Return of Organization Exempt From Income Tax

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

Open to Public Inspection

OMB No. 1545-0047

Internal Revenue Service

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

▶ Information about Form 990 and its instructions is at www.irs.gov/form990.

<u>A F</u>	or the	2016 calendar year, or tax year beginning and	ending		
В	heck if	C Name of organization		D Employer identific	cation number
	Addres	VOICES FOR ALABAMA'S CHILDREN]		
	Name change	Doing business as		58-2	020321
	Initial	,	Room/suite	E Telephone number	
	Final return/ termin	P.O. BOX 4576			213-2410
	ated	City or town, state or province, country, and ZIP or foreign postal code		G Gross receipts \$	743,501.
느	return	MONIGOMERI, AL 30103	NO MYT	H(a) Is this a group re	
	Application pending		KTH,		? Yes X No
		SAME AS C ABOVE	1 503	7	cluded? Yes No
		empt status: X 501(c)(3)	or 527	-1	list. (see instructions)
		e: WWW.ALAVOICES.ORG organization: X Corporation Trust Association Other	I Voor	H(c) Group exemptio	n number ► 1 State of legal domicile: AL
		organization: X Corporation Trust Association Other ► Summary	L Year	or formation: 1992 A	A State of legal domicile; ALI
F		Briefly describe the organization's mission or most significant activities: OUR 1	MTSSTO	N TS TO ENSI	ਸੂਸ ਅਸ
ë	1 ,	WELL-BEING OF ALABAMA'S CHILDREN THROUGH	RESEAR	RCH PUBLIC	AWARENESS
Governance		Check this box if the organization discontinued its operations or dispose			
/err				3	15
ő	l	Number of independent voting members of the governing body (Part VI, line 1b)			15
ون در	l .	Total number of individuals employed in calendar year 2016 (Part V, line 2a)			7
Ţį.	l .	Total number of volunteers (estimate if necessary)			15
Activities &		Total unrelated business revenue from Part VIII, column (C), line 12			0.
Ă		Net unrelated business taxable income from Form 990-T, line 34			0.
				Prior Year	Current Year
•	8	Contributions and grants (Part VIII, line 1h)		776,309.	734,133.
Revenue	9	Program service revenue (Part VIII, line 2g)		6,060.	7,930.
eve	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		186.	137.
Œ	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		5,475.	1,301.
	12	Total revenue · add lines 8 through 11 (must equal Part VIII, column (A), line 12)		788,030.	743,501.
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		0.	0.
		Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.
S	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		284,547.	320,846.
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)		0. 	0.
ğ	b	Total fundraising expenses (Part IX, column (D), line 25)	<u> </u>	261,177.	341,676.
ш	1 ''	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		545,724.	662,522.
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	······	242,306.	80,979.
	19	Revenue less expenses. Subtract line 18 from line 12		eginning of Current Year	End of Year
Assets or		Total consts (Port V. line 16)		388,593.	490,507.
SSE	20	Total assets (Part X, line 16) Total liabilities (Part X, line 26)		32,015.	52,950.
Net /	21 22	Net assets or fund balances. Subtract line 21 from line 20	·····	356,578.	437,557.
		Signature Block			
		Ities of perjury, I declare that I have examined this return, including accompanying schedules	s and statem	ents, and to the best of my	knowledge and belief, it is
		t, and complete. Declaration of preparer (other than officer) is based on all information of wh			
Sig	n	Signature of officer		Date	
Her		MELANIE R. BRIDGEFORTH, MSW, EXECUTIVE	DIRE	CTOR	
_		Type or print name and title		Date: E	- I prin
		Print/Type preparer's name Preparer's signature		Date Check C	PTIN
Paid		CHRIS NEUENSCHWANDER CHRIS NEUENSCHWA	ANDER ()8/08/17 self-employ	
	parer	Firm's name JACKSON THORNTON & CO., PC		Firm's EIN	63-1035228
Use	Only	Firm's address PO BOX 96		DL	1_831_7660
_		MONTGOMERY, AL 36101-0096		Phone no. 3 3	4-834-7660 X Yes No
<u>Ma</u>	y the II	RS discuss this return with the preparer shown above? (see instructions)			X Yes No

