. O. BOX 3068 CUBA, NM 87013		115(1)	7,491.	0.			EDUCATION & BASIC NEEDS SUPPORT
VIRGIE MIDDLE SCHOOL P. O. BOX 310 VIRGIE, KY 41572		501(C)(3)	10,569.	0.			EDUCATION & BASIC NEEDS SUPPORT
WARFIELD ELEMENTARY SCHOOL P. O. BOX 299 WARFIELD, KY 41267	61-6001302	501(C)(3)	20,909.	0.			EDUCATION & BASIC NEEDS SUPPORT
WARFIELD MIDDLE SCHOOL P. O. BOX 63 WARFIELD, KY 41267	61-6001302	501(C)(3)	7,950.	0.			EDUCATION & BASIC NEEDS SUPPORT
WEST HAMLIN ELEMENTARY SCHOOL ROUTE 2, BOX 112-A WEST HAMLIN, WV 25571		501(C)(3)	5,309.	0.			EDUCATION & BASIC NEEDS SUPPORT
WEST LIBERTY ELEMENTARY 717 LIBERTY RD. WEST LIBERTY, KY 41472	61-6001441	501(C)(3)	6,159.	0.			EDUCATION & BASIC NEEDS SUPPORT

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule I-1 (Form 990) 2009

Continuation Sheet for Schedule I (Form 990)
 Attach to Form 990 to list additional information for
 Schedule I (Form 990), Part II or Part III.

SCHEDULE I-1
 (Form 990)
 Department of the Treasury
 Internal Revenue Service

Employer identification number
54-0761510

Name of the organization

CHILDREN, INCORPORATED

Part I Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WESTWOOD ELEMENTARY SCHOOL 4083 U.S. HWY. 221 SOUTH WEST JEFFERSON, NC 28694		501(C)(3)	7,544.	0.			EDUCATION & BASIC NEEDS SUPPORT
WHITE SHIELD SCHOOL 2 SECOND AVE WEST ROSEGLEN, ND 58775		501(C)(3)	6,361.	0.			EDUCATION & BASIC NEEDS SUPPORT
WINGATE ELEMENTARY BOARDING SCHOOL P. O. BOX 1 FT. WINGATE, NM 87316	69-1299000	115(1)	7,783.	0.			EDUCATION & BASIC NEEDS SUPPORT
WOLFE CO. HIGH SCHOOL P. O. BOX 790 CAMPTON, KY 41301	61-6001257	501(C)(3)	8,631.	0.			EDUCATION & BASIC NEEDS SUPPORT
WOLFE COUNTY MIDDLE SCHOOL P. O. BOX 460 CAMPTON, KY 41301	61-6001257	501(C)(3)	7,269.	0.			EDUCATION & BASIC NEEDS SUPPORT

**SCHEDULE M
(Form 990)**

Noncash Contributions

OMB No. 1545-0047

2009

Department of the Treasury
Internal Revenue Service

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

Open to Public Inspection

Name of the organization **CHILDREN, INCORPORATED** Employer identification number **54-0761510**

Part I: Types of Property

	(a) Check if applicable	(b) Number of contributions	(c) Revenues reported on Form 990, Part VIII, line 1g	(d) Method of determining revenues
1 Art - Works of art				
2 Art - Historical treasures				
3 Art - Fractional interests				
4 Books and publications				
5 Clothing and household goods	X		309,882.	DONOR-PROVIDED RECEI
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities - Publicly traded	X	4	111,606.	FMV
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 ()				
26 Other ()				
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 IV, Donee Acknowledgment **29**

	Yes	No
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1-28 that it must hold for at least three years from the date of the initial contribution, and which is not 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 non-standard 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 did not report revenues in column (c) for a type of property for which column (a) is checked, describe in Part II.		

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

Schedule M (Form 990) 2009

SCHEDULE O
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990

Complete to provide information for responses to specific questions on
Form 990 or to provide any additional information.
▶ Attach to Form 990.

