

OCTOBER 23, 2024

FOR LOVE OF CHILDREN, INC 131 NORTH LUDLOW ST., SUITE 1400 DAYTON, OH 45402 ATTENTION: ELIZABETH MANN

DEAR ELIZABETH:

ENCLOSED ARE THE ORIGINAL AND ONE COPY OF THE 2023 EXEMPT ORGANIZATION RETURN, AS FOLLOWS...

2023 FORM 990

THE INTERNAL REVENUE SERVICE REQUIRES THAT YOU MAKE YOUR ANNUAL EXEMPT ORGANIZATION RETURNS AND RELATED DOCUMENTS AVAILABLE FOR PUBLIC INSPECTION FOR 3 YEARS FOLLOWING THE FILING DATE. THE EXEMPTION APPLICATION, LETTER OF DETERMINATION AND RELATED DOCUMENTS MUST BE MADE AVAILABLE FOR PUBLIC INSPECTION INDEFINITELY. THE ORGANIZATION MUST FURNISH A COPY OF ITS EXEMPTION APPLICATION AND/OR INFORMATION RETURNS FOR THE LAST 3 YEARS TO ANYONE WHO REQUESTS SO IN WRITING. INFORMATION RETURNS MADE AVAILABLE FOR PUBLIC INSPECTION MUST BE PROPERLY SIGNED.

IN ADDITION TO THE CLIENT COPY OF THE 990, WE HAVE INCLUDED A COPY AVAILABLE TO MEET THE PUBLIC INSPECTION REQUIREMENTS. THIS COPY DOES NOT INCLUDE CERTAIN ITEMS NOT SUBJECT TO PUBLIC INSPECTION.

EACH ORIGINAL SHOULD BE DATED, SIGNED AND FILED IN ACCORDANCE WITH THE FILING INSTRUCTIONS. THE COPY SHOULD BE RETAINED FOR YOUR FILES.

VERY TRULY YOURS,

RENEA R. IRICK

TAX RETURN FILING INSTRUCTIONS

FORM 990

FOR THE YEAR ENDING

DECEMBER 31, 2023

PREPARED FOR:

FOR LOVE OF CHILDREN, INC 131 NORTH LUDLOW ST., SUITE 1400 DAYTON, OH 45402

PREPARED BY:

CLARK, SCHAEFER, HACKETT & CO. 14 EAST MAIN STREET, SUITE 500 SPRINGFIELD, OH 45502

AMOUNT DUE OR REFUND:

NOT APPLICABLE

MAKE CHECK PAYABLE TO:

NOT APPLICABLE

MAIL TAX RETURN AND CHECK (IF APPLICABLE) TO:

NOT APPLICABLE

RETURN MUST BE MAILED ON OR BEFORE:

NOT APPLICABLE

SPECIAL INSTRUCTIONS:

THIS COPY OF THE RETURN IS PROVIDED ONLY FOR PUBLIC DISCLOSURE PURPOSES. ANY CONFIDENTIAL INFORMATION REGARDING LARGE DONORS HAS BEEN REMOVED.

THIS RETURN HAS QUALIFIED FOR ELECTRONIC FILING. AFTER YOU HAVE REVIEWED THE RETURN FOR COMPLETENESS AND ACCURACY, PLEASE SIGN, DATE AND RETURN FORM 8879-TE TO OUR OFFICE. WE WILL TRANSMIT THE RETURN ELECTRONICALLY TO THE IRS AND NO FURTHER ACTION IS REQUIRED. RETURN FORM 8879-TE TO US BY NOVEMBER 15, 2024

	3879-TE		IRS	E-file Sig	nature A x Exempt	uthorization Frantity	n		OMB No. 1545-0047
Form					-	-			
		For calendar yea				23, and ending	, 20	-	2023
	ent of the Treasury				the IRS. Keep fo	r your records. ne latest informatior	-		
Name o	Revenue Service		GO 10	www.irs.gov/Fo		le latest mormation		l or SSN	
Nume		VE OF CI	יססתדש					1-123	0307
Namo	and title of officer or pe						5	1 125	5521
Name	and the of officer of pe			SIDENT					
Part	Type of	Return and							
					TE and ontor the	applicable amount, i	if any from the	o roturo. E	orm 8038 CP and
Form & or 10a whiche	5330 filers may ente below, and the am	r dollars and co ount on that lin	ents. For all le for the ret	other forms, enta	er whole dollars o vith this form was	only. If you check the blank, then leave lin	box on line • 1b, 2b, 3b,	1a, 2a, 3a, 4b, 5b, 6t	, 4a, 5a, 6a, 7a, 8a, 9a, b, 7b, 8b, 9b, or 10b, bo not complete more
1a	Form 990 check l	here	Х ьт	otal revenue, if a	anv (Form 990. P	art VIII. column (A). li	ine 12)	11	167,839.
2a	Form 990-EZ che		& T	otal revenue, if a	any (Form 990-F7	/, line 9)			o
 3a	Form 1120-POL					.,			o
4a	Form 990-PF che					(Form 990-PF, Part			o
-14 5a	Form 8868 check								o
6a	Form 990-T chec					4)			
0a 7a	Form 4720 check								ວ ວ
7a 8a	Form 5227 check					(Form 5227, Item D)			
	Form 5330 check								o
9a 10a						9) sted (Form 8038-CP			0
10a Part						Person Subject		<u>22) R</u>	Db
		-	·			I am a person su		ith respect	t to (name
					-	-	-	-	amined a copy of the
ackno of any entry t financi later th payme persor	wledgement of rece refund. If applicable to the financial instit ial institution to deb nan 2 business days ent of taxes to receiv	ipt or reason for e, I authorize th ution account i it the entry to t prior to the pa ve confidential	or rejection of the U.S. Treas indicated in his account ayment (sett information	of the transmissions sury and its design the tax preparation . To revoke a pay lement) date. I all necessary to ans	on, (b) the reason gnated Financial ion software for p yment, I must cor lso authorize the swer inquiries and	I the return to the IRS of for any delay in pro- Agent to initiate an e- payment of the federa thact the U.S. Treasu financial institutions d resolve issues relat oplicable, the conser	ocessing the re electronic fund al taxes owed ury Financial A involved in the ted to the pay	eturn or rei ls withdrav on this ret gent at 1-8 e processii ment. I hav	fund, and (c) the date wal (direct debit) rurn, and the 888-353-4537 no ng of the electronic ve selected a
	X I authorize CL	ARK, SCI	HAEFER	, HACKET	т & СО.		to ente	er my PIN	39327
		•		ERO firm				-	Enter five numbers, but
									do not enter all zeros
F	with a state age on the return's o	ncy(ies) regulat disclosure cons	ting charities sent screen.	s as part of the II	RS Fed/State pro	cated within this retu gram, I also authoriz	the aforeme	entioned El	RO to enter my PIN
L	return. If I have	indicated within	n this return	that a copy of the	•	ny PIN as my signatu filed with a state ago nt screen.		•	-
Signatur Part	e of officer or person subje	ct to tax ation and Au	uthention	tion				Date	
	EFIN/PIN. Enter yo er (EFIN) followed by	-	-			313100 Do not enter]	
submi						ectronically filed retur I e-File (MeF) Informa			
ERO's	signature CLA	RK, SCH	AEFER,	HACKETT	& CO.	Date	10/23	/24	
		– ••				See Instructions			
						ess Requested	To Do So		
For Pr	ivacy Act and Pap	erwork Reduc	tion Act No	tice, see instruc	ctions.			F	orm 8879-TE (2023)
LHA	302521 01-05-24								

(Rev. January 2024)

Application for Extension of Time To File an Exempt Organization Return or Excise Taxes Related to Employee Benefit Plans

Department of the Treasury Internal Revenue Service

File a separate application for each return. Go to www.irs.gov/Form8868 for the latest information.

Electronic filing (e-file). You can electronically file Form 8868 to request up to a 6-month extension of time to file any of the forms listed below except for Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts. An extension request for Form 8870 must be sent to the IRS in a paper format (see instructions). For more details on the electronic filing of Form 8868, visit www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits.

Caution: If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-TE and Form 8879-TE for payment instructions.