Form 990 (2016)

Form 990 (2016) VOICES FOR ALABAMA'S CHILDREN
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_	<u>X</u> _	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	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 Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	_5_		<u> </u>
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_		<u>X</u>
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		<u> </u>
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete	_		37
	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?			7.7
	If "Yes," complete Schedule D, Part IV	9		<u> </u>
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			1 27
	endowments, or 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, VIII, IX, or X			
	as applicable.		340 J. F.	
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,		х	
	Part VI	11a	Λ	
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total	445		х
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total	11c		х
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	116		
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	11d		х
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11e	х	 -
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	116		\vdash
f	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	х	
40-	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	 ''''		
128	•	12a	х	
	Schedule D, Parts XI and XII	- -		
D	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		Х
12	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		х
13 14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		х
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	<u> </u>	X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to		i	
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		Х
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	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	000	(2016)

Page 4

			Yes	
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	'		
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No", go to line 25a	24a		X
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		ļ
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and	1		
	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, 6, or 22 for receivables from or payables to any current or	İ		
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes,"			۱
	complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			ļ
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity 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 Schedule L, Part IV		i Na h	
	instructions for applicable filing thresholds, conditions, and exceptions):			100m
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a	_	X
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
C	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			77
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			X
	contributions? If "Yes," complete Schedule M	30	-	<u> </u>
31	Did the organization liquidate, terminate, or dissolve and cease operations?			х
	If "Yes," complete Schedule N, Part I	31	-	 ^
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			x
	Schedule N, Part II	32	 	<u>^</u>
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			X
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		+^
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			х
	Part V, line 1	34		X
35a		35a	┢	+
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	art		1
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b	\vdash	+-
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	000		x
	If "Yes," complete Schedule R, Part V, line 2	36	-	+^
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	07		x
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37	\vdash	A
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	38	X	
	Note. All Form 990 filers are required to complete Schedule O			(2016

VOICES FOR ALABAMA'S CHILDREN Statements Regarding Other IRS Filings and Tax Compliance Form 990 (2016) **Part V** Sta

