

See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



Form **990**

Return of Organization Exempt From Income Tax

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

OMB No 1545-0047 2008

Department of the Treasury

Dep Inte	Partment o Prnal Reve	of the Treasury nue Service		► The organization may have to use	a copy of this return to sat	tisfy state repor	tıng requirem	nents	OF	oen to Public Inspecti
	For the	e 2008 calend	dar year,	or tax year beginning Jul 1	, 200	8, and endir	ıg Jun			, 2009
В	Check if	applicable		C Name of organization			_	D Employ	er Ider	ntification Number
	Add	tress change	Please use IRS label	AGENDA FOR CHILDRED	N, INC					8157
	Nar	ne change	or print or type	Number and street (or P O box if m	iail is not delivered to street	addr) Room/s	suite	E Telepho	ne nur	mber
	Intt	al return	See specific	P O BOX 51837				(504	4) !	586-5809
	Ten	mination	Instruc- tions.	City, town or country	State	e ZIP code + 4	1			
	Am	ended return		NEW ORLEANS	LA	70151-	-1837	G Gross re	eceipts	\$ 2,332,763.
	App	olication pending	F Name a	nd address of principal officer			H(a) Is this a	group return	n for at	ffiliates? Yes X
			JUDITH	WATTS P O BOX 51837	NEW ORLEANS I	LA 70151	H(b) Are all	affiliates incl attach a list		nstructions) Yes I
ī	Tax-	exempt status			4947(a)(1) or	527	11 140,	allacii a iisi	(See II	istructions)
J				daforchildren.org			H(c) Group e	exemption nu	mber	>
ĸ	Type o		X Corpora		Other► L	Year of Forma	tion 1984	M s	tate of	legal domicile LA
Pa	art I	Summa								
	1 E	Briefly describ	e the org	anization's mission or most sigi	nificant activities P	ROVIDE AN IN	FORMED AND	CONSISTEN	T VOI	CE ON BEHALF OF LA'S C
Φ	1 4	TO MAKE LOU	ISIANA	A STATE IN WHICH ALL CHIL	DREN CAN THRIVE,	BY ENSURI	NG THAT I	HE BASI	C NE	EDS OF CHILDREN AN
& Governance	<u> </u>	FAMILIES ARE	E MET; TH	AT OUR CHILDREN ARE NURTURE	ED AND WELL TAUGHT,	BEGINNING	IN THE EA	ARLY YEAR	S AN	D CONTINUING THROUGH
Ē	_	ADOLESCENCE		HEY ARE PROTECTED FROM HARM	- 					FORMS OF OPPRESSION
8		Check this box		f the organization discontinued		osed of mor	e than 25%	% of its as		la a
ಷ	1		~	ers of the governing body (Par		16)		}	<u>3</u>	14
∠⊎⊮⊎ Activities			•	voting members of the governil ees (Part V, line 2a)	ig body (Fait VI, line	10)			_ -	46
	I			ers (estimate if necessary)				ŀ	6	0
A S				isiness revenue from Part VIII,	line 12, column (C)			Ī	7 a	0
O O CUIN	1	-		taxable income from Form 990-					7 b	
							Pı	rior Year		Current Year
Jue 5	8 0	Contributions a	and grant	(Part VIII, PAPEN) ENVE	7		2	,095,3	82.	2,149,240
Revenue	9 ₽	Program servi	ce revenu	e (Flart VIII, line 29))			53,1	50.	122,525
) Š	10 lr	nvestment inc	come (Pai	t VIII 🔁 lumn (A), lines 3, 4, ai	1d 70)					3,798
es Rev	11 C	Other revenue	(Part VII	, colleton (A)M确译s 頂,傉dnəRando	c, 🎉 (and 11e)			38,2		57,200
? —				es 8 through 11 (must equal Pa		ne 12)	2	,186,7	<u> 49.</u>	2,332,763
ŝ	13 G	Grants and sin	nılar amo	unts paid Part X, Zolumn (A)	而会 [-3)		<u> </u>			
Š				perhoers () Eolumn (A)			ļ			
်) စွ	l			ation, employee benefits (Part		5-10)	1	,124,8	69.	1,266,526
Expenses	16a P	rofessional fu	undraising	fees (Part IX, column (A), line	11e)		-			
ă	ьт	otal fundraisi	ng expen	ses (Part IX, column (D), line 2	5) ►	0.		···		
ш	17 C	ther expense	s (Part I)	, column (A), lines 11a-11d, 11	f-24f)		_1,	,130,9	66.	877,039
	18 T	otal expenses	s Add lin	es 13-17 (must equal Part IX, c	olumn (A), lıne 25)		2	, 255, 8	35.	2,143,565
	19 R	evenue less (expenses	Subtract line 18 from line 12				-69,0	86.	189,198
8 8							Begin	ning of Ye	ear	End of Year
Net Assets or Fund Balancos	20 T	otal assets (F	Part X, lin	e 16)				781,0		974,675
\$ P	.21 T	otal liabilities	(Part X,	ine 26)				26,6	70.	31,137
울큐	22 N	et assets or f	und balar	ices Subtract line 21 from line	20			754,3	40.	943,538
Pa	rt II	Signatu						<u> </u>		
		Under penalties	of perjury, 1	declare that I have examined this return Declaration of preparer (other than office	including accompanying sch	nedules and state	ements, and I	o the best of	my kn	owledge and belief, it is
		true, correct, an) is based on all information	n of which prepa	rer has any ki	nowledge		
Sig	ın	▶ <i>G</i>	udig	UN. WOULD			_ 04	/09/10		
Hei	re	Signature of	f officer		<u> </u>		Date	?		
		► JUDIT	H WATT	S			EXECU	TIVE D	IRE	CTOR
		Type_or_prin	nt_name_and	title						
		,	(/	_	•	Date	Che	eck if	Pr	reparer's identifying number see instructions)
Pai		Preparer's	λ_{λ}	Landan.	1			ployed 🟲	_	
Pre		signature	- 10u	meso) carre	il	04/20/10	<u> </u>			
par Use	er's	Firm's name (or	Carr	iere & Dunn Tax and	Accounting S	Services	<u> </u>	1	0	1210-27
On		yours if self employed).	≥ 2014	Saint Claude Avenu	ıe		EIN	- 1	L -	1369033
		address, and ZIP + 4		Orleans		6-1544	Pho	ne no 🕒	(504	4) 949-3095
May	the IDS	discuss this	roturn w	h the preparer shown above? (see instructions)		-			X Yes No

