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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)

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

2010

Open to Public
Inspection

A For the 2010 calendar year, or tax year beginning 07/01, 2010, and ending 06/30, 2011

B Check if applicable

☐ Address change
☐ Name change
☐ Initial return
☐ Terminated
☐ Amended return
☐ Application pending

C Name of organization

CHAPIN HALL CENTER FOR CHILDREN

Doing Business As CHAPIN HALL AT THE UNIV. OF CHICAGO

Number and street (or P.O. box if mail is not delivered to street address)

1313 EAST 60TH STREET

Room/suite

City or town, state or country, and ZIP + 4

CHICAGO, IL 60637

F Name and address of principal officer

MATTHEW STAGNER

SAME AS C ABOVE

D Employer identification number

36-2167012

E Telephone number

(773) 753-5900

G Gross receipts \$ 13,716,878.**H(a)** Is this a group return for affiliates? ☐ Yes ☒ No**H(b)** Are all affiliates included? ☐ Yes ☐ No

If "No," attach a list. (see instructions)

H(c) Group exemption number**I** Tax-exempt status. ☒ 501(c)(3) ☐ 501(c) () (insert no) ☐ 4947(a)(1) or ☐ 527**J** Website: WWW.CHAPINHALL.ORG**K** Form of organization ☒ Corporation ☐ Trust ☐ Association ☐ Other ☐ **L** Year of formation 1865 **M** State of legal domicile IL**Part I** Summary

Activities & Governance	1	Briefly describe the organization's mission or most significant activities ESTABLISHED IN 1985, CHAPIN HALL IS AN INDEPENDENT POLICY RESEARCH CENTER WHOSE MISSION IS TO BUILD KNOWLEDGE THAT IMPROVES POLICIES AND PROGRAMS FOR CHILDREN AND YOUTH, FAMILIES, AND THEIR COMMUNITIES.		
	2	Check this box ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets		
	3	Number of voting members of the governing body (Part VI, line 1a)	3	29.
	4	Number of independent voting members of the governing body (Part VI, line 1b)	4	29.
	5	Total number of individuals employed in calendar year 2010 (Part V, line 2a)	5	0.
	6	Total number of volunteers (estimate if necessary)	6	0.
	7a	Total gross unrelated business revenue from Part VIII, column (C), line 12	7a	0.
7b	Net unrelated business taxable income from Form 990-T, line 34	7b	0.	
Revenue	8	Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
	9	Program service revenue (Part VIII, line 2g)	9,417,146.	11,093,760.
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	0.	0.
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	1,076,628.	2,083,820.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	-40,335.	-23,417.
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	10,453,439.	13,154,163.
	14	Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	0.	0.
	16a	Professional fundraising fees (Part IX, column (A), line 11e)	7,894,729.	8,574,000.
	16b	Total fundraising expenses (Part IX, column (D), line 25) 29,011.	0.	0.
Expenses	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	2,257,878.	3,237,037.
	18	Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)	10,152,607.	11,811,037.
	19	Revenue less expenses Subtract line 18 from line 12	300,832.	1,343,126.
	20	Total assets (Part X, line 16)	Beginning of Current Year	End of Year
Net Assets or Fund Balances	21	Total liabilities (Part X, line 26)	35,569,913.	39,976,599.
	22	Net assets or fund balances Subtract line 21 from line 20	7,921,951.	8,253,129.
			27,647,962.	31,723,470.

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here	Signature of officer	Date
	MATTHEW STAGNER, EXECUTIVE DIRECTOR	4/27/12

Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date	Check if self-employed	PTIN
	JOYCE UNDERWOOD	J Underwood	4/18/2012	☐	P00022361
	Firm's name	Firm's EIN	Phone no		
	BDO USA, LLP	13-5381590	301-654-4900		
	Firm's address	7101 WISCONSIN AVE, #800 BETHESDA, MD 20814			

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

For Paperwork Reduction Act Notice, see the separate instructions.