All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

<u>must use</u>	Form 7004 to request an extension of time to file income	e tax retur	ns.					
<u> Part I - I</u>	dentification							
Type or	Name of exempt organization, employer, or other filer	Taxpayer identification number (TIN						
Print								
File by the	FOR LOVE OF CHILDREN, INC				31-123932	7		
due date for filing your								
return. See	131 NORTH LUDLOW STREET, 14							
instructions								
Entor the	DAYTON, OH 45402 Return Code for the return that this application is for (file		to application for each return)			01		
						<u> </u>		
Applicat	ion Is For	Return	Application Is For			Return		
Faura 00) au Fauna 000 F7	Code	Former (1700 (oth on the one in dividual)			Code		
	0 or Form 990-EZ	01	Form 4720 (other than individual)			09		
	20 (individual)	03	Form 5227			10		
Form 99		04	Form 6069			11		
	D-T (sec. 401(a) or 408(a) trust)	05	Form 8870			12		
	D-T (trust other than above)	06	Form 5330 (individual)			13		
	D-T (corporation)	07	Form 5330 (other than individual)			14		
Form 10		08	Lingluding signature is applicable a	nhy for on	autonaian of			
	ou enter your Return Code, complete either Part II or Par le Form 5330.	t III. Part II	i, including signature, is applicable c	only for an	extension of			
	application is for an extension of time to file Form 5330, y	ou must s	nter the following information					
			nter the following information.					
	ın Name ın Number							
	In Year Ending (MM/DD/YYYY)							
	utomatic Extension of Time To File for Exempt Organ	izations (s	see instructions)					
	ooks are in the care of TEDDY R. HURLEY							
			T, SUITE 1400 - DA	YTON,	OH 45402			
Telep	none No. 937-223-8888		Fax No.	•				
•	organization does not have an office or place of business	s in the Uni						
	is for a Group Return, enter the organization's four-digit (heck this		
box								
1 Ire	equest an automatic 6-month extension of time until $$ $$ N	OVEMB	ER 15 , 20 24 , to file	e the exem	pt organization retu	Irn for		
	organization named above. The extension is for the orga							
Х	calendar year 20 23 or							
	tax year beginning	, 20	, and ending		. , 20)(
2 If t	he tax year entered in line 1 is for less than 12 months, cl	heck reaso	on: Initial return	Final retur	n			
	Change in accounting period							
3a lft	his application is for Forms 990-PF, 990-T, 4720, or 6069	, enter the	tentative tax, less					
an	y nonrefundable credits. See instructions.			3a	\$	0.		
b If t	his application is for Forms 990-PF, 990-T, 4720, or 6069	, enter any	refundable credits and					
es	imated tax payments made. Include any prior year overp	ayment all	owed as a credit.	3b	\$	0.		
c Ba	lance due. Subtract line 3b from line 3a. Include your pa	yment with	h this form, if required, by					
us	ng EFTPS (Electronic Federal Tax Payment System). See	e instructio	ns.	3c	\$	0.		

For Privacy Act and Paperwork Reduction Act Notice, see instructions.

** PUBLIC DISCLOSURE COPY ** Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) Do not enter social security numbers on this form as it may be made public. Go to www.irs.gov/Form990 for instructions and the latest information.

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OMB No. 1545-0047

Inspection

Department of the Treasury Internal Revenue Service

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			enaing	D. Employer identifie	ation number			
D C a	heck if oplicab	C Name of organization	D Employer identific	ation number				
	Addre	FOR LOVE OF CHILDREN, INC						
	Name		31-1239327					
	Initial							
	Final		1400	E Telephone number 937-223-3				
L	Jreturr termii ated			G Gross receipts \$	179,598.			
	Amer]Amer			H(a) Is this a group re				
	Appli dtion			for subordinates?				
L	pendi	^{ng} SAME AS C ABOVE		H(b) Are all subordinates in				
I T	ax-ex	empt status: X 501(c)(3) 501(c) () (insert no.) 4947(a)(1)	or 527		list. See instructions			
	Vebsi			H(c) Group exemption				
		forganization: X Corporation Trust Association Other	L Year		State of legal domicile: OH			
	rt I	Summary	1	I				
	1	Briefly describe the organization's mission or most significant activities:	PRIMAR	Y EXEMPT PUR	RPOSE IS TO			
Activities & Governance		DEVELOP AND RUN CHILDREN'S PROGRAMS TO PR	OVIDE	FINANCIAL,				
nar	2	Check this box if the organization discontinued its operations or disposed	sed of more	than 25% of its net ass	ets.			
ver	3			3	20			
ğ	4	Number of independent voting members of the governing body (Part VI, line 1b)			20			
ŝ	5	Total number of individuals employed in calendar year 2023 (Part V, line 2a)		0				
/itie	6	Total number of volunteers (estimate if necessary)		700				
ctiv	7 a			7a	0.			
A	b	Net unrelated business taxable income from Form 990-T, Part I, line 11		7b	0.			
				Prior Year	Current Year			
e	8	Contributions and grants (Part VIII, line 1h)		162,308.	136,228.			
nue	9	Program service revenue (Part VIII, line 2g)		0.	23,817.			
Revenue	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		13.	13.			
æ	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		5,867.	7,781.			
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		168,188.	167,839.			
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		0.	0.			
	14	Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.			
ş	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		0.	0.			
nse	16a	Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.			
Expenses		Total fundraising expenses (Part IX, column (D), line 25) 10,5						
Ú		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		169,548.	223,814.			
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		169,548.	223,814.			
	19	Revenue less expenses. Subtract line 18 from line 12		-1,360.	-55,975.			
Assets or d Balances			Be	ginning of Current Year	End of Year			
sets alan	20	Total assets (Part X, line 16)		471,760.	415,785.			
t As	21	Total liabilities (Part X, line 26)		0.	0.			
Fund	22	Net assets or fund balances. Subtract line 21 from line 20		471,760.	415,785.			
	rt II	Signature Block						
Unde	er pen	alties of perjury, I declare that I have examined this return, including accompanying schedule	s and stateme	nts, and to the best of my	knowledge and belief, it is			

true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign	Signature of officer			Date				
Here	ELIZABETH MANN, PRESIDENT							
	Type or print name and title							
	Print/Type preparer's name	Preparer's signature	Date	Check PTIN				
Paid	RENEA R. IRICK	RENEA R. IRICK	10/23	/24 self-employed P01586814				
Preparer	Firm's name CLARK, SCHAEFER,	HACKETT & CO.		Firm's EIN 31-0800053				
Use Only	Firm's address 14 EAST MAIN STRE							
	SPRINGFIELD, OH 4	5502		Phone no. 937 - 399 - 2000				
May the IF	May the IRS discuss this return with the preparer shown above? See instructions							
LHA For	HA For Paperwork Reduction Act Notice, see the separate instructions. 332001 12-21-23 Form 990 (2023)							

SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION

Form	990 (2023) FOR LOVE OF CHILDREN, INC 31-	1239327	Page 2
Par	t III Statement of Program Service Accomplishments		
	Check if Schedule O contains a response or note to any line in this Part III	<u></u>	🛛
1	Briefly describe the organization's mission: THE PRIMARY EXEMPT PURPOSE IS TO DEVELOP AND RUN CHILDREN'S	PROGRAMS	
	TO PROVIDE FINANCIAL, ENRICHMENT, EDUCATIONAL, AND ADVOCACY		
	FOR NEGLECTED, ABUSED, FOSTER, AND UNDERPRIVILEGED CHILDREN		
	NEWBORN TO 18 YEARS OF AGE THROUGHOUT THE GREATER DAYTON, OH	IIO AREA.	
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?	Vac	XNo
	prior Form 990 or 990-EZ? If "Yes," describe these new services on Schedule O.	L Tes	
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	Yes	XNo
	If "Yes," describe these changes on Schedule O.		
4	Describe the organization's program service accomplishments for each of its three largest program services, as measur Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the t		d
	revenue, if any, for each program service reported.	otal expenses, ar	iu
4a	(Code:) (Expenses \$113,400. including grants of \$) (Revenue \$))
	THE CHRISTMAS FOR KIDS PROGRAM PROVIDES CHRISTMAS GIFTS TO N		,
	ABUSED, FOSTER, AND UNDERPRIVILEGED GREATER DAYTON, OHIO YOU	JTH. IN	
	2023, OVER 2,600 CHILDREN BENEFITED.		
4b	(Code:) (Expenses \$26,239. including grants of \$) (Revenue \$) (Revenue \$))
	BLESSINGS IN A BAG ASSEMBLES FOOD BAGS FOR AREA CHILDREN WHO BE EATING OVER THE WEEKEND, AS IDENTIFIED BY SCHOOL STAFF. T		
	FEEDS OVER 350 CHILDREN EACH MONTH.	<u>IIID IROOI</u>	
4c	(Code:) (Expenses \$ 2 , 343 including grants of \$) (Revenue \$		<u>`</u>
70	THE GRANT A WISH PROGRAM BESTOWS SPECIFIC REQUESTS TO CHILDR	EN WHO)
	WRITE HEARTFELT LETTERS TO THE ORGANIZATION.		
4d	Other program services (Describe on Schedule O.)		
		598.)	
4e	Total program service expenses 185,360.	۵	90 (2023)
332000	2 12-21-23	Form 9	JU (2023)
552002	3		