OMB No. 1545-0047

2009

Open to Public
Inspection

Name of the organization

CHILDREN, INCORPORATED

Employer identification number
54-0761510

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

EVERYWHERE DESERVE EDUCATION, HOPE AND OPPORTUNITY.

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

WELFARE OF UNDERPRIVILEGED CHILDREN, AND THE EDUCATION OF YOUNG ADULTS
SEEKING HIGHER EDUCATION.

FORM 990, PART VI, SECTION A, LINE 2: FAMILY RELATIONSHIPS: RICHARD E.

BALTIMORE, CHAIRMAN OF THE BOARD, IS THE FATHER-IN-LAW OF MANA BEHBIN,
DIRECTOR.

BUSINESS RELATIONSHIP: JAMES K. WALKER, DIRECTOR AND VIRGINIA F.

MARCHETTI, ASSISTANT SECRETARY HAVE AN INDIRECT BUSINESS RELATIONSHIP.
VIRGINIA MARCHETTI'S HUSBAND IS A BUSINESS PARTNER OF JAMES WALKER.

FORM 990, PART VI, SECTION B, LINE 11: FORM 990 IS PREPARED BY AN
INDEPENDENT CPA FIRM. BEFORE THE FORM 990 IS FILED WITH THE IRS, IT IS
REVIEWED BY THE FINANCE DIVISION, TOP EXECUTIVE LEADERSHIP, AND THE
GOVERNING BOARD OF DIRECTORS.

FORM 990, PART VI, SECTION B, LINE 12C: THE ORGANIZATION REGULARLY AND
CONSISTENLY MONITORS AND ENFORCES COMPLIANCE WITH THE CONFLICT OF INTEREST
POLICY BY ADMINSTERING AN ANNUAL QUESTIONNAIRE AND BY REVIEWING
TRANSACTIONS FOR POTENTIAL CONFLICTS OF INTEREST AND RELATED-PARTY
TRANSACTIONS. THE BOARD IS UPDATED ON THE RESULTS. IN THE EVENT OF A
CONFLICT, THE BOARD WILL DETERMINE A MORE ADVANTAGEOUS TRANSACTION OR

SCHEDULE O
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990

Complete to provide information for responses to specific questions on
Form 990 or to provide any additional information.
▶ Attach to Form 990.

OMB No. 1545-0047

2009

Open to Public
Inspection

Name of the organization

CHILDREN, INCORPORATED

Employer identification number

54-0761510

ARRANGEMENT FROM A PERSON OR ENTITY THAT WOULD NOT GIVE RISE TO A CONFLICT
OF INTEREST AND MAY VOTE ON THE MATTER. THE BOARD MAY ALSO APPOINT A
DISINTERESTED PERSON TO INVESTIGATE ALTERNATIVES OR APPOINT A COMMITTEE TO
SERVE ON ITS BEHALF AND DELEGATE THE RIGHTS AND POWERS TO EXERCISE THE
AUTHORITY AND POWERS GRANTED TO THE BOARD UNDER THIS POLICY.

FORM 990, PART VI, LINE 17, LIST OF STATES RECEIVING COPY OF FORM 990:

VA, AL, AK, AZ, CA, CT, FL, IL, ME, MD, MA, MI, MN, NH, NJ, NY, NC, ND, OH, OK, OR, PA, RI, SC, TX
UT, WA, WV, WI

FORM 990, PART VI, SECTION C, LINE 19: THE ORGANIZATION MAKES ITS
GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS
AVAILABLE UPON REQUEST. THE ORGANIZATION ALSO MAKES ITS FINANCIAL
STATEMENTS AND FORM 990 AVAILABLE AT WWW.CHILDREN-INC.ORG

FORM 990, PART XI, LINE 2C

THE AUDIT COMMITTEE HAS BEEN APPOINTED BY THE BOARD OF DIRECTORS AND
CONSISTS OF TWO CPA'S AND ONE LAY PERSON.