Form 990 (2010)

Part III Statement of Program Service AccomplishmentsCheck if Schedule O contains a response to any question in this Part III ☒

1 Briefly describe the organization's mission

ATTACHMENT 1

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

If "Yes," describe these new services on Schedule O

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

If "Yes," describe these changes on Schedule O

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

4a (Code _____) (Expenses \$ 9,271,395 including grants of \$ _____) (Revenue \$ _____)

ATTACHMENT 2

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

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

4d Other program services (Describe in Schedule O)

(Expenses \$ _____ including grants of \$ _____) (Revenue \$ _____)

4e Total program service expenses ► 9,271,395.

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	☒	☐
2 Is the organization required to complete Schedule B, Schedule of Contributors? (see instructions)	☒	☐
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	☐	☒
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.	☐	☒
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	☐	☐
6 Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	☐	☒
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.	☐	☒
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	☐	☒
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	☐	☒
10 Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V	☒	☐
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	☒	☐
b Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	☒	☐
c Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.	☐	☒
d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	☐	☒
e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	☒	☐
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	☒	☐
12 a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII.	☒	☐
b Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	☐	☒
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	☐	☒
14 a Did the organization maintain an office, employees, or agents outside of the United States?	☐	☒
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If "Yes," complete Schedule F, Parts I and IV	☐	☒
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, Parts II and IV	☐	☒
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, Parts III and IV	☐	☒
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	☐	☒
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	☐	☒
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	☐	☒
20 a Did the organization operate one or more hospitals? If "Yes," complete Schedule H	☐	☒
b If "Yes" to line 20a, did the organization attach its audited financial statements to this return? Note. Some Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions)	☐	☐

Part IV Checklist of Required Schedules (continued)

		Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II.	21	X
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? 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
24 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, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25.	24a	X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b	X
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	X
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d	X
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	X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I.	25b	X
26	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	X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? 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 instructions for applicable filing thresholds, conditions, and exceptions)		
a	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV.	28a	X
b	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, 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 contributions? If "Yes," complete Schedule M.	30	X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I.	31	X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II.	32	X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I.	33	X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, 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)?	35	X
a	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2. ☐ Yes ☒ No		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2.	36	X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI.	37	X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O.	38	X

Form 990 (2010)

Part V Statements Regarding Other IRS Filings and Tax ComplianceCheck if Schedule O contains a response to any question in this Part V. ☐

		Yes	No
1a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable.	1a 0		
b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable.	1b 0		
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c		
2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return.	2a 0		
b 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 (see instructions).	2b		
3a Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
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 financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X
b If "Yes," enter the name of the foreign country: See instructions for filing requirements for 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?	5a		X
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
c If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?	6a		X
b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7 Organizations that may receive deductible contributions under section 170(c).			
a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		X
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 Form 8282?	7c		X
d If "Yes," indicate the number of Forms 8282 filed during the year.	7d		
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8 Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		
9 Sponsoring organizations maintaining donor advised funds.			
a Did the organization make any taxable distributions under section 4966?	9a		
b Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10 Section 501(c)(7) organizations. Enter:			
a Initiation fees and capital contributions included on Part VIII, line 12.	10a		
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities.	10b		
11 Section 501(c)(12) organizations. Enter:			
a Gross income from members or shareholders.	11a		
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them).	11b		
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b If "Yes," enter the amount of tax-exempt interest received or accrued during the year.	12b		
13 Section 501(c)(29) qualified nonprofit health insurance issuers.			
a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O.	13a		
b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans.	13b		
c Enter the amount of reserves on hand.	13c		
14a Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.	14b		

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.

Check if Schedule O contains a response to any question in this Part VI ☒ X

Section A. Governing Body and Management

	Yes	No
1a Enter the number of voting members of the governing body at the end of the tax year 1a 29		
b Enter the number of voting members included in line 1a, above, who are independent 1b 29		
2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee? 2		X
3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? 3	X	
4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4		X
5 Did the organization become aware during the year of a significant diversion of the organization's assets? 5		X
6 Does the organization have members or stockholders? 6		X
7a Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body? 7a		X
b Are any decisions of the governing body subject to approval by members, stockholders, or other persons? 7b		X
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following		
a The governing body? 8a	X	
b Each committee with authority to act on behalf of the governing body? 8b	X	
9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O 9		X

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

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

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed IL,

18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply.
☐ Own website ☐ Another's website ☒ Upon request

19 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public.