15161023 758050 4000002-726 2023.04030 FOR LOVE OF CHILDREN, INC 40000021

Form	990	(2023)

Form 990 (2023) FOR LOVE OF CHILDREN, INC Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X,			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	Х	
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
с	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a		X
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		X X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			<u></u>
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		X
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		x
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes." complete Schedule I. Parts I and II	21	000	
332003	3 12-21-23	⊢orm	330	(2023)

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332003 12-21-23

Form	990	(2023)
FUIII	330	(2023)

			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on		res	No
22		22		x
23	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current	22		- 23
23	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
		23		x
24 2	Schedule J Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the	25		
240	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No," go to line 25a	24a		x
h	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		<u> </u>
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
•	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		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? If "Yes," complete			
	Schedule L, Part I	25b		X
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties? (See the Schedule L, Part IV,			
	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			
	"Yes," complete Schedule L, Part IV	28a		X
	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		X X
С	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? <i>If</i>	000		x
29	"Yes," complete Schedule L, Part IV Did the organization receive more than \$25,000 in noncash contributions? If "Yes," complete Schedule M	28c 29		X
29 30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation	23		- 23
50	contributions? If "Yes," complete Schedule M	30		x
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		x
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		x
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		x
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34		x
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		<u> </u>
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?			
Par	Note: All Form 990 filers are required to complete Schedule O t V Statements Regarding Other IRS Filings and Tax Compliance	38	Х	
rai	Check if Schedule O contains a response or note to any line in this Part V			
	טוופטע וו סטוופטעוב ט טטווגמווז מ ופאטטואל טו זוטנע נט מוזע וווע ווו נוווא דמוג ע		Yes	No
10	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable		res	
	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 1b			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
Ŭ	(gambling) winnings to prize winners?	1c		
332004	- 12-21-23	Form	990	(2023)
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15161023 758050 4000002-726

	990 (2023) FOR LOVE OF CHILDREN, INC 31-1239	327	Pa	age 5
Par	TV Statements Regarding Other IRS Filings and Tax Compliance (continued)		Vee	
22	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,		Yes	No
Za	filed for the calendar year ending with or within the year covered by this return 2a 0			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		Х
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b		
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X
b	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		<u>X</u>
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			
	any contributions that were not tax deductible as charitable contributions?	<u>6a</u>		<u>X</u>
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
_	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).	_		v
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		<u> </u>
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required	7.		x
لم	to file Form 8282? If "Yes," indicate the number of Forms 8282 filed during the year 7d	7c		<u></u>
		7e		Х
e f	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e 7f		X
g	If the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7g		
-	If the organization received a contribution of qualified intellectual property, did the organization merior boss as required in the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	79 7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
•	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12 10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders 11a			
b	Gross income from other sources. (Do not net amounts due or paid to other sources against			
	amounts due or received from them.)			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	40		
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note: See the instructions for additional information the organization must report on Schedule O.			
D	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
~	organization is licensed to issue qualified health plans 13b Enter the amount of reserves on hand 13c			
14a		14a		х
	Did the organization receive any payments for indoor tanning services during the tax year? If "Yes," has it filed a Form 720 to report these payments? <i>If</i> "No," <i>provide an explanation on Schedule O</i>	14a		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			
	excess parachute payment(s) during the year?	15		х
	If "Yes," see the instructions and file Form 4720, Schedule N.			
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		Х
	If "Yes," complete Form 4720, Schedule O.			
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities			
	that would result in the imposition of an excise tax under section 4951, 4952 or 4953?	17		
	If "Yes," complete Form 6069.			
332005	5 12-21-23	Form	990	(2023)

15161023 758050 4000002-726

Form 990	(2023)
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1-1239327	Page 6
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 Form 990 (2023)
 FOR LOVE OF CHILDREN, INC
 31–1239327
 Page

 Part VI
 Governance, Management, and Disclosure.
 For each "Yes" response to lines 2 through 7b below, and for a "No" response

 to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions.

X

						Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a		20			
	If there are material differences in voting rights among members of the governing body, or if the governing						
	body delegated broad authority to an executive committee or similar committee, explain on Schedule O.						
b	Enter the number of voting members included on line 1a, above, who are independent	1b		20			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship	with a	iny other				
	officer, director, trustee, or key employee?				2	Х	
3	Did the organization delegate control over management duties customarily performed by or under the	direct	supervisior	า			
	of officers, directors, trustees, or key employees to a management company or other person?				3		Х
4	Did the organization make any significant changes to its governing documents since the prior Form 99				4		Х
5	Did the organization become aware during the year of a significant diversion of the organization's asse				5		Х
6	Did the organization have members or stockholders?				6		Х
7a	Did the organization have members, stockholders, or other persons who had the power to elect or app						
	more members of the governing body?				7a		x
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, sto						
	persons other than the governing body?				7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year	bv the	followina:				
а	The governing body?				8a	х	
	Each committee with authority to act on behalf of the governing body?				8b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reac						
	organization's mailing address? If "Yes," provide the names and addresses on Schedule O				9		x
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Rev						
		onuo	0000./			Yes	N
10a	Did the organization have local chapters, branches, or affiliates?				10a		Х
	If "Yes," did the organization have written policies and procedures governing the activities of such cha						
-		•			10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body				11a		Х
	Describe on Schedule O the process, if any, used by the organization to review this Form 990.						
	Did the organization have a written conflict of interest policy? If "No," go to line 13				12a		Х
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise t				12b		
	Did the organization regularly and consistently monitor and enforce compliance with the policy? If " γ_e						
-	on Schedule O how this was done	,			12c		
13	Did the organization have a written whistleblower policy?				13		Х
14	Did the organization have a written document retention and destruction policy?				14		Х
15	Did the process for determining compensation of the following persons include a review and approval						
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	,					
а	The organization's CEO, Executive Director, or top management official				15a		х
	Other officers or key employees of the organization				15b		Х
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.						
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangem	ent w	th a				
	taxable entity during the year?				16a		х
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate						
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organize	-	-				
	exempt status with respect to such arrangements?				16b		
Sec	tion C. Disclosure						
17	List the states with which a copy of this Form 990 is required to be filed NONE						
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and	d 990	T (section 5	01(c)(3)s	onlv)	availat	ole
	for public inspection. Indicate how you made these available. Check all that apply.		·	- · (-/(-/-	-··· j)		
10	Own website Another's website Image: Comparison of the comp				finan		
19	statements available to the public during the tax year.	mict 0	i interest po	ncy, and	man	Jiai	
20	Statements available to the public during the tax year. State the name, address, and telephone number of the person who possesses the organization's book	ko 00-	Irocarda				
20	TEDDY R. HURLEY III - 937-223-8888						
	131 NORTH LUDLOW STREET, SUITE 1400, DAYTON, OH 45	402				000	
	5 12-21-23				Form	990	(202

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

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

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

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

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

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

• List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.