tenter the number reported in Box 3 of Form 1096. Enter O: If not applicable 19 14 be Enter the number of Forms W262 included in line 1a. Enter O: If not applicable 10 0 coll the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gembling) winnings to prize winners? 2a Enter the number of onlopicess apported on Form W3, Transmitted of Wage and Tax Statements, field for the calendary year anding with or within the year covered by this return 5 bit at least one is reported on line 2a, cild the organization file all required federal employment tax returns? 5 bit at least one is reported on line 2a, cild the organization file all required federal employment tax returns? 5 bit at least one is reported on line 2a, cild the organization file all required federal employment tax returns? 5 bit of the organization have unrelated business gross income of \$1,000 or more during the year? 5 coll the organization have unrelated business gross income of \$1,000 or more during the year? 5 coll three, and 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 accounts? 5 de intructions for filing requirements for FincEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) 5 was the organization apray to a prohibited tax shelter transaction at any time during the tax year? 5 de Does the organization shell were have an interest in, or a prohibited tax shelter transaction? 5 de Does the organization shelt were not tax deductible a charitatele contributions? 5 de Jif Yes, if oil the organization intait is was or is a party to a prohibited tax shelter transaction? 5 de Jif Yes, if oil the organization intait was or is a party to a prohibited tax shelter transaction? 5 de Jif Yes, if oil the organization shelt were not tax deductible a charitatele contributions? 6 de Jose the organization shelt were deviced to the second of the		Check if Schedule O contains a response or note to any line in this Part V					乢			
be Enter the number of Forms W2G included in line 1a. Enter-0-if not applicable Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gamining (gambling) winnings to prize witheres? 2a. Enter the number of employees reported on Form W3, Transmittal of Wage and Tax Statements, filed for the celendery ever ending with or within the year covered by this return 7 bif at least one is reported on line 2a, did the organization file all required federal employment tax returns? Abole. If the user of lines 1 and 2a is greater than 250, you may be required to e-file (see instructions) 3b. Did the organization have unrelated business gross income of \$1,000 or required to e-file (see instructions) 3b. If Y'es, 1 as if filed a Form 950 T for this year? If Yao, 1 file as 50, provide an explanation in Schedule O 4c. 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)? 4c. Yes, "enter the name of the foreign country. In Statements of Financial accounts (FBAR). 5c. Was the organization and party to a prohibited tax shelter transaction at any time during the tax year? 5c. Was the organization and party to a prohibited tax shelter transaction at any time during the tax year? 5c. Was the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductibles of Erm 8886-17 6c. Did the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductibles of softmake protections of the solicity of the organization receive a payment in excess of \$5 made party as a contribution of a quality of goods and services provided? 6c. If Yes, "Indicate the number of Forms 8262 filed during the year 7 bif the organization	_	Falsada a combana da Barro de Falsado Falsado Maria de Maria	۱.	14	STAR	Yes	No			
Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (26 ambibling) winnings to prize winners? (26 Enter the number of employees reported on Form W3, Transmittal of Wege and Tax Statements, filled for the calendar year ending with or within the year covered by this return (27 b) If at least one is reported on line 28, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to 6-rife (see instructions) 38 b) If wes, "has it filed a Form 990-T for this year? If "No," to file 3b, provide an explanation in Schedule O 40 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," be 50 See instructions for filling requirements for FiniCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). 51 Wes, "enter the name of the foreign country," be 52 See instructions for filling requirements for FiniCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). 53 Was the organization a party to a prohibitiod tax shelter transaction at any time during the tax year? 54 If "Yes," to line 5a or 5b, did the organization file Form 888617? 55 Was the organization and year organization file Form 888617? 56 Dess the organization have were not tax deductible as charitable contributions? 57 If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 58 If "Yes," did the organization network aphyment in occase of 3f5 made party sa contributions and party for poots and services provided? 59 If "Yes," did the organization more of the value of the goods or services provided? 50 Id the organization existed expansion of the value of the goods or services provided? 50 Id the organization sell, exchange, or otherwise dispose of tangible personal property for which it was req		•				20000				