20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization: ELIZABETH BENNETT 1313 EAST 60TH STREET CHICAGO, IL 60637
773-256-5149

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent ContractorsCheck if Schedule O contains a response to any question 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 nor any related organization compensated any current officer, director, or trustee

(A) Name and Title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) ADRIENNE Y. BAILEY DIRECTOR	1.00	X						0.		
(2) FRANCIS BEIDLER III DIRECTOR	1.00	X						0.		
(3) MICHAEL BENNETT DIRECTOR	1.00	X						0.		
(4) JOHN J. BORLAND, JR. DIRECTOR	1.00	X						0.		
(5) NORMAN M. BRADBURN CHAIR	2.00	X		X				0.		
(6) MAGGIE C. DALEY DIRECTOR	1.00	X						0.		
(7) ANNE COHN DONNELLY DIRECTOR	1.00	X						0.		
(8) SUSAN DREYFUS DIRECTOR	1.00	X						0.		
(9) STUART FLACK SECRETARY	2.00	X		X				0.		
(10) BEVERLY FLEMING VICE CHAIR	2.00	X		X				0.		
(11) JERRY FRIEDMAN DIRECTOR	1.00	X						0.		
(12) SUNIL GARG DIRECTOR	1.00	X						0.		
(13) PHILIP HALPERN TREASURER	2.00	X		X				0.		
(14) SUSAN LEVINE DIRECTOR	1.00	X						0.		
(15) MICHAEL LEVITAN DIRECTOR	1.00	X						0.		
(16) ROBERT B. LIFTON DIRECTOR	1.00	X						0.		

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

(A) Name and title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(17) SUSAN E. MAYER DIRECTOR	1.00	X						0.		
(18) CAMILLE ODEH DIRECTOR	1.00	X						0.		
(19) COLM O'MUIRCHEARTAIGH DIRECTOR	1.00	X						0.		
(20) ROBERTY PLANASKY DIRECTOR	1.00	X						0.		
(21) DIANA RAUNER DIRECTOR	1.00	X						0.		
(22) ELIZABETH DUNLOP RICHTER DIRECTOR	1.00	X						0.		
(23) ROBIN STEANS DIRECTOR	1.00	X						0.		
(24) ARTHUR SUSSMAN DIRECTOR	1.00	X						0.		
(25) MICHAEL WALD DIRECTOR	1.00	X						0.		
(26) HENRY S. WEBBER DIRECTOR	1.00	X						0.		
(27) CORNELIA GRUMMAN DIRECTOR	1.00	X						0.		
(28) JIM CROFT DIRECTOR	1.00	X						0.		
1b Sub-total								0.		
c Total from continuation sheets to Part VII, Section A	ATTACHMENT.3							1,123,060.		198,923.
d Total (add lines 1b and 1c)								1,123,060.		198,923.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization **6**

3 Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual

	Yes	No
3		X
4	X	
5		X

4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual

5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization

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

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

Part VIII Statement of Revenue

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, gifts, grants and other similar amounts	1a	Federated campaigns	1a				
	b	Membership dues	1b				
	c	Fundraising events	1c				
	d	Related organizations	1d				
	e	Government grants (contributions)	1e	965,970			
	f	All other contributions, gifts, grants, and similar amounts not included above	1f	10,127,790			
	g	Noncash contributions included in lines 1a-1f \$					
	h	Total. Add lines 1a-1f		11,093,760			
Program Service Revenue				Business Code			
	2a						
	b						
	c						
	d						
	e						
	f	All other program service revenue					
	g	Total. Add lines 2a-2f		0.			
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts)		266,893			266,893
	4	Income from investment of tax-exempt bond proceeds		0			
	5	Royalties		0.			
	6a	Gross Rents.	(i) Real	350,072.			
	b	Less rental expenses	(ii) Personal	373,489			
	c	Rental income or (loss)		-23,417.			
	d	Net rental income or (loss)		-23,417.	-23,417		
	7a	Gross amount from sales of assets other than inventory	(i) Securities	2,006,153			
	b	Less cost or other basis and sales expenses	(ii) Other	189,226			
	c	Gain or (loss)		1,816,927.			
	d	Net gain or (loss)		1,816,927			1,816,927
	8a	Gross income from fundraising events (not including \$ of contributions reported on line 1c) See Part IV, line 18	a				
	b	Less direct expenses	b				
	c	Net income or (loss) from fundraising events		0			
	9a	Gross income from gaming activities See Part IV, line 19	a				
	b	Less direct expenses	b				
	c	Net income or (loss) from gaming activities		0			
	10a	Gross sales of inventory, less returns and allowances	a				
b	Less cost of goods sold	b					
c	Net income or (loss) from sales of inventory		0.				
Miscellaneous Revenue			Business Code				
11a							
b							
c							
d	All other revenue						
e	Total. Add lines 11a-11d		0				
12	Total revenue. See instructions		13,154,163	-23,417		2,083,820	