04/23/09

TEEA0101

Form 990 (2008)

	rt IV Checklist of Required Schedules	<u> </u>	<u>·</u>	uge
			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	x	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	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		х
4	Section 501(c)(3) organizations Did the organization engage in lobbying activities? If 'Yes,' complete Schedule C, Part II	4	х	
	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If 'Yes,' complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any accounts where 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		х
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		х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III	8		х
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If 'Yes.' complete Schedule D, Part IV	9		х
10	Did the organization hold assets in term, permanent, or quasi-endowments? If 'Yes,' complete Schedule D, Part V	10		Х
11	Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? If 'Yes,' complete Schedule D, Parts VI, VIII, IX, or X as applicable	11	Х	
12	Did the organization receive an audited financial statement for the year for which it is completing this return that was prepared in accordance with GAAP? If 'Yes,' complete Schedule D, Parts XI, XII, and XIII	12	Х	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13		X
14:	a Did the organization maintain an office, employees, or agents outside of the U.S.?	14a		Х
ı	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the U.S.? If 'Yes,' complete Schedule F, Part I	14b		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If 'Yes,' complete Schedule F, Part II	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If 'Yes,' complete Schedule F, Part III	16		_X
	Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If 'Yes,' complete Schedule G, Part I	17		X
	Did the organization report more than \$15,000 total 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 on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part III	19		X
	Did the organization operate one or more hospitals? If 'Yes,' complete Schedule H	20		X
21		21		Х
22	Did the organization report more than \$5,000 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, questions 3, 4, or 5? If 'Yes,' complete Schedule J	23		X
24 a	a 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, and that was issued after December 31, 2002? If 'Yes,' answer questions 24b-24d and complete Schedule K. If 'No,'go to question 25	24a		х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	24d	_]	
25 a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I	25a		Х
t	Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a prior year? If 'Yes,' complete Schedule L, Part I	25b		Х
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If 'Yes,' complete Schedule L, Part II	26		Х

BAA

Form 990 (2008)

Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or substantial contributor, or to a person related to such an individual? If 'Yes,' complete Schedule L. Part III

Form 990 (2008) AGENDA FOR CHILDREN, INC.

Part IV | Checklist of Required Schedules (continued)

			res	NO
28	During the tax year, did any person who is a current or former officer, director, trustee, or key employee			
	a Have a direct business relationship with the organization (other than as an officer, director, trustee, or employee), or an indirect business relationship through ownership of more than 35% in another entity (individually or collectively with other person(s) listed in Part VII, Section A)? If 'Yes,' complete Schedule L, Part IV	28a		х
	b Have a family member who had a direct or indirect business relationship with the organization? If 'Yes,' complete Schedule L, Part IV	28b		х
	c Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a professional corporation) doing business with the organization? If 'Yes,' complete Schedule L, Part IV	28c	_	Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	31		х
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		Х
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		Х
34	Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Parts II, III, IV, and V, line 1	34		X
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule R, Part V, line 2	35		х
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		Х_
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		х
3A/		Form	990 (2008

Page 5

Form 990 (2008)

BAA

Part V Statements Regarding Other IRS Filings and Tax Compliance Yes Νo 1 a Enter the number reported in Box 3 of form 1096, Annual Summary and Transmittal of US 54 1a Information Returns Enter -0- if not applicable 0 b Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1 b c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming 1 c Х (gambling) winnings to prize winners? 2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return 46 2b Х 2b If at 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 this return. (see instructions) 3a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by Х 3a this return b If 'Yes' has it filed a Form 990-T for this year? If 'No,' provide an explanation in Schedule O 3b 4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a 4a Х financial account in a foreign country (such as a bank account, securities account, or other financial account) **b** If 'Yes,' enter the name of the foreign country See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5 a Х Х 5b **b** Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? c If 'Yes,' to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding 5с Prohibited Tax Shelter Transaction? Х 6 a 6a Did the organization solicit any contributions that were not tax deductible? b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not deductible? 6 b 7 Organizations that may receive deductible contributions under section 170(c). 7 a Х a Did the organization provide goods or services in exchange for any guid pro quo contribution of more than \$75? **b** If 'Yes,' did the organization notify the donor of the value of the goods or services provided? 7b c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file 7 c Х Form 8282 7d d If 'Yes,' indicate the number of Forms 8282 filed during the year e Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal 7 e Х benefit contract? 7 f Х f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? Х g For all contributions of qualified intellectual property, did the organization file Form 8899 as required? 7 g 7h Х h For all contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required? Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year? 8 Х 9 Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds. a Did the organization make any taxable distributions under section 4966? 9a 9Ь Х **b** Did the organization make any distribution to a donor, donor advisor, or related person? 10 Section 501(c)(7) organizations. Enter 10 a a Initiation fees and capital contributions included on Part VIII, line 12 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 11 a a Gross income from other members or shareholders b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them) 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12a 12b b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year

BAA

Form 990 (2008)

Part VI Governance, Management and Disclosure (Sections A, B, and C request information about policies not required by the Internal Revenue Code.)