(gambling) winnings to prize winners? 26 Enter the number of employees reported on Form W.S., Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return 5 It at least one is reported on line 2a, did the organization file all required federal employment tax returns? 5 It was made and a large start than 250, you may be required to e-file (see instructions) 5 It was in a start filed a Form 950 Tor fire year? 5 If Yeas, "Isa if filed a Form 950 Tor fire year?" 5 If Yeas, "Isa if filed a Form 950 Tor fire year?" 5 If Yeas, "Isa if filed a Form 950 Tor fire year?" 5 If Yeas, "Isa if filed a Form 950 Tor fire year?" 5 If Yeas, "Isa if filed a Form 950 Tor fire year?" 5 If Yeas, "Isa if filed a Form 950 Tor fire year?" 5 If Yeas, "Isa if filed a Form 950 Tor fire year?" 5 If Yeas, "Isa if filed a Form 950 Tor fire year?" 5 If Yeas, "Isa if filed a Form 950 Tor fire year?" 5 If Yeas, "Isa if filed a Form 950 Tor fire year?" 5 If Yeas, "Isa if year year year year year year year year		cities the fidilibes of Forms with the Fa. Little of Friot applicable								
2a Enter the number of employees reported on Form W-3, Transmittal of Wege and Tax Statements, field for the catendar year ending with or within the year covered by this transmittance is reported on fine 2a, all the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) 3a X If "Yes," has it filed a Form 990-T for this year? If "No," to fine 3b, provide an explanation in Schedule O 3b If the organization have unrelated business gross income of \$1,000 or more during the year? 3a A 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. ► If "Yes," the if filed a Form 990-T for this year? If "No," to fine 3b, provide an explanation in Schedule O 3b A tany time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in 5 foreign country. ► 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? 5b Was the organization appropriate party to a prohibited tax shelter transaction? 5c If "Yes," to line 5a or 5b, did the organization file Form 88861? 6c If "Yes," to line 5a or 5b, did the organization file Form 88861? 6c If "Yes," to line 5a or 5b, did the organization file Form 88861? 6c If "Yes," to line 5a or 5b, did the organization file form 88861? 6d Does the organization broad with were yesolicitation an exposes statement that such contributions or gifts were not tax deductible? 6d The Yes," did the organization receive a pyment in excess of 3f made party sa contributions and party for goods and services provided? 7c If "Yes," did the organization explanation file form 8282 filed during the year 1d If "Yes," did the organization e	С			ole gaming	4 -	V	4.5.0			
filled for the calendary year ending with or within the year covered by this return If all east one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to a-file (see instructions) 3a	٥-		i	Ι	10	A	Section 1997			
bill fall least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e_file (see instructions) 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? 3a Life Yes, has it filed a Form 990 for this year? If YNo, 'to line 3b, provide an explanation in Schedule O 3b Life Yes, has it filed a Form 990 for this year? If YNo, 'to line 3b, provide an explanation in Schedule O 3b Life Yes, 'to line for foreign country (such as a bank account, securities account, or other financial account)? 4a Lary time 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? 5b Life any taxibility party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5b Life Yes, 'to line 5a or 5b, did the organization file Form 8886-17? 6c Life Yes, 'to line 5a or 5b, did the organization file Form 8886-17? 6c Life Yes, 'to line organization read and year and gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions? 6c Life Yes, 'to lide the organization notify the donor of the value of the goods or services provided to the payor? 6c Life Yes, 'to lide the organization notify the donor of the value of the goods or services provided? 7c Life Horgenization receive a payment in excess of \$75 made partly as a contribution of undersord year form 8292? 7d If 'Yes,' inclinate the number of Forms 8282 filed during the year 6d If the organization received a contribution of undersord year form \$200 or services provided? 7d Life the organization received a contribution of undersord year form \$200 or services provided? 7d Life the organizat	2a		000	7						
Note. If the sum of lines 1a and 2a is greater than 250, you may be required to <i>g-file</i> (see instructions) 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? 3b If "Yes", 1st at filed a Form 990 Ff for this year? *I* "No," to line 3b, provide an explanation in Schedule O 3b If "Yes", and it filed a Form 990 Ff for this year? *I* "No," to line 3b, provide an explanation in Schedule O 3b If "Yes," enter the name of the foreign country. ▶ 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). See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). See Was 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? See If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? See If "Yes," did the organization receive a payment in excess of \$75 made parily as a contribution and parily for goods and services provided to the payor? To Paint in the organization receive a payment in excess of \$75 made parily as a contribution and parily for goods and services provided to the payor? To Did the organization receive a payment in excess of \$75 made parily as a contribution and parily for goods and services provided to the payor? To Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? If If Yes, "did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefi	L	•	$\overline{}$	l	25	x	3			
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c Enter the amount of reserves on hand	-		13b							
14a Did the organization receive any payments for indoor tanning services during the tax year?	c		13c				* 1 di			
					14a		X			
b II fes, has it filed a Form 720 to report these payments 1 // No. Drovide all explanation in Schedule V		If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedu.	le O .		14b					