Part IX Statement of Functional Expenses

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

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D)

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the U S See Part IV, line 21	0.			
2 Grants and other assistance to individuals in the U S See Part IV, line 22	0.			
3 Grants and other assistance to governments, organizations, and individuals outside the U S See Part IV, lines 15 and 16	0.			
4 Benefits paid to or for members	0.			
5 Compensation of current officers, directors, trustees, and key employees	491,901.	206,188.	272,842.	12,871.
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0.			
7 Other salaries and wages	8,082,099.	6,657,149.	1,408,894.	16,056.
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	0.			
9 Other employee benefits	0.			
10 Payroll taxes	0.			
11 Fees for services (non-employees)				
a Management	0.			
b Legal	0.			
c Accounting	31,250.		31,250.	
d Lobbying	0.			
e Professional fundraising services See Part IV, line 17	0.			
f Investment management fees	163,994.		163,994.	
g Other	1,400,175.	1,240,716.	159,459.	
12 Advertising and promotion	0.			
13 Office expenses	231,791.	176,756.	54,951.	84.
14 Information technology	163,195.	123,205.	39,990.	
15 Royalties	0.			
16 Occupancy	353,618.	257,713.	95,905.	
17 Travel	299,902.	193,310.	106,592.	
18 Payments of travel or entertainment expenses for any federal, state, or local public officials	0.			
19 Conferences, conventions, and meetings	107,725.	33,206.	74,519.	
20 Interest	0.			
21 Payments to affiliates	0.			
22 Depreciation, depletion, and amortization	193,616.	142,421.	51,195.	
23 Insurance	23,315.	17,394.	5,921.	
24 Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24f. If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O)				
a MISCELLANEOUS	231,947.	194,399.	37,548.	
b PROFESSIONAL DEVELOPMENT	36,509.	28,937.	7,572.	
c				
d				
e				
f All other expenses				
25 Total functional expenses. Add lines 1 through 24f	11,811,037.	9,271,394.	2,510,632.	29,011.
26 Joint Costs. Check here ☐ if following SOP 98-2 (ASC 958-720) Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Part X Balance Sheet

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing	2,151,141.	1	2,119,221.
	2 Savings and temporary cash investments	439,146.	2	819,508.
	3 Pledges and grants receivable, net		3	
	4 Accounts receivable, net	3,461,569.	4	3,116,848.
	5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L		5	
	6 Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions)		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges		9	515,450.
	10a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a 5,878,438.		
	b Less accumulated depreciation	10b 2,833,517.		
		2,815,738.	10c	3,044,921.
	11 Investments - publicly traded securities		11	
	12 Investments - other securities See Part IV, line 11	26,702,319.	12	29,963,730.
	13 Investments - program-related See Part IV, line 11		13	
	14 Intangible assets		14	
15 Other assets See Part IV, line 11		15	396,921.	
16 Total assets. Add lines 1 through 15 (must equal line 34)	35,569,913.	16	39,976,599.	
Liabilities	17 Accounts payable and accrued expenses	692,003.	17	1,378,616.
	18 Grants payable		18	
	19 Deferred revenue	1,077,269.	19	2,516,164.
	20 Tax-exempt bond liabilities	4,150,000.	20	3,950,000.
	21 Escrow or custodial account liability Complete Part IV of Schedule D		21	
	22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities Complete Part X of Schedule D	2,002,679.	25	408,349.
	26 Total liabilities. Add lines 17 through 25	7,921,951.	26	8,253,129.
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here ☒ and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	22,647,962.	27	26,723,470.
	28 Temporarily restricted net assets		28	
	29 Permanently restricted net assets	5,000,000.	29	5,000,000.
	Organizations that do not follow SFAS 117, check here ☐ and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds		30	
	31 Paid-in or capital surplus, or land, building, or equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
	33 Total net assets or fund balances	27,647,962.	33	31,723,470.
34 Total liabilities and net assets/fund balances	35,569,913.	34	39,976,599.	