Se	ction A. Governing Body and Management				
	For each 'Yes' response to lines 2-7b below, and for a 'No' response to lines 8 or 9b below, de processes, or changes in Schedule O See instructions	escribe the circumstances,		Yes	No
1	a Enter the number of voting members of the governing body	1a 14			
	b Enter the number of voting members that are independent	1b 14			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship or a business relation, trustee or key employee?	ationship with any other	2		Х
3	Did the organization delegate control over management duties customarily performed by or un of officers, directors or trustees, or key employees to a management company or other person	nder the direct supervision	3		х
4			4		Х
	since the prior Form 990 was filed?				
5	Did the organization become aware during the year of a material diversion of the organization	's assets?	5		Х
6	Does the organization have members or stockholders?		6		X
7	a Does the organization have members, stockholders, or other persons who may elect one or m governing body?	ore members of the	7a		х
	b Are any decisions of the governing body subject to approval by members, stockholders, or oth	er persons?	7ь		X
8	Did the organization contemporaneously document the meetings held or written actions under the following	aken during the year by			_
	a The governing body?		8a		<u>X</u>
	b Each committee with authority to act on behalf of the governing body?		8ь		Χ
9	a Does the organization have local chapters, branches, or affiliates?		9a		X
	b If 'Yes,' does the organization have written policies and procedures governing the activities of and branches to ensure their operations are consistent with those of the organization?	such chapters, affiliates,	9b		
10	Was a copy of the Form 990 provided to the organization's governing body before it was filed? describe in Schedule O the process, if any, the organization uses to review the Form 990	All organizations must	10		X
11	Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who can organization's mailing address? If 'Yes,' provide the names and addresses in Schedule O	not be reached at the	11		х
Sec	ction B. Policies				
				Yes	No
12	a Does the organization have a written conflict of interest policy? If 'No,' go to line 13		12a		<u>X</u>
ı	b Are officers, directors or trustees, and key employees required to disclose annually interests the to conflicts?	nat could give rise	12b		
(c Does the organization regularly and consistently monitor and enforce compliance with the police Schedule O how this is done	cy? If 'Yes,' describe in	12 c		
13	Does the organization have a written whistleblower policy?		13	Х	
14	Does 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 appersons, comparability data, and contemporaneous substantiation of the deliberation and decisions.	oproval by independent sion			
	a The organization's CEO, Executive Director, or top management official?		15 a		X
ı	b Other officers of key employees of the organization?		15 b		X
	Describe the process in Schedule O (see instructions)			1	
16 8	a Did the organization invest in, contribute assets to, or participate in a joint venture or similar a entity during the year?	rrangement with a taxable	16a		x
ŀ	b If 'Yes,' has the organization adopted a written policy or procedure requiring the organization to in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the status with respect to such arrangements?	o evaluate its participation ne organization's exempt	16b		
Sec	tion C. Disclosures				
	Late the state of the form of the Free 000 and a state to the field by				
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and inspection Indicate how you make these available. Check all that apply				olic
					- +
19	Describe in Schedule O whether (and if so, how) the organization makes its governing docume statements available to the public	nts, conflict of interest policy	, and f	inancia	al
20	State the name, physical address, and telephone number of the person who possesses the boo	ks and records of the organ	zation		
	JUDITH WATTS 1720/22 ST CHARLES AVE, N LA	A70130(5	04)_5	86-8	<u>509</u>

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

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

1a Complete this table for all persons required to be listed. Use Schedule J-2 if additional space is needed

Check this hay if the organization did not compensate any officer, director, trustee, or key employee

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and current key employees Enter -0- in columns (D), (E), and (F) if no compensation was paid
- 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) or more than \$100,000 from the organization and any related organizations
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

Check this box if the organization did no (A)	(B)	(c)					,	(D)	(E)	(F)
Name and Title	Average			-	-	that app	ly)	Reportable compensation from	Reportable compensation from	Estimated
	hours per week	adividial fracer or director	mshluhonal kustee	Offi el	Key employee	Hig) est conn-erisated employee	Forner	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations
JUDITH WATTS PRESIDENT/CEO	40.00	Х						66,270.	0.	0.
NANCY MARSIGLIA	10.00						-	00,2,0.		
CHAIRPERSON	3.00	x						0.	0.	0.
REVEREND LOUIS C. CLARK	3.00							0.	0.	0.
MEMBER OLGA A. JACKSON	3.00			-	_			0.1	<u></u>	
MEMBER	3.00	х						0.	0.	0.
EDITH_JONES MEMBER	3.00	x						0.	0.	0.
DATNA R. PRICE MEMBER	3.00	Х						0.	0.	0.
JAY P GOLDSMITH, MD	3.00							0.	0.	
MEMBER GLORIA CABRERA	3.00				\dashv			0.		0.
MEMBER	3.00	х						0.	0.	0.
JULIE LIVAUDAIS GEORGE MEMBER	3.00	x						0.	0.	0.
JUDITH J INGRAM MEMBER	3.00							0.	0.	0.
JANE SIZELER, LCSW MEMBER	3.00							0.	0.	0.
YVONNE MITCHELL-GRUBB	3.00	^		\dashv	-				0.	<u> </u>
MEMBER	3.00	х						0.	0.	0.
AESHA_RASHEED MEMBER	3.00	x			!			0.	0.	0.
PAMELA STEEG	3.00				-				···	0.
MEMBER TRACIE WASHINGTON	3.00		-+	\dashv	-		\dashv			<u></u>
MEMBER	3.00	х						0.	0.	0.
	<u> </u>	i			<u> </u>					

(A)	(B)				c)			(D)	(E)		(F)	
Name and Title	Average hours		т—	,		_		Reportable compensation from	Reportable compensation from	a	Estimate mount of it	
	nours per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	(compensa from the organizat and relat organizate	ition e ion ted
	-											
	-											
	-											
											_	 .
1 b Total							>	66,270.	0.			0.
2 Total number of individuals (including those in 1a) w	ho recei	ved	mor	e tha	an \$	100	,000) in reportable con	npensation from th	е		
organization •											Yes	No
3 Did the organization list any former officer, director of on line 1a? If "Yes." complete Schedule J for such inc.	r trustee	e, ke	y er	nplo	yee	, or	hıgh	nest compensated	employee	3		X
For any individual listed on line 1a, is the sum of rep the organization and related organizations greater the individual		com; ,000	oens ? If	satio 'Yes	n ai	nd o mpl	ther ete :	compensation fro Schedule J for suc	m h	4		x
 5 Did any person listed on line 1a receive or accrue co rendered to the organization? If 'Yes,' complete Sche 	mpensa	tion	fron	n an	y ur	rela	ited	organization for se	ervices	5		X
Section B. Independent Contractors	duic 5 h	01 30	2011	pero	<u> </u>						,	1
Complete this table for your five highest compensate compensation from the organization	d indepe	ende	nt c	ontra	acto	rs th	nat r	eceived more than	\$100,000 of		<u>.</u>	
(A) Name and business address	s							(B) Description o	f Services	Comp	(C) pensatio	on
					_							
2 Total number of independent contractors (including the compensation from the organization ►	nose in 1) wh	no re	eceiv	ved	mor	e th	an \$100,000 in				