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

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

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

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

(A)	(B)	(C)				(D)	(E)	(F)		
Name and title	Average	(do	Position				ne	Reportable	Reportable	Estimated
	hours per	box	(do not check more than one box, unless person is both an		compensation	compensation	amount of			
	week		officer and a director/trustee)		from	from related	other			
	(list any hours for	irecto						the organization	organizations (W-2/1099-MISC/	compensation from the
	related	e or c	stee			Isated		(W-2/1099-MISC/	1099-NEC)	organization
	organizations	truste	al trus		yee	mper		1099-NEC)	1000 (120)	and related
	below	Individual trustee or director	Institutional trustee	5	Key employee	est co oyee	er	,		organizations
	line)	Indiv	Instit	Officer	Key (Highest compensated employee	Former			
(1) ELIZABETH MANN	30.00									
PRESIDENT		Х		Х				0.	0.	0.
(2) SHERI ALDRIDGE	2.00									
VICE PRESIDENT		Х		Х				0.	0.	0.
(3) TEDDY HURLEY III	5.00									
CO-FINANCIAL DIRECTOR		Х		Х				0.	0.	0.
(4) JAIME HAMMOND	1.00									
CO-FINANCIAL DIRECTOR		Х		Х				0.	0.	0.
(5) SUE SPIEGEL	30.00									
ORGANIZATIONAL MANAGER		Х						0.	0.	0.
(6) DOUG MANN	22.00									
MARKETING DIRECTOR		Х						0.	0.	0.
(7) CHRISTY LOWE	20.00									
COMMUNITY OUTREACH COORDIN		Х						0.	0.	0.
(8) KRISTEN OLFKY	10.00									
DIRECTOR OF TRANSPORTATION		Х						0.	0.	0.
(9) THERESA TEREBINSKI	7.00									
DIRECTOR OF DESIGN		Х						0.	0.	0.
(10) TRAVIS GREENWOOD	1.00									_
MEMBER		Х						0.	0.	0.
(11) DENISE SWICK	1.00									_
MEMBER		Х						0.	0.	0.
(12) SHAWNA SORRELL	1.00									
MEMBER	1	Х						0.	0.	0.
(13) BETSY HOOBLER	1.00								•	•
MEMBER	1 00	Х						0.	0.	0.
(14) DR. JHANSI KODURI	1.00								•	
MEMBER	1	Х						0.	0.	0.
(15) DR. RON RODDY	1.00								•	
MEMBER	1	Х						0.	0.	0.
(16) LARRY JAFFE	1.00									
MEMBER		Х			<u> </u>			0.	0.	0.
(17) DORIS MULLEN	1.00								•	•
MEMBER		Х						0.	0.	0.
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15161023 758050 4000002-726

Form 990 (2023) FOR LOVE				-					31-123	393	327 F	-age 8
Part VII Section A. Officers, Directors, Trust		oloy	ees,			ghes	st C		s (continued)			
(A) Name and title	(B) Average hours per	verage Position (do not check more that box, unless person is b					n an	(D) Reportable compensation	(E) Reportable compensation		(F) Estima amoun	t of
	week (list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer 0	Key employee	Highest compensated		from the organization (W-2/1099-MISC/ 1099-NEC)	from related organizations (W-2/1099-MISC 1099-NEC)	;/	othe compens from ti organiza and rela organiza	ation ne ition ited
(18) MIKE MCCOY	1.00											_
MEMBER	1 0 0	Х						0.	().		0.
(19) KYLE HUA	1.00	x						0	(0
CO-DIRECTOR BSR (20) OMAIR KHAN	1.00	A				\vdash		0.	L L).		0.
CO-DIRECTOR BSR	1.00	х						0.	(<u>).</u>		0.
1b Subtotal c Total from continuation sheets to Part VII								0.).).		0.
d Total (add lines 1b and 1c)								0.		5.		0.
2 Total number of individuals (including but no compensation from the organization								eceived more than \$100,	000 of reportable			0
										_	Yes	No
3 Did the organization list any former officer, line 1a? <i>If</i> "Yes," <i>complete Schedule J for su</i>	-			•	•		Ŭ	• •			3	x
4 For any individual listed on line 1a, is the su and related organizations greater than \$150	m of reportabl	e co	mpe	ensa	tion	and	oth	er compensation from th	ne organization		4	x
5 Did any person listed on line 1a receive or a										F		
rendered to the organization? If "Yes," com	plete Schedule	e J fo	or sı	ıch į	pers	on .		-			5	X
Section B. Independent Contractors								· · · · · · · · · · · · · · · · · · ·	100.000 - (
1 Complete this table for your five highest cor the organization. Report compensation for t	•	•							•	nsati	on from	
(A) Name and business address NONE Descr									ervices	С	(C) ompensatio	on
2 Total number of independent contractors (in \$100,000, of componentian from the error)	•	ot lin	nitec	to	thos C	•	ted	above) who received mo	ore than			
\$100,000 of compensation from the organiz	auon				<u> </u>	,					-orm 990	(2022)

332008 12-21-23

					' CI	HILDREN,	INC		31-1239	327 Page 9
Pa	rt V	111	Statement of Revenu	е						
			Check if Schedule O contair	ns a respo	onse o	r note to any lin		(B)	(0)	
							(A) Total revenue	Related or exempt	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
Contributions, Gifts, Grants and Other Similar Amounts	1	а	Federated campaigns	1a						
ran'			Membership dues							
s, G Amc		с	Fundraising events							
Sift: Iar ∕		d	Related organizations	1d						
imil			Government grants (contribution							
itior er S		f	All other contributions, gifts, grants,			126 220				
OthO			similar amounts not included above			136,228.				
nd		-	Noncash contributions included in lines 1a-				136,228.			
0 0			h Total. Add lines 1a-1f Business Code		150,220.					
d)	2	а	PROGRAM INCOME		f	900099	23,817.	23,817.		
Program Service Revenue	~	b			_					
Ser		c								
am		d								
ogr B		е								
Γ,			All other program service revenu							
		g	Total. Add lines 2a-2f				23,817.			
	3		Investment income (including div				13.			13.
	4		other similar amounts) Income from investment of tax-e				T2•			
	5		Royalties							
	Ŭ			(i) Real		(ii) Personal				
	6	а	Gross rents 6a	.,						
		b	Less: rental expenses 6b							
		с	Rental income or (loss) 6c							
		d	Net rental income or (loss)	<u></u>						
	7	а	Gross amount from sales of	(i) Securit	ies	(ii) Other				
			assets other than inventory 7a							
		b	Less: cost or other basis							
evenue		~	and sales expenses7bGain or (loss)7c							
			Net gain or (loss)							
Other Re			Gross income from fundraising even							
oth	-		including \$							
_			contributions reported on line 10							
			Part IV, line 18		8a					
			Less: direct expenses		8b					
			Net income or (loss) from fundra							
	9	а	Gross income from gaming activ							
		h	Part IV, line 19		9a 9b					
			Less: direct expenses Net income or (loss) from gamin							
			Gross sales of inventory, less ref							
			and allowances		10a	19,540.				
		b	Less: cost of goods sold			11,759.				
			Net income or (loss) from sales of		ry		7,781.	7,781.		
s		_			ļ	Business Code				
eou	11	а								
Miscellaneous Revenue		b								
scel		c								
Mis			All other revenue							
	12	e	Total. Add lines 11a-11d Total revenue. See instructions				167,839.	31,598.	0.	13.
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Form 990 (2023) FOR LOVE OF CHILDREN, INC Part IX Statement of Functional Expenses

Sect	ion 501(c)(3) and 501(c)(4) organizations must comp	olete all columns. All othe	er organizations must con	nplete column (A).	
	Check if Schedule O contains a respon			·····	
	not include amounts reported on lines 6b, 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 domestic organizations				
	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees				
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				
8	Pension plan accruals and contributions (include				
-	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (nonemployees):				
'' a	Management				
b	Legal				
c	•	1,032.		1,032.	
d		_,			
e					
f	Investment management fees				
י g					
А	column (A), amount, list line 11g expenses on Sch 0.)	198.	88.	110.	
12	Advertising and promotion	10,591.			10,591.
13	Office expenses	442.	398.	44.	.,
14	Information technology	1,776.	1,598.	178.	
15	Royalties	, , ,	,		
16	Occupancy	9,600.	9,600.		
17	Travel	4,990.	4,990.		
18	Payments of travel or entertainment expenses	_,	_,		
.5	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	25,584.		25,584.	
23	Insurance	1,653.	1,488.	165.	
24	Other expenses. Itemize expenses not covered	,	, =		
	above. (List miscellaneous expenses on line 24e. If				
	line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule 0.)				
а	PROGRAM EXPENSES	160,446.	160,446.		
b		5,766.	5,189.	577.	
c	MEALS FOR VOLUNTEERS	882.	794.	88.	
d	MISCELLANEOUS	854.	769.	85.	
	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	223,814.	185,360.	27,863.	10,591.
26	Joint costs. Complete this line only if the organization		·		•
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)				
					Game 990 (0000)

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Form 990 (2023)