VOICES FOR ALABAMA'S CHILDREN 58-2020321 Form 990 (2016) Part VI | Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. X Check if Schedule O contains a response or note to any line in this Part VI Section A. Governing Body and Management No 15 1a Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O. 15 b Enter the number of voting members included in line 1a, above, who are independent 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other X 2 officer, director, trustee, or key employee? Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person? X Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? Did the organization become aware during the year of a significant diversion of the organization's assets? 5 X 6 Did the organization have members or stockholders? 6 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or X more members of the governing body? b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: 8a a The governing body? X b Each committee with authority to act on behalf of the governing body? 8b Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the X organization's mailing address? If "Yes," provide the names and addresses in Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes No X 10a Did the organization have local chapters, branches, or affiliates? b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10b 11a X 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? b Describe in Schedule O the process, if any, used by the organization to review this Form 990. X 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 12a X b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes." describe X 12c in Schedule O how this was done X 13 Did the organization have a written whistleblower policy? 13 X Did the organization have a written document retention and destruction policy? 14 14 Did the process for determining compensation of the following persons include a review and approval by independent

	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	Х	
	Other officers or key employees of the organization	15b		X
_	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
	taxable entity during the year?	16a		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation			Education of
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's		A CONTROL OF	
	exempt status with respect to such arrangements?	16b_		
Sec	ction 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 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) at	/ailable)	

statements available to the public during the tax year.

State the name, address, and telephone number of the person who possesses the organization's books and records:

THE ORGANIZATION - 334-213-2410

P.O. BOX 4576, MONTGOMERY, AL 36103

Other (explain in Schedule O)

X Upon request

Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial

for public inspection. Indicate how you made these available. Check all that apply.

Another's website

X Own website

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 instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

Check this box if neither the organization		orga	niza			pen	sate			(F)
(A)	(B)	i			C) ition	1		(D)	(E)	(F)
Name and Title	Average	(do	Position (do not check more than one box, unless person is both an		Reportable	Reportable	Estimated amount of			
	hours per week					s both r/trust		compensation from	compensation from related	other
	(list any	ī						the	organizations	compensation
	hours for	direc				, l		organization	(W-2/1099-MISC)	from the
	related	ee or	stee			susate		(W-2/1099-MISC)		organization
	organizations	Individual trustee or director	Institutional trustee		ako	Highest compensated employee		İ		and related
	below	vidua	iĝ	<u> </u>	emp	hest c	Former			organizations
	line)	Ē	last	Officer	Ř	e Hig	For			
(1) GWEN HALL	0.00							_		
PRESIDENT		X		X	L			0.	0.	0.
(2) MICHAEL LYNCH	0.00								_	_
VICE PRESIDENT		X		X				0.	0.	0.
(3) JEREMY ARTHUR	0.00				l					_
TREASURER		Х		X				0.	0.	0.
(4) NANCY YOUNG FORTNER	0.00									
SECRETARY		X		X				0.	0.	0.
(5) V. ELLEN JACKSON	0.00									
IMMEDEDIATE PAST PRESIDENT		X						0.	0.	0.
(6) DR. B. JOYCE STALLWORTH	0.00									
BOARD MEMBER		X						0.	0.	0.
(7) QUENTIN P. RIGGINS	0.00						ĺ			_
BOARD MEMBER		X		<u></u>	乚	L	L	0.	0.	0.
(8) PENNEY P. HARTLINE	0.00			ļ	1				_	_
BOARD MEMBER		X	<u> </u>		<u> </u>			0.	0.	0.
(9) JUDD A. HARWOOD	0.00									_
BOARD MEMBER		X	<u> </u>	_	┖		ļ	0.	0.	0.
(10) ANITRA BELLE HENDERSON	0.00									
BOARD MEMBER		X		L	<u> </u>	<u> </u>		0.	0.	0.
(11) DEAK RUSHTON	0.00	ا		1			1			
BOARD MEMBER		X	_	<u> </u>	╄		ļ	0.	0.	0.
(12) NATHAN A. RYAN	0.00	 			ŀ					١ ,
BOARD MEMBER		X	┞	▙	ــ	ـ	⊢	0.	0.	0.
(13) JOANNE SCHRANTZ	0.00	┨	1		Ì	l	l			1
BOARD MEMBER	0.00	X	-	╀	╄	-	┝	0.	0.	0.
(14) MICHON TRENT	0.00	┨		1						_
BOARD MEMBER		X	╀	╀	╀	╁	┝	0.	0.	0.
(15) CARLTON WOOD, III	0.00	٠,	1					0.	0.	0.
BOARD MEMBER	40.00	X	╄	┼-	┢	╁	⊢	0.	0.	· · ·
(16) MELANIE R BRIDGEFORTH	40.00	┨		x			ĺ	96,584.	0.	7,767.
EXECUTIVE DIRECTOR		+	╁	^	╁	+-	┢	30,304.	1	,,,,,,,
		1					1			
									<u> </u>	000