ra	ILΥ	III Statement of A	evenue						
						(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
CONTRIBUTIONS, GIFTS, GRANTS AND OTHER SIMILAR AMOUNTS	1 a t c c e f	A Federated campaigns Membership dues Fundraising events Related organizations Government grants (contributions, gifts, isimilar amounts not included in Noncash contribus included in	grants, and above 1 f	2,068,14					
	h	Total. Add lines 1a-1f			>	2,149,240.			
PROGRAM SERVICE REVENUE	2a b			Business Code 812990		122,525.	122,525.	0.	0.
M SE	e	 !			1				
GRA	f	All other program service							
PRG	g	Total. Add lines 2a-2f	•		>	122,525.			
	3	Investment income (included other similar amounts) Income from investment			•	3,798.	3,798.	0.	0.
	5	Royalties			_				
	b c	Gross Rents Less rental expenses Rental income or (loss) Net rental income or (lo	(i) Real	(II) Personal					
		`	(i) Securities	(ii) Other					
		Gross amount from sales of assets other than inventory Less cost or other basis and sales expenses	,,						
		Gain or (loss)							
OTHER REVENUE	8a	Net gain or (loss) Gross income from fund (not including \$		a					
6		Less direct expenses Net income or (loss) from	m fundraising e	b! events	→			1	
		Gross income from gam See Part IV, line 19	ing activities	a					
		Less direct expenses		b	_				
	С	Net income or (loss) from	m gaming activ	ities	-				
	b	Gross sales of inventory and allowances Less cost of goods sold Net income or (loss) from		a b	_				
_ }		Miscellaneous Revenu		- Business Code	+				 -
	11 a b	Miscellaneous		999999		57,200.	57,200.	0.	0.
	d	All other revenue			+				
ļ		Total. Add lines 11a-11d	i İ		▶	57,200.			
		Total Revenue. Add line: 10c. and 11e		5, 6d, 7d, 8c, 9c,	•	2,332,763.	183,523.	0.	0.

Part IX | Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

Do not include amounts reported on lines	(A) Total expenses	(B) Program service	(C) Management and	(D) Fundraising
6b, 7b, 8b, 9b, and 10b of Part VIII.		expenses	general expenses	expenses
1 Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21				
2 Grants and other assistance to individuals in the U.S. See Part IV, line 22				
3 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	66,270.	50,807.	15,463.	0
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	987,866.	941,188.	46,678.	0
Pension plan contributions (include section 401(k) and section 403(b) employer contributions)				
9 Other employee benefits	131,748.	117,861.	13,887.	0
10 Payroll taxes	80,642.	75,888.	4,754.	0
11 Fees for services (non-employees)				
a Management				
b Legal				
c Accounting	28,457.	22,619.	5,838.	0
d Lobbying				
e Prof fundraising svcs See Part IV, In 17				
f Investment management fees				
g Other				
12 Advertising and promotion				
13 Office expenses	149,083.	122,189.	26,894.	0
14 Information technology				
15 Royalties				<u>-</u>
16 Occupancy	64,799.	63,451.	1,348.	0
17 Travel	61,775.	53,645.	8,130.	0
Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings				
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization				
23 Insurance 24 Other expenses Itemize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below)				
a PROFESSIONAL FEES	334,906.	260,565.	74,341.	0
b INSURANCE	30,652.	22,232.	8,420.	0
c EQUIPMENT	45,411.	36,221.	9,190.	0
d MISCELLANEOUS	124,951.	110,135.	14,816.	0
e TELEPHONE	37,005.	34,983.	2,022	0
f All other expenses				
25 Total functional expenses Add lines 1 through 24f	2,143,565.	1,911,784.	231,781.	0.
26 Joint Costs. Check here ► ☐ If following SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Page 11

Form 990 (2008)

BAA

				_	(A) Beginning of year		End	(B) of yea	.г
	1	Cash – non-interest-bearing		·	488,999.	1	(543,	590.
	2	Savings and temporary cash investments				2			
	3	Pledges and grants receivable, net			291,936.	3		331,	010
	4	Accounts receivable, net				4			
	5	Receivables from current and former officers, directors or other related parties. Complete Part II of Schedule	s, trust	ees, key employees,		5			
	6	Receivables from other disqualified persons (as define	d unde	er section 4958(f)(1))					
		and persons described in section 4958(c)(3)(B) Comp	lete Pa	art II of Schedule L		6			
A S S E T S	7	Notes and loans receivable, net		Į		7			
E	8	Inventories for sale or use				8			
Š	9	Prepaid expenses and deferred charges				9			
	10 a	Land, buildings, and equipment cost basis	10 a	14,482.					
	b	Less accumulated depreciation Complete Part VI of							
	ĺ	Schedule D	10 ь	14,482.	0.	10 c			0.
	11	Investments – publicly-traded securities				11			
	12	Investments – other securities See Part IV, line 11				12			
	13	Investments – program-related See Part IV, line 11				13			
	14	Intangible assets				14			
	15	Other assets See Part IV, line 11			75.	15			75.
	16	Total assets Add lines 1 through 15 (must equal line 3	34)	Ī	781,010.	16	9	74,6	675 .
	17	Accounts payable and accrued expenses			26,670.	17		31,1	
	18	Grants payable				18			
	19	Deferred revenue				19			
Ļ	20	Tax-exempt bond liabilities		20					
À	21	Escrow account liability Complete Part IV of Schedule	D	[21			
ルーAB-L-F-ES	22	Payables to current and former officers, directors, trus highest compensated employees, and disqualified personal compensation.	tees, k sons C	ey employees, complete Part II				_	_
<u> i</u> l		of Schedule L		22					
Š	23	Secured mortgages and notes payable to unrelated this	rd part	ies		23			
ļ	24	Unsecured notes and loans payable				24			
	25	Other liabilities Complete Part X of Schedule D				25			
	26	Total liabilities. Add lines 17 through 25			26,670.	26		31,1	L37.
Ž		Organizations that follow SFAS 117, check here ►	X an	d complete lines					
N E T		27 through 29 and lines 33 and 34.				_			
A S	27	Unrestricted net assets			645,237.	27	8	38,1	L95.
ASSET	28	Temporarily restricted net assets		<u> </u>	109,103.	28	1	05,3	343.
S	29	Permanently restricted net assets				29			
R		Organizations that do not follow SFAS 117, check her	e ►	and complete					
E		lines 30 through 34.							
FUZO	30	Capital stock or trust principal, or current funds				30			
B	31	Paid-in or capital surplus, or land, building, and equipment of the surplus of th	nent fu	nd		31			
Ä	32	Retained earnings, endowment, accumulated income, or	or othe	r funds		32			
BALAZCES	33	Total net assets or fund balances.			754,340.	33	9	43,5	38.
5	34	Total liabilities and net assets/fund balances			781 <u>,</u> 010.	34	9	74,6	575.
Pa	rt XI	Financial Statements and Reporting							
								Yes	No
1	Acc	ounting method used to prepare the Form 990 UC	ash	X Accrual (Other			i	
		e the organization's financial statements compiled or re			countant?		2a	-X-	
		e the organization's financial statements audited by an					2 b	Х	
	revi	es' to 2a or 2b, does the organization have a committed ew, or compilation of its financial statements and select	tion of	an independent account	tant?		2c		Х
	Aud	a result of a federal award, was the organization require it Act and OMB Circular A-133?			s as set forth in the Sir	igle	3 a	х	
	b If 'Y	es ' did the organization undergo the required audit or a	oudits?				3 b	X	

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

To be completed by all section 501 (c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts.