 $15161023 \ 758050 \ 4000002-726$

FOR LOVE OF CHILDREN, INC Part X Balance Sheet

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

31-1239327 Page 11

					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing			295,686.	1	265,283.
	2	Savings and temporary cash investments			25,213.	2	25,225.
	3	Pledges and grants receivable, net		3			
	4	Accounts receivable, net				4	
	5	Loans and other receivables from any current or					
	•	trustee, key employee, creator or founder, subst					
		controlled entity or family member of any of thes				5	
	6	Loans and other receivables from other disqualif	-				
	-	under section 4958(f)(1)), and persons described	•	,		6	
۵	7	Notes and loans receivable, net		F		7	
Assets	8	Inventories for sale or use				8	
As	9	_				9	
	10a	Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D	10a	188,872.			
	b	Less: accumulated depreciation		64,607.	149,849.	10c	124,265.
	11	Investments - publicly traded securities				11	
	12	Investments - other securities. See Part IV, line 1		12			
	13	Investments - program-related. See Part IV, line 1		13			
	14	Intangible assets		14			
	15	Other assets. See Part IV, line 11	1,012.	15	1,012.		
	16	Total assets. Add lines 1 through 15 (must equa			471,760.	16	415,785.
	17	Accounts payable and accrued expenses		17			
	18	Grants payable			18		
	19	Deferred revenue			19		
	20	Tax-exempt bond liabilities			20		
	21	Escrow or custodial account liability. Complete F				21	
s	22	Loans and other payables to any current or form	er officer, o	irector,			
Liabilities		trustee, key employee, creator or founder, subst	antial contr	ibutor, or 35%			
abi		controlled entity or family member of any of thes	e persons			22	
	23	Secured mortgages and notes payable to unrela	ted third pa	irties		23	
	24	Unsecured notes and loans payable to unrelated	third parti	es		24	
	25	Other liabilities (including federal income tax, page	yables to re	lated third			
		parties, and other liabilities not included on lines	17-24). Co	mplete Part X			
		of Schedule D				25	
	26	Total liabilities. Add lines 17 through 25			0.	26	0.
6		Organizations that follow FASB ASC 958, che	ck here	X			
če		and complete lines 27, 28, 32, and 33.					
lan	27				471,760.	27	415,785.
B	28			······		28	
un l		Organizations that do not follow FASB ASC 9	iere 🔄 🛛				
۲ ۲		and complete lines 29 through 33.					
Net Assets or Fund Balances	29	Capital stock or trust principal, or current funds			29		
sse	30	Paid-in or capital surplus, or land, building, or eq		Г		30	
μ	31	Retained earnings, endowment, accumulated inc	ner funds		31		
				1	171 760	I	
ž	32 33	Total net assets or fund balances			<u>471,760.</u> 471,760.	32 33	<u>415,785.</u> 415,785.

Form 990 (2023)

Form	990 (2023) FOR LOVE OF CHILDREN, INC	31-1239327	Page 12
Par	rt XI Reconciliation of Net Assets		
	Check if Schedule O contains a response or note to any line in this Part XI		
1	Total revenue (must equal Part VIII, column (A), line 12)		,839.
2	Total expenses (must equal Part IX, column (A), line 25)		8,814.
3	Revenue less expenses. Subtract line 2 from line 1		5 <u>,975.</u>
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4 471	.,760.
5	Net unrealized gains (losses) on investments	5	
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain on Schedule O)	9	0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,		
	column (B))	10 415	5 <u>,785.</u>
Par	rt XII Financial Statements and Reporting		
	Check if Schedule O contains a response or note to any line in this Part XII		
			Yes No
1	Accounting method used to prepare the Form 990: X Cash Accrual Other		
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule C		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a	<u> </u>
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed or	na 🛛	
	separate basis, consolidated basis, or both:		
	Separate basis Consolidated basis Both consolidated and separate basis		
b	Were the organization's financial statements audited by an independent accountant?	2b	<u> </u>
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate b	asis,	
	consolidated basis, or both:		
	Separate basis Consolidated basis Both consolidated and separate basis		
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the a		
	review, or compilation of its financial statements and selection of an independent accountant?		
	If the organization changed either its oversight process or selection process during the tax year, explain on Sched	ule O.	
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the		
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?	За	<u> </u>
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required		
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		

Form **990** (2023)

332012 12-21-23

Department of the Treasury Internal Revenue Service

(Form 990)

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section

4947(a)(1) nonexempt charitable trust.

Attach to Form 990 or Form 990-EZ.

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

	OMB No. 1545-0047
	2023
	Open to Public Inspection
Employer	identification number

Name of the organization

		FOR	LOVE OF CH	ILDREN, INC				3	1-1239327
Pa	art I	Reason for Public C			omplete th	nis part.) S	ee instructions.		
The	organ	ization is not a private found							
1		A church, convention of ch	urches, or associatio	on of churches described	l in sectio	n 170(b)(1	I)(A)(i).		
2		A school described in sect	ion 170(b)(1)(A)(ii). (Attach Schedule E (Forn	n 990).)				
3		A hospital or a cooperative	hospital service orga	anization described in s	ection 170	(b)(1)(A)(ii	ii).		
4		A medical research organization	ation operated in cor	njunction with a hospital	described	in sectio	n 170(b)(1)(A)(ii	i). Enter	the hospital's name,
		city, and state:							
5		An organization operated for	or the benefit of a col	llege or university owned	l or operate	ed by a go	overnmental unit	describe	ed in
		section 170(b)(1)(A)(iv). (C	Complete Part II.)						
6		A federal, state, or local gov	vernment or governm	nental unit described in	section 17	70(b)(1)(A)	(v).		
7	X	An organization that norma	lly receives a substar	ntial part of its support f	rom a gove	ernmental	unit or from the	general p	public described in
		section 170(b)(1)(A)(vi). (C	omplete Part II.)						
8		A community trust describe	ed in section 170(b)((1)(A)(vi). (Complete Par	t II.)				
9		An agricultural research org	anization described	in section 170(b)(1)(A)(ix) operate	ed in conju	inction with a la	nd-grant	college
		or university or a non-land-g	grant college of agric	ulture (see instructions).	Enter the I	name, city	, and state of th	e college	or
		university:							
10		An organization that norma	Ily receives (1) more	than 33 1/3% of its supp	port from c	ontributior	ns, membership	fees, and	d gross receipts from
		activities related to its exem		-					-
		income and unrelated busir		(less section 511 tax) fro	om busines	ses acqui	red by the orgar	nization a	Ifter June 30, 1975.
		See section 509(a)(2). (Cor							
11		An organization organized a	-		•				
12		An organization organized a	-	-					
		more publicly supported or	-						Check the box on
		lines 12a through 12d that						-	at da a
a		Type I. A supporting orga	-	-	• • • •	-			
		the supported organization			i majonty o	or the direc	tors or trustees	or the st	ipporting
k		organization. You must c Type II. A supporting org			tion with it		d organization(by boy	ina
Ľ		control or management o	-						-
		organization(s). You mus			ame perso	113 11121 00	ntroi or manage	the supp	Joned
c		Type III functionally inte	-		in connect	tion with	and functionally	integrate	d with
		its supported organization					-	integrate	
c	4 T	Type III non-functionally		-				d organiz	zation(s)
		that is not functionally int	• •					-	
		requirement (see instructi			•		-		
e	•	Check this box if the orga	anization received a v	written determination fro	m the IRS	that it is a	Type I, Type II,	Type III	
		functionally integrated, or	Type III non-functior	nally integrated supporti	ng organiz	ation.			
f	Ente	er the number of supported o	organizations						
		vide the following information					•		
	(i) Name of supported	(ii) EIN	(iii) Type of organization (described on lines 1-10	(iv) Is the orga in your governi	anization listed ng document?	(v) Amount of m		(vi) Amount of other
		organization		above (see instructions))	Yes	No	support (see inst	ructions)	support (see instructions)
Tot	al								

Part II

FOR LOVE OF CHILDREN, INC

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

Sec	Section A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not				1.00.000	1.2.5. 0.0.0	4440-00
	include any "unusual grants.")	329,919.	330,754.	181,321.	162,308.	136,228.	1140530.
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
-	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to the organization without charge						
	• • …	329,919.	330,754.	181,321.	162,308.	136,228.	1140530.
	Total. Add lines 1 through 3 The portion of total contributions	529,919.	550,754.	101,521.	102,300.	130,220.	1140550.
5	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)						82,293.
6	Public support. Subtract line 5 from line 4.						1058237.
	tion B. Total Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
	Amounts from line 4	329,919.	330,754.	181,321.	162,308.	136,228.	1140530.
	Gross income from interest,		-			_	
	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources	85.	109.	471.	13.	13.	691.
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI.)	5,000.			5,867.	7,781.	
11	Total support. Add lines 7 through 10						1159869.
	Gross receipts from related activities,	,	,			12	23,817.
13	First 5 years. If the Form 990 is for the	-	rst, second, third, t	fourth, or fifth tax y	ear as a section 5/	01(c)(3)	
800	organization, check this box and stor						·····
	ction C. Computation of Publi						91.24 %
	Public support percentage for 2023 (I					14	
	Public support percentage from 2022 33 1/3% support test - 2023. If the o						
108	stop here. The organization qualifies						V
h	33 1/3% support test - 2022. If the o		•			or more, check thi	
	and stop here. The organization qual						
17a	10% -facts-and-circumstances test						
	and if the organization meets the fact						
	meets the facts-and-circumstances te		-			withow the organiz	
h	10% -facts-and-circumstances test	-	-	• • • •	-		
~		0					, • •.
	more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization						
18	Private foundation. If the organization						
	Schedule A (Form 990) 2023						