Part VII Section A. Officers, Directors, Trus		oloy	ees,			ghes	st C	ompensated Employee			-
(A)	(B)			•	C)			(D)	(E)		(F)
Name and title	Average Position (do not check more than one							Reportable	Reportable		Estimated
	hours per box, unless person is both an officer and a director/trustee)						n an	compensation	compensation	·	amount of
	(list any	-				T	<u> </u>	from the	from related		other
	hours for	Individual trustee or director				Ļ			organizations (W-2/1099-MIS(ompensation from the
	related	9	製			Safe		(W-2/1099-MISC)	(** 2) 1000 11110	, ,	organization
	organizations	trust	al tru		<u>ag</u>	ed EL		(and related
	below	igna	Institutional trustee	نة	뼕	estc	Ę			0	organizations
	line)	텰	Insti	Officer	Key	Highest compensated employee	Ş				
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				<u> </u>	l	<u></u>	┖	96,584.		0.	7,767.
1b Sub-total								90,384.		0.	0.
c Total from continuation sheets to Part V								96,584.		0.	7,767.
d Total (add lines 1b and 1c)			1:-4-	<u>.</u>						<u> </u>	7,707.
2 Total number of individuals (including but	not ilmited to tr	iose	liste	a ac	OOVE	9) WI	10 16	eceived more than \$100	oco or reportable		C
compensation from the organization											Yes No
3 Did the organization list any former office	r director or tr	ieto	a ka	w or	nnlo	\\\DD	or	highest compensated as	mnlovee on	(247) 27 (247) 27 (247) (37)	
										4	3 X
line 1a? If "Yes," complete Schedule J for 4 For any individual listed on line 1a, is the s										··· 🗐	
4 For any individual listed on line 1a, is the sand related organizations greater than \$15											4 X
5 Did any person listed on line 1a receive or										F.027	
rendered to the organization? If "Yes." col											5 X
Section B. Independent Contractors	nolete Gcheoor	G U .	UI_S	7	U/U/A				<u> </u>	-	
Complete this table for your five highest complete the your five highest	ompensated in	depe	ende	nt c	ontr	acto	rs th	hat received more than S	\$100,000 of comp	ensatio	n from
the organization. Report compensation for											
(A)								(B)			(C)
Name and busines	s address	N	ON:	E				Description of	services	Con	npensation
								<u> </u>			
								L		7.357.287	in in the second second
2 Total number of independent contractors		ot li	mite	d to			sted	I above) who received m	ore than	e saur safræ	
\$100,000 of compensation from the organ	nization -					0			<u> </u>		orm 990 (2016
										1.0	von 2520U /2011 F