OMB No 1545-0047

Open to Public Inspection

vame (of the	organization							Employe	riaentifica	ation number		
AGE	ND	A FOR CHILDR	REN, INC.						72-1	<u>05815</u>	7		
Parl	: 1	Reason for Pu	iblic Charity State	us (All organizations	must	comple	ete this	s part.) (see	ınstruc	tions)		
The c	rga	nization is not a pri	vate foundation becau	ise it is. (Please check on	ly one d	organiza	tion)						
1		A church, conventi	on of churches or ass	ociation of churches desc	ribed in	section	170(b)(1)(A)(i).					
2		A school described	I in section 170(b)(1)(A)(ii). (Attach Schedule E	Ξ)								
3		A hospital or coope	erative hospital service	e organization described i	ın secti o	on 170(b)(1)(A)(i	ii). (Atta	ach Sch	edule H))		
4		A medical research	h organization operate	ed in conjunction with a ho	ospital d	escribed	I in sect	ion 170	(b)(1)(A)	(iii) Ente	er the hosp	ıtal's	
		name, city, and sta											
5		An organization op 170(b)(1)(A)(iv). (0	perated for the benefit Complete Part II)	of a college or university	owned o	or opera	led by a	govern	mental ı	ınıt desc	ribed in se	ction	
6				governmental unit describ									
7	X	ın section 170(b)(1)(A)(vi). (Complete P			_	ernmen	tal unit	or from	the gene	eral public c	lescrib	ed
8	\sqsubseteq	A community trust	described in section 1	1 70(b)(1)(A)(vi). (Complet	e Part II)							
9	An organization that normally receives (1) more than 33-1/3 % of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions — subject to certain exceptions, and (2) no more than 33-1/3 % of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III)												
10	Ц	An organization org	ganized and operated	exclusively to test for put	olic safe	ty See :	section !	509(a)(4). (see	instructio	ons)		
11	_	more publicly supp	orted organizations d	exclusively for the benefit escribed in section 509(a lation and complete lines)(1) or s	ection 5	09(a)(2)	tions of, See s	or carry ection 5	out the 09(a)(3).	purposes of the check the	of one box t	or hat
		a Type I	b Type II	c Type II	I — Fund	ctionally	ıntegrat	ed		d 🗌	Type III-	Other	
е													
f		If the organization check this box	received a written dete	ermination from the IRS th	hat is a	Type I,	Гуре II о	r Type	III suppo	rting org	ganızatıon,		
g		Since August 17, 2	006, has the organiza	tion accepted any gift or	contribu	ition froi	n any of	the foll	owing p	ersons?			
		(i) a person who	directly or indirectly o	controls, either alone or to	ogether :	with pers	sons des	scribed	ın (ıı) ar	d (III)		Yes	No
		below, the go	verning body of the su	upported organization?							11 g (i)		ļ
		• •	nber of a person desc	•••							11 g (ii)		
		(iii) a 35% contro	lled entity of a person	described in (i) or (ii) abo	ove?						11 g (iii)		
<u>h</u>		Provide the following	ng information about the	ne organizations the organ	<u>nization</u>	support	s		ī				
	(1)	Name of Supported Organization	(iı) EIN	(in) Type of organization (described on lines 1-9 above or IRC section (see instructions))	organiza (i) liste	Is the tion in col d in your erning ment?	the organ	rou notify nization in (i) of upport?	organizat	s the ion in col zed in the S ?	(vii) Amour	it of Sup	port
					Yes	No	Yes	No	Yes	No			
		•											
									i .				
													_
			_				-						
							<u> </u>						
								<u> </u>					
_ otal				-				-					

Page 2

ra	(Complete only if you check	•			(ыд і дедіў) аі	IG 170(D)(1)(A)	/(VI)		
Sec	ction A. Public Support	CC THE DOX OIT TIME	0, 7, 0, 0 0 1 r art	·/					
Cale	endar year (or fiscal year inning in) ►	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total		
1	Gifts, grants, contributions and membership fees received (Do not include 'unusual grants ')	2,228,293.	1,689,406.	2,095,382.	2,095,382.	2,328,965.	10,437,428.		
2	Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf								
3	The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge.								
4	Total. Add lines 1-3	2,228,293.	1,689,406.	2,095,382.	2,095,382.	2,328,965.	10,437,428.		
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)								
	Public support. Subtract line 5 from line 4						10,437,428.		
	tion B. Total Support			<u> </u>	<u> </u>				
Cale begi	ndar year (or fiscal year nning in) ►	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total		
7	Amounts from line 4	2,228,293.	1,689,406.	2,095,382.	2,095,382.	2,328,965.	10,437,428.		
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources	6.	6.		0.	3,798.	3,810.		
9	Net income form unrelated business activities, whether or not the business is regularly carried on								
10	Other income Do not include gain or loss form the sale of capital assets (Explain in Part IV)								
11	Total support. Add lines 7 through 10						10,441,238.		
12	Gross receipts from related activi	ities, etc. (see inst	ructions)			12			
	First five years. If the Form 990 organization, check this box and	stop here	<u> </u>	d, third, fourth, or	fifth tax year as a	section 501(c)(3)) ▶ □		
	tion C. Computation of Pul			11 caluma (6)		14	00 06 %		
	Public support percentage for 200 Public support percentage for 200			e i i , column (i)		14 15	99.96%		
16 a	33-1/3 support test - 2008. If the	organization did i	not check the box	on line 13, and the	he line 14 is 33-1/	3 % or more, che	ck this box		
b 33-1/3 support test — 2007. If the organization did not check a box on line 13, or 16a, and line 15 is 33-1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization									
17 a	10%-facts-and-circumstances te or more, and if the organization in the organization meets the facts-	neets the 'facts-an	id-circumstances'	test, check this be	ox and stop here.	Explain in Part IV	' how		
Ь	10%-facts-and-circumstances te or more, and if the organization n organization meets the 'facts-and	neets the 'facts-an	d-circumstances'	test, check this bo	ox and stop here.	Explain in Part IV	5 is 10% how the		
18	Private foundation. If the organiz	ation did not checl	k a box on line, 13	3, 16a, 16b, 17a,	or 17b, check this	box and see instr	uctions -		
3AA					Sc	hedule A (Form 99	90 or 990-EZ) 2008		