Schedule A			-	-	-	CHILDREN		
Part III	Support	Schedule	for Orga	nization	s De	escribed in S	ection 5	09(a)(2)

FOR LOVE OF CHILDREN, INC

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

Sec	ction A. Public Support			-			
Cale	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Gross receipts from admissions, merchandise sold or services per- formed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or bus-						
	iness under section 513						
4	Tax revenues levied for the organ- ization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities						
5	furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5						
	Amounts included on lines 1, 2, and						
	3 received from disqualified persons						
b	Amounts included on lines 2 and 3 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 Sec	Public support. (Subtract line 7c from line 6.) ction B. Total Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
9	Amounts from line 6						
	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b	Unrelated business taxable income						
	(less section 511 taxes) from businesses acquired after June 30, 1975						
c	Add lines 10a and 10b						
11	Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
	Total support. (Add lines 9, 10c, 11, and 12.)						
14	First 5 years. If the Form 990 is for the	•					·
0.1	check this box and stop here						
	ction C. Computation of Publ		-			<u>т т</u>	
	Public support percentage for 2023 (, (),	,	column (f))		15	%
	Public support percentage from 2022					16	%
	ction D. Computation of Inves					. _	
	1 0		B			17 18	<u>%</u>
18	Investment income percentage from 33 1/3% support tests - 2023. If the				o 15 is more than 9		
194	more than 33 1/3%, check this box a	-					
Ь	33 1/3% support tests - 2022. If the						∟ and
D D	line 18 is not more than 33 1/3%, che	•				•	
20	Private foundation. If the organization						
	23 12-21-23	dia not oneon a	<u></u>				A (Form 990) 2023
			16	5		Cenedule	

FOR LOVE OF CHILDREN, INC

1

2

3a

3b

3c

4a

4b

4c

5a

5b

5c

6

7

8

Yes No

Part IV | Supporting Organizations

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

Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and 3c below.
- b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- 4a Was any supported organization not organized in the United States ("foreign supported organization")? // "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.
- b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- **5a** Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes." answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes." provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? If "Yes." complete Part I of Schedule L (Form 990).
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- b Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.
- c Did a disgualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer line 10b below.
- b Did the organization have any excess business holdings in the tax year? (Use Schedule C. Form 4720, to determine whether the organization had excess business holdings.)

17

332024 12-21-23

9a 9b 9c 10a 10b

Schedule A (Form 990) 2023

orm 990) 2023	FOR	LOVE	OF	CHILDREN,	IN
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2

No

Yes No

			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and			
	11c below, the governing body of a supported organization?	11a		
b	A family member of a person described on line 11a above?	11b		
С	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide			
	detail in Part VI.	11c		
Sec	tion B. Type I Supporting Organizations			
			Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? <i>If</i> " <i>No</i> ," <i>describe in</i> Part VI <i>how the supported organization(s)</i> <i>effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported</i> <i>organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the</i>	-		
	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			

organization (s) that operated, supervised, or controlled the supported organization? If "Yes," explain in Part VI have available and the support of the su

Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting organization

Supervised	I. OF CONTROLLED	the supporting	organization.
Section C. T	ype II Supp	orting Orga	nižations

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

Section D	. All Type III	Supporting	Organizations

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

Section E. Type III Functionally Integrated Supporting Organizations

1	Check the box next to the method that the org	anization used to satisfy	the Integral Part Test durin	a the year (see instructions).
-				

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

c		The organization supported a governmental entity	Describe in Part VI how you supported a governmental entit	y (see instruction <u>s</u>	s).
---	--	--	---	-----------------------------	-----

18

- 2 Activities Test. Answer lines 2a and 2b below.
- **a** Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in **Part VI identify those supported organizations and explain** how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.
- b Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.
- **3** Parent of Supported Organizations. **Answer lines 3a and 3b below.**

a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? *If* "Yes" or "No" provide details in **Part VI.**

b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? *If "Yes," describe in Part VI the role played by the organization in this regard.*332025 12-21-23

3b | | Schedule A (Form 990) 2023

2a

2b

3a

Schedule A (Form 990) 2023

Part IV Supporting Organizations (continued)

 $15161023 \ 758050 \ 4000002-726$

3 Other gross income (see instructions) 3 4 4 Add lines 1 through 3. 5 Depreciation and depletion Portion of operating expenses paid or incurred for production or 6 7 8 (B) Current Year (A) Prior Year (optional) instructions for short tax year or assets held for part of year): 1a

collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions) 7 Other expenses (see instructions) 8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4) Section B - Minimum Asset Amount Aggregate fair market value of all non-exempt-use assets (see

a Average monthly value of securities b Average monthly cash balances 1b c Fair market value of other non-exempt-use assets 1c d Total (add lines 1a, 1b, and 1c) 1d e Discount claimed for blockage or other factors (explain in detail in Part VI): 2 Acquisition indebtedness applicable to non-exempt-use assets 2 3 3 Subtract line 2 from line 1d. Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, 4 4 see instructions). 5 Net value of non-exempt-use assets (subtract line 4 from line 3) 5 6 Multiply line 5 by 0.035. 6 7 Recoveries of prior-year distributions 7 8 Minimum Asset Amount (add line 7 to line 6) 8 Section C - Distributable Amount Current Year 1 1 Adjusted net income for prior year (from Section A, line 8, column A) 2 Enter 0.85 of line 1. 2 3 Minimum asset amount for prior year (from Section B, line 8, column A) 3 Enter greater of line 2 or line 3. 4 4 5 5 Income tax imposed in prior year 6 Distributable Amount. Subtract line 5 from line 4, unless subject to

emergency temporary reduction (see instructions)

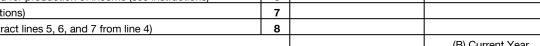
Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see 7 instructions).

19

Schedule A (Form 990) 2023

(B) Current Year

(optional)



6

2023.04030 FOR LOVE OF CHILDREN, INC 40000021

1

2

(A) Prior Year

FOR LOVE OF CHILDREN, INC

Schedule A (Form 990) 2023

Section A - Adjusted Net Income

Net short-term capital gain

Recoveries of prior-year distributions

1

1

2

5

6

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI). See instructions.

All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

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Schedule A (Form 990) 2023

3	Administrative expenses paid to accomplish exempt purpose	3	3		
4	Amounts paid to acquire exempt-use assets	4			
5	Qualified set-aside amounts (prior IRS approval required - pro		5		
6	Other distributions (<i>describe in Part VI</i>). See instructions.			6	
7	Total annual distributions. Add lines 1 through 6.			7	
8	Distributions to attentive supported organizations to which the	ne organization is responsive			
	(provide details in Part VI). See instructions.	-		8	
9	Distributable amount for 2023 from Section C, line 6			9	
10	Line 8 amount divided by line 9 amount			10	
Secti	on E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributior Pre-2023	าร	(iii) Distributable Amount for 2023
1	Distributable amount for 2023 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2023 (reason-				
	able cause required - explain in Part VI). See instructions.				
3	Excess distributions carryover, if any, to 2023				
а	From 2018				
b	From 2019				
с	From 2020				
d	From 2021				
е	From 2022				
f	Total of lines 3a through 3e				
g	Applied to underdistributions of prior years				
h	Applied to 2023 distributable amount				
i	Carryover from 2018 not applied (see instructions)				
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2023 from Section D,				
	line 7: \$				
a	Applied to underdistributions of prior years				
b	Applied to 2023 distributable amount				
C	Remainder. Subtract lines 4a and 4b from line 4.				
5	Remaining underdistributions for years prior to 2023, if				
	any. Subtract lines 3g and 4a from line 2. For result greater				
	than zero, explain in Part VI. See instructions.				
6	Remaining underdistributions for 2023. Subtract lines 3h				
	and 4b from line 1. For result greater than zero, explain in				
	Part VI. See instructions.				
7	Excess distributions carryover to 2024. Add lines 3j				
	and 4c.				
8	Breakdown of line 7:				
a	Excess from 2019				
b	Excess from 2020				
с	Excess from 2021				
d	Excess from 2022				
е	Excess from 2023				