58-2020321

		Check if Schedule O conta	ains a response	or note to any lin	e in this Part VIII		***************************************	
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
0 0	1 2	Federated campaigns	1a	No. medically (fig. fig.)		Control of the Contro		
Contributions, Gifts, Grants and Other Similar Amounts	b	Membership dues		5,635.		Strategies (Control of the Control o		and the second s
	c	Fundraising events	······	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
	d	Related organizations	·····					
	e	Government grants (contribution	·····	87,094.				
	f	All other contributions, gifts, grant						
		similar amounts not included abov		641,404.	Manufacture Communication Comm	The second secon		
Ēģ	g	Noncash contributions included in lines 1	a-1f: \$					
88	h	Total. Add lines 1a-1f			734,133.		L.P. 1944	
				Business Code				
	2 a	PROGRAM SERVICE	REVENU	511130	7,930.	7,930.		
Program Service Revenue	b							
Sal	С							
E 3	d							
<u>6</u>	е							
-	f	All other program service rever			7 020	Santa and the sa	THE LONG CONTRACTOR	g y nemicht nebei Inicol
		Total, Add lines 2a-2f			7,930.	The second secon		
ŀ	3	Investment income (including of			137.			137.
-		other similar amounts)			137.			137.
	4	Income from investment of tax						
	5	Royalties	(i) Real	(ii) Personal	Marine Ma	machines (Co.	The second secon	10 (10 (10 (10 (10 (10 (10 (10 (10 (10 (
	6 a	Gross rents	() Neai	(II) Fersonal	ACTION AC	The second secon	And the second s	A control of the cont
ŀ	o a b							
		6 • • • • • • • • • • • • • • • • • • •						
1		Net rental income or (loss)		>				
- 1		Gross amount from sales of	(i) Securities	(ii) Other				A Committee of the Comm
		assets other than inventory					The second secon	The second secon
l	b	Less: cost or other basis						
ŀ		and sales expenses						National Action of the Control of th
i	c	Gain or (loss)		<u> </u>				A Constitution of the Cons
	d	Net gain or (loss)		<u></u>	Likewigen is and a second of the second	The first transfer of the first transfer of	Edward Arra Catagon and an or	y the color of the color of the color of the color
او	8 a	Gross income from fundraising	g events (not			Fig. 19 Control Contro		A Company of the Comp
Other Revenu		including \$	of				뭐이가 한글흑살	
<u>§</u>		contributions reported on line	-					
ē		Part IV, line 18						
됩		Less: direct expenses		` <u> </u>		Section and the section of the secti	YX	to a substitution of the second
		Net income or (loss) from fund Gross income from gaming ac				The second secon	71.79.1.1	
	эa	Part IV, line 19		,				
	h	Less: direct expenses					e de la companya de la companya de la companya de la companya de la companya de la companya de la companya de La companya de la co	
		Net income or (loss) from gam						
		Gross sales of inventory, less				The second secon		
		and allowances		a			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
	b	Less: cost of goods sold		·				- 114 19 DIAGUAS [7]
	С	Net income or (loss) from sale	s of inventory	<u></u>			**************************************	
		Miscellaneous Revenu	e	Business Code				1 201
	11 a	OTHER INCOME		900099	1,301.			1,301.
	b							
	С							
	d	All other revenue			1,301.	A Company of the Comp		
	e 10			-	743,501.	7,930.	0.	1,438.
63200	12	Total revenue. See instructions.				. ,,,,,,,		Form 990 (2016)