AGENDA FOR CHILDREN, INC. 72-1058157 Schedule A (Form 990 or 990-EZ) 2008 Page 3 Part III Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I) Section A. Public Support Calendar year (or fiscal yr beginning in) (a) 2004 **(b)** 2005 (c) 2006 (d) 2007 (e) 2008 (f) Total Gifts, grants, contributions and membership fees received (Do not include 'unusual grants') Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in a activity that is related to the organization's tax-exempt purpose Gross receipts from activities that are not an unrelated trade or business under section 513 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge 6 Total, Add lines 1-5 7a Amounts included on lines 1 2, 3 received from disqualified **b** Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the total of lines 9, 10c, 11, and 12 for the year or \$5,000 c Add lines 7a and 7b 8 Public support (Subtract line 7c from line 6) Section B. Total Support (a) 2004 **(b)** 2005 (c) 2006 (d) 2007 (e) 2008 (f) Total Calendar year (or fiscal yr beginning in) 9 Amounts from line 6 10 a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 c Add lines 10a and 10b Net income from unrelated business activities not included inline 10b. whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)

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

13 Total support. (add ins 9, 10c, 11, and 12)

Section C. Computation of Public Support Percentage % 15 Public support percentage for 2008 (line 8, column (f) divided by line 13, column (f)) 15 16 % 16_ Public_support percentage_from 2007 Schedule A,-Part IV-A,-line-27g----

<u>~ .:</u>	_			(1)		<u> </u>
Section	D.	Com	putation	of investme	ent income	Percentage
	-					

- 17 Investment income percentage for 2008 (line 10c, column (f) divided by line 13, column (f))
- 18 Investment income percentage from 2007 Schedule A, Part IV-A, line 27h

19a 33-1/3 support tests - 2008. If the organization did not check the box on line 14, and line 15 is more than 33-1/3%, and line 17 is not more than 33-1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

b 33-1/3 support tests - 2007. If the organization did not check a box on line 14 or 19a, and line 16 is more than 33-1/3%, and line 18 is not more than 33-1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

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

17

18

%

%

Part IV	Supple Part II,	ementa line 17	l Infor 7a or 1	mation 7b; or	n. Com Part	nplete III, line	this p	art to Provide	provide any o	e the other a	explana addition	tion rea	quired to mation.	y Part (see ir	II, line 1 nstructio	Page 4 0; ns)
	. – – – –			-				-		- -		- -		-		
-	. – – – –	- -				-				- -			- -		-	
	. – – –			-		- - -		- -		-						
		- -								· -		- -				- -
						- -										
		- -														
			_		_ _							-				
				-		-	-									
												-				
																·
													·			
				. _										_		
							- -									
 									- -				 _			
					- -			. .				.		- 		
													. – – – –			- -
															,	
							-					. – – –				
							-							-		

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

► To be completed by organizations described below.

► Attach to Form 990 or Form 990-EZ.

2008

Open to Public Inspection

Department of the Treasury Internal Revenue Service

If the organization answered 'Yes,' to Form 990, Part IV, line 3, or Form 990-EZ, Part VI, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations complete Parts I-A and B Do not complete Part I-C
- Section 501(c) (other than section 501(c)(3)) organizations complete Part I-A and C below Do not complete Part I-B
- Section 527 organizations: complete Part I-A only

If the organization answered 'Yes,' to Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A Do not complete Part II-B
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B Do not complete Part II-A

		,' to Form 990, Part IV, line 5 (Proxy Tax), the street one Complete Part III	nen		
	of organization			Employer identific	ation number
	ENDA FOR CHILDREN,	TNC.		72-105815	57
Pa	rt I-A To be completed	by all organizations exempt unde	r section 501(c)	and section 527 or	ganizations.
	See the instruction	ns for Schedule C for details.	• •		
1	Provide a description of the	organization's direct and indirect political ca	impaign activities in l	Part IV.	
2	Political expenditures			► \$	S
3	Volunteer hours	_			
Pai	To be completed See the instruction	by all organizations exempt unde ns for Schedule C for details.	r section 501(c)(3).	
1	Enter the amount of any exc	ise tax incurred by the organization under s	ection 4955	► \$	0.
2	Enter the amount of any exci	ise tax incurred by organization managers ι	ınder section 4955	▶ \$	0.
3	If the organization incurred a	section 4955 tax, did it file Form 4720 for t	his year?		Yes X No
4 8	Was a correction made?				∐ Yes ∐ No
	If 'Yes,' describe in Part IV				
Pai	To be completed See the instructio	by all organizations exempt unde ns for Schedule C for details.	r section 501(c),	except section 501	(c)(3).
1	Enter the amount directly exp	pended by the filing organization for section	527 exempt function	activities ► \$	0.
2	Enter the amount of the filing function activities	g organization's funds contributed to other o	rganizations for secti	on 527 exempt ► \$	0.
3	Total of direct and indirect ex Form 1120-POL, line 17b	kempt function expenditures Add lines 1 an	d 2 and enter here a	nd on ► \$	
4	Did the filing organization file	Form 1120-POL for this year?			Yes X No
5	made Enter the amount paid received and promptly and di	and employer identification number (EIN) of and indicate if the amount was paid from the prectly delivered to a separate political orgated in the information in Factorial or the information in Factorial in Factori	the filing organization nization, such as a se	's funds or were politica	I contributions
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's own internal funds if none, enter-0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-
-					

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

Schedule C (Form 990 or 990-EZ) 2008

expenditures d Grassroots non-taxable amount e Grassroots ceiling amount (150% of line 2d, column (e)) f Grassroots lobbying expenditures