FOR LOVE OF CHILDREN, INC Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)

1 Amounts paid to supported organizations to accomplish exempt purposes

organizations, in excess of income from activity

Amounts paid to perform activity that directly furthers exempt purposes of supported

31-1239327 Page 7

1

2

Current Year

hedule A	(Form	990)	2023	

Section D - Distributions

2

<u>hedule A (</u>	Form 990) 2023	FOR	LOVE OF	CHILDREN	I, INC		31-1239327	Page
	Part IV, Section A, line	es 1, 2, 3b, 3c, n D, lines 2 and	4b, 4c, 5a, 6 3; Part IV, S	, 9a, 9b, 9c, 11a, ection E, lines 1c,	11b, and 11c; P 2a, 2b, 3a, and	art IV, Section B, line 3b; Part V, line 1; Pa	a or 17b; Part III, line 12; es 1 and 2; Part IV, Sectior art V, Section B, line 1e; Pa itional information.	n C, art V,
	(See Instructions.)							
28 12-21-23							Schedule A (Form	

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** PUBLIC DISCLOSURE COPY **

Schedule of Contributors

Attach to Form 990, 990-EZ, or 990-PF. Go to www.irs.gov/Form990 for the latest information. OMB No. 1545-0047

mber

chequie	D
orm 990)	

Department of the Treasury Internal Revenue Service

Name of the organization		Employer identification nu
FO	R LOVE OF CHILDREN, INC	31-1239327
Organization type (check or	ne):	
Filers of:	Section:	
Form 990 or 990-EZ	X 501(c)(3) (enter number) organization	
	4947(a)(1) nonexempt charitable trust not treated as a private foundation	
	527 political organization	
Form 990-PF	501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a private foundation	
	501(c)(3) taxable private foundation	

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

General Rule

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

Special Rules

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

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

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

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

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

Name of organization

Part I

(a)

No.

1

Employer identification number

FOR LOVE OF CHILDREN, INC

31-1239327 Contributors (see instructions). Use duplicate copies of Part I if additional space is needed. (b) (c) (d) Name, address, and ZIP + 4 **Total contributions** Type of contribution X Person Payroll 12,000. Noncash \$

			(Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2		\$10,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3		\$ <u>10,000.</u>	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4_		\$5,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5		\$ <u>7,000.</u>	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u> </u>		\$ <u>5,000.</u>	Person X Payroll Noncash (Complete Part II for noncash contributions.) Schedule B (Form 990) (2023)

Schedule B (Form 990) (2023)

 $15161023 \ 758050 \ 4000002-726$

2023.04030 FOR LOVE OF CHILDREN, INC 40000021

24

Name of organization

Employer identification number

31-1239327

FOR LOVE OF CHILDREN, INC

Part I	Contributors (see instructions). Use duplicate copies of Part I if addition	nal space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7		- \$\$5,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
8		\$\$20,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
9		- \$\$5,000•_ -	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		- _ \$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		- _ \$	Person Payroll On Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		- _ \$	Person Payroll On Noncash On Contributions.)

Schedule B (Form 990) (2023)

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25 2023.04030 FOR LOVE OF CHILDREN, INC 40000021

 $15161023 \ 758050 \ 4000002-726$

Name of organization

Page 3

Employer identification number

31-1239327

FOR LOVE OF CHILDREN, INC

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

(a)		I if additional space is needed.	
No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		_	
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		_	
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		_	
		\$	

26

 $15161023 \ 758050 \ 4000002-726$

FOR LOVE OF CHILDREN, INC 31–12393 Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,0 from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info. once.) \$	000 for the year
Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,4 from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part II, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info. once.) \$Use duplicate copies of Part III if additional space is needed. (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift i	
(a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift i Part I	s held
(e) Transfer of gift	
Transferee's name, address, and ZIP + 4 Relationship of transferor to transfere	e
(a) No. (b) Purpose of gift (c) Use of gift (d) Description of how gift i Part I (c) Use of gift (c) Use of gift (c) Use of gift	s held
(e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transfere	e
(a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift i	s held
(e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transfere	e
(a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift i	sheld
Part I (c) Dise of gift (d) Description of now gift	
(e) Transfer of gift	
Transferee's name, address, and ZIP + 4 Relationship of transferor to transfere	•

Schedule B (Form 990) (2023)

Page 4

 $15161023 \ 758050 \ 4000002-726$

Schedule B (Form 990) (2023)

SCHEDULE I (rom 930) Developmental Financial Statements Complete the organization answered "Vis" or 100 950, Developmental the organization information. The organization for the organization information and the latest information. The organization Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete the organization answered 'Vis' on Form 900, Part IV, line 6. Total number at end of year (a) Donor advised funds (b) Funds and other accounts (c) Perturb Complete the organization and the accounts Accounts and the organization answered 'Vis' on Form 900, Part IV, line 6. Total number at end of year (c) Donor advised funds (c) Perturb Complete the organization and the accounts (c) Perturb Complete the benefit of the organization and the accounts Accounts and the organization property, subject to the organization answered 'Vis' on Form 900, Part IV, line 7. Perturb Complete the benefit of the organization and the accounts (c) Preservation accounts (c) Personal and the accounts (c) Preservation accounts			, <u> </u>				E 00.47
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Internet Network Go to wow/ins.gov/Form@00 for instructions and the latest information. Insection Name of the organization FOR LOVE OF CHILDREN, INC Employer identification number of a complete if the organization answered "Yes" on Form 980, Part IV, line 6. (a) Denor advised funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 980, Part IV, line 6. (a) Denor advised funds (b) Funds and other accounts. Denor advised funds D	•		Part IV, line 6, 7, 8, 9, 10	, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.			
FOR LOVE 1-1239327 Part1 Organizations Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 980, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts 1 Total number at end of year (a) Donor advised funds (b) Funds and other accounts 2 Aggregate value of contributions to (kining year) (a) Donor advised funds (b) Funds and other accounts 3 Aggregate value at end of year (a) Donor advised funds (b) Funds and other accounts 4 Aggregate value at end of year (b) Getter aggregate value of control on advisor and donor advisor writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible orivate benefit of the donor or donor advisor, or for any other purpose conferring impermissible orivate benefit of the donor or advisor or for any other purpose conferring impermissible orivate benefit of the donor or advisor, or for any other purpose conferring impermissible orivate benefit of the donor or advisor. (b) Teservation of a hotorical important india area 1 Purpose(b) conservation assements the oty the improvement of a hotorical important india area (b) Teservation assement in a tarea 2 Complete inter organization free advisor in advisor in advisor in the form of a conservation assements (b) Teservation of a hotorical trunobaccount							
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1 Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of a historically important land area Preservation of land for public use (for example, recreation or education) Preservation of a certified historic structure Preservation of open space Preservation of a conservation easement on the last 2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last 3 Total arcage restricted by conservation easements 2a 4 Held at the End of the Tax Year 2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easements 5 Total arcage restricted by conservation easements 2a 4 Number of conservation easements included on line 2c acquired after July 25, 2006, and not 2d 3 Number of states where property subject to conservation easement is located			vate benefit?			Yes	No
Preservation of land for public use (for example, recreation or education) Preservation of a historically important land area Protection of natural habitat Preservation of going space 2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement tay of the tax year. Implete the tax year. a Total number of conservation easements 2a b Total acreage restricted by conservation easements 2b c Number of conservation easements included on line 2a cacquired after July 25, 2006, and not on a historic structure listed in the National Register 2a 3 Number of conservation easements included on line 2a cacquired after July 25, 2006, and not on a historic structure listed in the National Register 2d 4 Number of states where property subject to conservation easements included on line 2a 2d 5 Does the organization have a written policy regarcing the periodic monitoring, inspection, handling of violations, and enforcing conservation easements during the year 6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 9 In part XIII, describe how the organization neports conservation easements. Pees in No 9 In Part XIII, describe how the organization reports conservation easements. Pees in No 9	Pa				, line 7.		
Protection of natural habitat Preservation of a certified historic structure Preservation of open space 2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. a Total number of conservation easements b Total accage restricted by conservation easements a Total number of conservation easements included on line 2c acquired after July 25, 2006, and not o an historic structure listed in the National Register 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year 4 Number of states where property subject to conservation easements is holds? 5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? 6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 8 Does each conservation easements: 9 In Part XIII, describe how the organization reports conservation easements. Part III Organization elected, as permitted under FASB ASC 956, not to report in its revenue and expense 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 XIII the text of the forothet to tis financial statements and balance sheet works of art, historical	1		, ,	(11)/			
Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. a Total number of conservation easements							
Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Total number of conservation easements in a certified historic structure included on line 2a Number of conservation easements included on line 2 cacquired after July 25, 2006, and not on a historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year year work of conservation easements included on line 24 Number of states where property subject to conservation easement is located Number of states where property subject to conservation easement is located Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements in locate Does each conservation easement science, handling of violations, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Does each conservation easement reported on line 2d above satisfy the requirements of section 170(h)(4)(B)(i) and section easements. Does each conservation easements. Does each conservatin easement reported on form 90, Part N. line 8. If the organiza				Preservation of a cert	itted historic	structure	
day of the tax year. Held at the End of the Tax Year. a Total number of conservation easements Za b Total acreage restricted by conservation easements Za c Number of conservation easements on a certified historic structure included on line 2a Za d Number of conservation easements included on line 2a caquired after July 25, 2006, and not on a historic structure listed in the National Register Za 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year Za 4 Number of states where property subject to conservation easement is located	2		• •	ied conservation contribution in the form of a co	nservation e	easement on the	last
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LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. 332051 09-28-23 28