Secti	on 501(c)(3) and 501(c)(4) organizations must comp Check if Schedule O contains a respons			nplete column (A).	X
Do r	not include amounts reported on lines 6b,	(A)	(B)	(C) Management and	(D) Fundraising
	8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21			The second secon	
2	Grants and other assistance to domestic				See a see a
	individuals. See Part IV, line 22				See a second sec
3	Grants and other assistance to foreign				The second of th
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				The second secon
5	Compensation of current officers, directors,	104,351.	93,916.	10,435.	
_	trustees, and key employees	104,331.	93,910.	10,433.	
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
-,	persons described in section 4958(c)(3)(B)	169,873.	127,657.	42,216.	
7	Other salaries and wages Pension plan accruals and contributions (include	103,013.	127,037.	42,210.	
8	section 401(k) and 403(b) employer contributions)	4,431.	3,385.	1,046.	
_	, , , , , , , , , , , , , , , , , , ,	21,310.	21,803.	-493.	
9	Other employee benefits	20,881.	16,485.	4,396.	
10	Payroll taxes	20,001.	10,103.	1,3301	
11	Management				
a					
b	LegalAccounting	21,315.		21,315.	 -
d					
e	Professional fundraising services. See Part IV, line 17			Control and Contro	
f	Investment management fees				
g					
9	column (A) amount, list line 11g expenses on Sch O.)	69,633.	62,842.	6,791.	
12	Advertising and promotion	51,126.	51,093.	33.	
13	Office expenses	101,834.	87,921.	13,913.	
14	Information technology	3,280.		3,280.	
15	Royalties				
16	Occupancy	34,646.	16,379.	18,267.	
17	Travel	20,017.	18,267.	1,750.	
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	21,715.	9,163.	12,552.	<u>.</u>
20	Interest	5,294.		5,294.	,
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	5,487.	83.	5,404.	
23	Insurance	7,329.	The second secon	7,329.	The control of the co
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.)				
а					
b					
С					
d					
	All other expenses	662 522	508,994.	153,528.	0.
<u> 25</u>	Total functional expenses. Add lines 1 through 24e	662,522.	300,334.	133,340.	ļ
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)				
	in tollowing doi: au-z (noo aua-rzo)				

Part X | Balance Sheet

Check if Schedule O contains a response or note to any line in this Part X (A) Beginning of year End of year 290,016. 264,825. 1 Cash - non-interest-bearing 75,836. 2 85,973. 2 Savings and temporary cash investments Pledges and grants receivable, net 3 3 120,000 Accounts receivable, net 4 Loans and other receivables from current and former officers, directors. trustees, key employees, and highest compensated employees. Complete 5 Part II of Schedule L Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary 6 employees' beneficiary organizations (see instr). Complete Part II of Sch L **Assets** 7 Notes and loans receivable, net 8 Inventories for sale or use 250. 905. 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment: cost or other 38,187. basis. Complete Part VI of Schedule D ______ 10a 18,728. 21,836. 19,459 b Less: accumulated depreciation 10b 10c 11 11 Investments - publicly traded securities 12 12 Investments · other securities. See Part IV, line 11 Investments - program-related. See Part IV, line 11 13 13 14 Intangible assets 14 Other assets. See Part IV, line 11 15 15 388,593. 490,507. 16 Total assets. Add lines 1 through 15 (must equal line 34) 16 29,016. 49,861 17 Accounts payable and accrued expenses 17 18 18 Grants payable _____ 19 Deferred revenue 19 20 20 Tax-exempt bond liabilities Escrow or custodial account liability. Complete Part IV of Schedule D 21 21 Loans and other payables to current and former officers, directors, trustees, 22 iabilities. key employees, highest compensated employees, and disqualified persons. 22 Complete Part II of Schedule L 23 Secured mortgages and notes payable to unrelated third parties 23 24 24 Unsecured notes and loans payable to unrelated third parties 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of 2,999. 3,089. 25 32,015. 52,950. Total liabilities. Add lines 17 through 25 26 Organizations that follow SFAS 117 (ASC 958), check here

X
and complete lines 27 through 29, and lines 33 and 34. Net Assets or Fund Balances 231,829. 357,111. 27 Unrestricted net assets 27 80,446. 124,749. 28 Temporarily restricted net assets 28 29 Permanently restricted net assets Organizations that do not follow SFAS 117 (ASC 958), check here A CONTROL OF THE CONT and complete lines 30 through 34. 30 Capital stock or trust principal, or current funds 31 Paid-in or capital surplus, or land, building, or equipment fund 31 Retained earnings, endowment, accumulated income, or other funds 32 32 356,578. 437,557. 33 Total net assets or fund balances 490,507. 388,593. 34 Total liabilities and net assets/fund balances

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or audits, explain why in Schedule O and describe any steps taken to undergo such audits