Schedule C (Form 990 or 990-EZ) 2008

Schedule C (Form 990 or 990-EZ) 2008 AGENDA FOR CHILDREN, INC.			8157 Page
Part II-B To be completed by organizations exempt under section 501(c)(3) that ha (election under section 501(h)). See the instructions for Schedule C for details.	ve NOT	filec	Form 5768
(election under section 501(n)). See the instructions for Schedule C for def		. 1	41.
		3)	(b)
	Yes	No	Amount
During the year, did the filing organization attempt to influence foreign, national, state or local			
legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of			
a Volunteers?			
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			
c Media advertisements?			
d Mailings to members, legislators, or the public?			_
e Publications, or published or broadcast statements?			
f Grants to other organizations for lobbying purposes?			
g Direct contact with legislators, their staffs, government officials, or a legislative body?			
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means?			
i Other activities? If 'Yes,' describe in Part IV			· ·
j Total lines 1c through 1i			
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?			
b If 'Yes,' enter the amount of any tax incurred under section 4912			
c If 'Yes,' enter the amount of any tax incurred by organization managers under section 4912		Γ	
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?		Γ	
Part III-A To be completed by all organizations exempt under section 501(c)(4), sec	tion 50°	1(c)(5), or section
501(c)(6). See the instructions for Schedule C for details.			
			Yes No
1 Were substantially all (90% or more) dues received nondeductible by members?			1
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2
3 Did the organization agree to carryover lobbying and political expenditures from the prior year?			3
Part III-B To be completed by all organizations exempt under section 501(c)(4), sec	tion 50	l(c)(5), or section
501(c)(6) if BOTH Part III-A, questions 1 and 2 are answered 'No' OR if Part	t III-A, c	luest	ion 3 is
answered 'Yes.' See Schedule C Instructions for details.		- 1	
1 Dues, assessments and similar amounts from members		1	
2 Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).			
a Current year		2a	
b Carryover from last year	Ī	2b	
c Total		2 c	
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3	
			
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess			
does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and polit expenditure next year?	icai	4	
5 Taxable amount of lobbying and political expenditures (line 2c total minus 3 and 4)	Γ	5	
Part IV Supplemental Information		· · · ·	
Complete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, an	d Part II-	B. line	11
Also, complete this part for any additional information		•	
* -			

Schedule C (Form 990 or 990-EZ) 2008 AGENDA FOR CHILDREN, INC.	/2-1058157	Page 4
Part IV Supplemental Information (continued)		
Tarrio (continuos)		
		. -
	·	
	·	
		
	·	
	·	
		- -
	~ 	

SCHEDULE D (Form 990)

Supplemental Financial Statements

OMB No 1545-0047 2008

Department of the Treasury Internal Revenue Service Attach to Form 990. To be completed by organizations that answered 'Yes,' to Form 990, Part IV, lines 6, 7, 8, 9, 10, 11, or 12.

Open to Public Inspection

Hamil	e of the organization				Employer identification	on number
AGI	ENDA FOR CHILDREN, INC.				72-1058157	
Pa	Organizations Maintaining Dono the organization answered 'Yes'	or Advised Funds or Oth to Form 990, Part IV, Inc	er Similar Fund e 6.	s or Acc	ounts Complet	te if
		(a) Donor advised	funds	(b) F	unds and other ac	counts
1	Total number at end of year					
2	Aggregate contributions to (during year)					
3	Aggregate grants from (during year)					
4	Aggregate value at end of year					
_	,	<u> </u>	<u> </u>	· · · · · · · · · · · · · · · · · · ·		
5	Did the organization inform all donors and don funds are the organization's property, subject to	or advisors in writing that the atom the organization's exclusive	assets held in donoi legal control?	advised	Yes	☐ No
6	Did the organization inform all grantees, donor used only for charitable purposes and not for timpermissible private benefit?	rs, and donor advisors in writing the benefit of the donor or donor	g that grant funds nor advisor or other	nay be	Yes	No
Pai	t II Conservation Easements Comple	ete if the organization ar	nswered 'Yes' to	Form 99	0, Part IV, line	. 7.
	Purpose(s) of conservation easements held by					
	Preservation of land for public use (e.g., re			an historica	illy important land	area
	Protection of natural habitat	, , , , , , , , , , , , , , , , , , ,	Preservation of			
	Preservation of open space					
2	Complete lines 2a-2d if the organization held a	a qualified conservation contrib	ution in the form of	a conserva	tion easement on	the last day
_	of the tax year	- qualified conservation contains				
					Held at the End o	of the Year
a	Total number of conservation easements			2a		
Ŀ	Total acreage restricted by conservation easen	nents		2 b		
c	: Number of conservation easements on a certifi	ied historic structure included i	n (a)	2c		
c	Number of conservation easements included in	(c) acquired after 8/17/06		2d		
3	Number of conservation easements modified, t	ransferred, released, extinguis	hed, or terminated	by the organ	nization during the	taxable
	year ►	_				
4	Number of states where property subject to cor					
5	Does the organization have a written policy regenforcement of the conservation easement it has been seen as a second conservation of the conservation easement it has been seen as a second conservation of the conservation of th	olds?			Yes	No
6	Staff or volunteer hours devoted to monitoring,					
7	Amount of expenses incurred in monitoring, ins	specting, and enforcing easem	ents during the year	·		
8	Does each conservation easement reported on $170(h)(4)(B)(i)$ and $170(h)(4)(B)(ii)^2$	line 2(d) above satisfy the req	uirements of section	า	Yes	No
	In Part XIV, describe how the organization reprinclude, if applicable, the text of the footnote to conservation easements	the organization's financial st	atements that descr	ibes the org	ganızatıon's accou 	e sheet, and nting for
Par	Organizations Maintaining Colle Complete if the organization answ	ctions of Art, Historical wered 'Yes' to Form 990	Treasures, or C , Part IV, line 8.	Other Sim	ilar Assets	
1 a	If the organization elected, as permitted under treasures, or other similar assets held for publithe text of the footnote to its financial statement	c exhibition, education, or rese	revenue statement a earch in furtherance	and balance of public se	e sheet works of ar ervice, provide, in	t, historical Part XIV,
b	If the organization elected, as permitted under treasures, or other similar assets held for publi amounts relating to these items	c exhibition, education, or rese	revenue statement a earch in furtherance	and balance of public se	ervice, provide the	following
	(i) Revenues included in Form 990, Part VIII, I				► \$	
	(ii) Assets included in Form 990, Part X If the organization received or held works of art				\$ <u></u> _	
- 2 -	If the organization received or held works of art amounts required to be reported under SFAS 1	t, historical treasures, or other 16 relating to these items	sımılar assets for fı	nancial gair	n, provide the follo	wing
а	Revenues included in Form 990, Part VIII, line	1			► \$	
þ	Assets included in Form 990, Part X				► \$	