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Schedule D (Form 990) 2023

Sche		E OF CHILD						31-12			age 2
Par	t III Organizations Maintaining C	ollections of Ar	t, Histo	orical Tre	easures, or	Other	[.] Similar	Assets	(contin	ued)	
3	Using the organization's acquisition, accessi	on, and other record	ls, check	any of the	following that	make si	gnificant u	ise of its			
	collection items (check all that apply).										
а	Public exhibition	c	1 🗌 L	oan or exe	change progra	m					
b	Scholarly research	e	• 🗌 (Other							
с	Preservation for future generations										
4	Provide a description of the organization's co	ollections and explair	n how the	ey further t	he organizatior	n's exen	npt purpos	se in Part	XIII.		
5	During the year, did the organization solicit o	r receive donations of	of art, his	torical trea	sures, or other	r similar	assets		_		_
	to be sold to raise funds rather than to be ma								Yes		No
Par	t IV Escrow and Custodial Arran		ete if the c	organizatio	n answered "Y	'es" on F	Form 990,	Part IV, li	ne 9, or		
	reported an amount on Form 990, Pa	rt X, line 21.									
1 a	Is the organization an agent, trustee, custodi							_	_		-
	on Form 990, Part X?							L	Yes		No
b	If "Yes," explain the arrangement in Part XIII	and complete the fol	llowing ta	able:							
									Amount		
С	Beginning balance										
d	Additions during the year										
е	Distributions during the year										
f	Ending balance								7.,		.
	Did the organization include an amount on Fo						ty?		Yes		No
Par	If "Yes," explain the arrangement in Part XIII. t V Endowment Funds Complete if								<u></u>		
1 41		(a) Current year		rior year	(c) Two years		(d) Three y	ears hack	(a) Four	Veare	hack
4	Designing of year balance	(a) Guirent year		loi yeai		5 DUCK	(u) miles y		(C) 1 Out	yours	buok
1a ⊾	Beginning of year balance										
d o	Contributions										
C d	Net investment earnings, gains, and losses										
u	Grants or scholarships										
е	Other expenditures for facilities										
f	and programs										
	Administrative expenses End of year balance										
g 2	End of year balance Provide the estimated percentage of the curr	L	l o (lino 1a	column (s)) held as:						
2	Board designated or quasi-endowment		e (iine rg. %								
h	Permanent endowment	%									
c		%									
Ū	The percentages on lines 2a, 2b, and 2c sho	•									
3a	Are there endowment funds not in the posse		ation that	are held a	nd administere	ed for the	e				
	organization by:						-		ſ	Yes	No
	5								3a(i)		
	(i) Unrelated organizations? 3a(i) (ii) Related organizations? 3a(ii)										
b	If "Yes" on line 3a(ii), are the related organiza								3b		
4	Describe in Part XIII the intended uses of the										
Par	t VI Land, Buildings, and Equipm	ent									
	Complete if the organization answere	d "Yes" on Form 990	D, Part IV,	line 11a. S	See Form 990,	Part X,	line 10.				
	Description of property	(a) Cost or o basis (investr		.,	t or other (other)	• •	ccumulate preciation	d	(d) Bool	k value	e
1a	Land										
b	Buildings				9,551.		3,02	24.	(5,52	27.
с	Leasehold improvements										
	Equipment				27,420.		15,19			2,22	
	Other				51,901.		46,38			5,51	
Tota	. Add lines 1a through 1e. (Column (d) must e	qual Form 990, Part	<u>X, line 10</u>	<u>)c, column</u>	<u>н (В))</u>				124	1,20	65.

Schedule D (Form 990) 2023

332052 09-28-23

	(Form 990) 2023	-	-	-	CHILDREN,	INC	
Part VII	Investments -	 Other Se 	curities				

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

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

Part VIII Investments - Program Related.

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

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

Part IX Other Assets

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

(a) Description	(b) Book value				
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
Total. (Column (b) must equal Form 990, Part X, line 15, col. (B))					
Part X Other Liabilities					

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

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

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

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

Schedule D (Form 990) 2023

332053 09-28-23

	dule D (Form 990) 2023 FOR LOVE OF CHILDREN, IN		31-1239327 Page 4
Par	t XI Reconciliation of Revenue per Audited Financial State	ements With Reven	ue per Return
	Complete if the organization answered "Yes" on Form 990, Part IV, line	e 12a.	
1	Total revenue, gains, and other support per audited financial statements		
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
а	Net unrealized gains (losses) on investments	2a	
b	Donated services and use of facilities	2b	
С	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII.)	2d	
е	Add lines 2a through 2d		
3	Subtract line 2e from line 1		
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	
С	Add lines 4a and 4b		
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		
Pa	rt XII Reconciliation of Expenses per Audited Financial Sta		nses per Return
	Complete if the organization answered "Yes" on Form 990, Part IV, line		
1	Total expenses and losses per audited financial statements		1
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
а	Donated services and use of facilities	<u>2</u> a	
b	Prior year adjustments	<u>2</u> b	
С	Other losses		
d	Other (Describe in Part XIII.)		
е	.		
3	Subtract line 2e from line 1		
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b		
b	Other (Describe in Part XIII.)	4b	
С	Add lines 4a and 4b		
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18	.)	
Pa	rt XIII Supplemental Information		

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

332054 09-28-23

SCHEDULE O (Form 990)

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

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



31-1239327

FOR LOVE OF CHILDREN, INC

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

ENRICHMENT, EDUCATIONAL, AND ADVOCACY SUPPORT FOR NEGLECTED, ABUSED,

FOSTER, AND UNDERPRIVILEGED CHILDREN FROM NEWBORN TO 18 YEARS OF AGE

THROUGHOUT THE GREATER DAYTON, OHIO AREA.

PART III, LINE 4D, OTHER PROGRAM SERVICES: FORM 990,

OTHER PROGRAM SERVICES INCLUDE THE WEIMER FAMILY FUNDS, LONGITUDINAL

STUDY, THE BOUTIQUE, MUSIC FOR THE AGES, AND BOONSHOFT SHRINERS RONALD

MCDONALD MENTORING PROGRAM. EACH OF THESE PROGRAMS PROVIDE SERVICES

FOR GREATER DAYTON OHIO'S NEGLECTED, ABUSED, FOSTER, AND

UNDERPRIVILEGED YOUTH.

EXPENSES \$ 43,378. INCLUDING GRANTS OF \$ 0. REVENUE \$ 31,598.

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

ELIZABETH MANN AND DOUG MANN ARE MARRIED.

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

THE PRESIDENT AND TREASURER REVIEW THE FORM 990. THE FINAL FORM 990 IS

32

AVAILABLE TO ANY BOARD MEMBER WHO REQUESTS IT.

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

AVAILABLE UPON REQUEST.

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. 332211 11-14-23

Schedule O (Form 990) 2023

LHA

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