Schedule D (Form 990) 2008 AGEN				72-10		Page 2
Part III Organizations Mainta	ining Collection	ons of Art, Histo	orical Treasures, or	Other Similar As	sets (conti	inued)
Using the organization's accession that apply)	on and other record	_	-		ction items (c	heck all
a Public exhibition		d Loan	or exchange programs			
b Scholarly research		e 📙 Other				
c Preservation for future gener	ations					
4 Provide a description of the organ Part XIV					: in	
5 During the year, did the organiza assets to be sold to raise funds r	tion solicit or recei ather than to be m	ve donations of art, aintained as part of	historical treasures, or the organization's collection	other similar ction?	Yes	No
Part IV Trust, Escrow and Cu	stodial Arrang	gements Comple	ete if organization a	answered 'Yes' to	Form 990,	Part
IV, line 9, or reported						
1 a Is the organization an agent, trus included on Form 990, Part X?				assets not	Yes	No
b If 'Yes,' explain the arrangement	in Part XIV and co	emplete the following	g table			
				1-	Amount	
c Beginning balance				1c		
d Additions during the year				1 d		
e Distributions during the year				1e		
f Ending balance		0 D+ V I 013		1f		T Na
2a Did the organization include an a		U, Part X, line 217			Yes	∐ No
b If 'Yes,' explain the arrangement Part V Endowment Funds Co		nization answer	nd 'Vos' to Form 99	0 Part IV June 10		
Part V Endowment Funds Co						
1 a Danisana of year balance	(a) Current year	(b) Prior year	(C) TWO years back	(d) Three years back	(e) Four y	ears Dack
1 a Beginning of year balance				-		
b Contributions					+	-
c Investment earnings or losses				 	+	
d Grants or scholarshipse Other expenditures for facilities					1	
and programs						
f Administrative expenses						
g End of year balance						
2 Provide the estimated percentage	of the year end b	alance held as				
a Board designated or quasi-endow	ment 🟲	 &				
b Permanent endowment ►	%					
c Term endowment ►	%					
3a Are there endowment funds not in organization by	n the possession o	f the organization th	nat are held and adminis	tered for the	Yes	s No
(i) unrelated organizations					3a(i)	
(ii) related organizations					3a(ii)	
b If 'Yes' to 3a(ii), are the related of	rganizations listed	as required on Sch	edule R?		3b	
4 Describe in Part XIV the intended	-	•				
Part VI Investments-Land, B	uildings, and l	Equipment. See	Form 990, Part X,	line 10.		
Description of investment		Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Depreciation	(d) Book	Value
1 a Land						
b Buildings						
c Leasehold improvements						
d Equipment			14,482.	14,482.		0.
e Other			0.	· <u>-</u>		0.
Total. Add lines 1a-1e (Column (d) sho	uld equal Form 99	0 Part X, column (E	3), line 10(c))	-		0.
BAA				Sched	dule D (Form	990) 2008 -

Schedule D (Form 990) 2008 AGENDA FOR CHILDREN, INC.

72-1058157

Page 3

	edule D (Form 990) 2008 AGENDA FOR CHILDREN, INC.	72-10581	57 Page
Pa	rt XI Reconciliation of Change in Net Assets from Form 990 to Financial Statements		
` 1	Total revenue (Form 990, Part VIII,column (A), line 12)		2,332,763.
2	Total expenses (Form 990, Part IX, column (A), line 25)		2,143,565.
3	Excess or (deficit) for the year Subtract line 2 from line 1		189,198.
4	Net unrealized gains (losses) on investments		
5	Donated services and use of facilities		
6	Investment expenses		
7	Prior period adjustments .		
8	Other (Describe in Part XIV)		
9	Total adjustments (net) Add lines 4-8		
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9		189,198.
Par	t XII Reconciliation of Revenue per Audited Financial Statements With Revenue per	Return	·
1	Total revenue, gains, and other support per audited financial statements	1	2,332,763.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
ê	Net unrealized gains on investments 2a		
ŧ	Donated services and use of facilities 2b		
•	: Recoveries of prior year grants 2c		
C	Other (Describe in Part XIV)		
6	Add lines 2a through 2d	2 e	
3	Subtract line 2e from line 1	3	2,332,763.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
a	Investments expenses not included on Form 990, Part VIII, line 7b	!	
b	Other (Describe in Part XIV)		
c	Add lines 4a and 4b	4 c	
5	Total revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5	2,332,763.
Par	t XIII Reconciliation of Expenses per Audited Financial Statements With Expenses p	er Return	
1	Total expenses and losses per audited financial statements	1	2,143,565.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
a	Donated services and use of facilities 2a		
b	Prior year adjustments 2b		
¢	Losses reported on Form 990, Part IX, line 25		
d	Other (Describe in Part XIV)		
e	Add lines 2a through 2d	2e	
	Subtract line 2e from line 1	3	2,143,565.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investments expenses not included on Form 990, Part VIII, line 7b		
þ	Other (Describe in Part XIV)		
c	Add lines 4a and 4b	4c	
5_	Total expenses Add lines 3 and 4c (This should equal Form 990, Part I, line 18)	5	2,143,565.
Par	XIV Supplemental Information		
Comp ine 4	olete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, Part X, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b	, lines 1b and	2b, Part V,

TEEA3304 12/23/08

Schedule **D** (Form 990) 2008

BAA

Schedule D (Form 990) 2008 AGENDA FOR CHILDREN, INC.	72-1058157	Page 5
Schedule D (Form 990) 2008 AGENDA FOR CHILDREN, INC. Part XIV Supplemental Information (continued)		
•		
	-	
		-
		-
· · · · · · · · · · · · · · · · · · ·		
	 ·	

Supporting Statement of:

Form 990 p 10/Line 13 col (B)

Description	Amount
POSTAGE	5,172.
PRINTING	28,792.
SUPPLIES	88,225.
Total	122,189.

Supporting Statement of:

Form 990 p 10/Line 13 col (C)

	Description	Amount
Supplies		23,364.
Postage		4,184.
Printing		-654.
Total		26,894.

Schedule O (Form 990), Supplemental Information to Form 990 Form 990, Page 2, Part III, Line 1 (continued)

Briefly describe the organization's mission:

ADOLESCENCE; THAT THEY ARE PROTECTED FROM HARM; AND BY ACTING IN WAYS THAT COMBAT RACISM AND OTHER FORMS OF OPPRESSION.

ADOLESCENCE; THAT THEY ARE PROTECTED FROM HARM; AND BY ACTING IN WAYS THAT COMBAT RACISM AND OTHER FORMS OF OPPRESSION.