Form 990 (2010)

Part XI Reconciliation of Net AssetsCheck if Schedule O contains a response to any question in this Part XI ☒

1	Total revenue (must equal Part VIII, column (A), line 12)	1	13,154,163.
2	Total expenses (must equal Part IX, column (A), line 25)	2	11,811,037.
3	Revenue less expenses Subtract line 2 from line 1	3	1,343,126.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	27,647,962.
5	Other changes in net assets or fund balances (explain in Schedule O)	5	2,732,382.
6	Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6	31,723,470.

Part XII Financial Statements and ReportingCheck if Schedule O contains a response to any question in this Part XII ☒

		Yes	No
1	Accounting method used to prepare the Form 990 ☐ Cash ☒ Accrual ☐ Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		X
b	Were the organization's financial statements audited by an independent accountant?	X	
c	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	X	
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a separate basis, consolidated basis, or both ☒ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis		
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		

Form **990** (2010)

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

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

OMB No 1545-0047

2010

**Open to Public
Inspection**

Name of the organization

CHAPIN HALL CENTER FOR CHILDREN

Employer identification number

36-2167012

Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is (For lines 1 through 11, check only one box.)

- 1 ☐ A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).
- 2 ☐ A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.)
- 3 ☐ A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).
- 4 ☐ A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state _____
- 5 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.)
- 6 ☐ A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).
- 7 ☒ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.)
- 8 ☐ A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.)
- 9 ☐ An organization that normally receives (1) more than 33 1/3 % of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3 % of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.)
- 10 ☐ An organization organized and operated exclusively to test for public safety. See section 509(a)(4).
- 11 ☐ An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h.
- a ☐ Type I b ☐ Type II c ☐ Type III - Functionally integrated d ☐ Type III - Other
- e ☐ By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2).
- f If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box ☐
- g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

- (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization? _____
- (ii) A family member of a person described in (i) above? _____
- (iii) A 35% controlled entity of a person described in (i) or (ii) above? _____

	Yes	No
11g(i)		
11g(ii)		
11g(iii)		

h Provide the following information about the supported organization(s)

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

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

Schedule A (Form 990 or 990-EZ) 2010

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	7,992,125.	8,076,213.	8,703,271.	9,417,146.	11,093,760.	45,282,515.
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3	7,992,125.	8,076,213.	8,703,271.	9,417,146.	11,093,760.	45,282,515.
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).						973,362
6 Public support. Subtract line 5 from line 4						44,309,153

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
7 Amounts from line 4	7,992,125.	8,076,213.	8,703,271.	9,417,146.	11,093,760.	45,282,515.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	891,623	780,922	485,884.	610,214.	616,965	3,385,608
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
11 Total support. Add lines 7 through 10						48,668,123.
12 Gross receipts from related activities, etc. (see instructions)					12	
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here						☐

Section C. Computation of Public Support Percentage

14 Public support percentage for 2010 (line 6, column (f) divided by line 11, column (f))	14	91.04 %
15 Public support percentage from 2009 Schedule A, Part II, line 14	15	86.04 %
16a 33 1/3 % support test - 2010. If the organization did not check the box on line 13, and line 14 is 33 1/3 % or more, check this box and stop here. The organization qualifies as a publicly supported organization		☒
b 33 1/3 % support test - 2009. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3 % or more, check this box and stop here. The organization qualifies as a publicly supported organization		☐
17a 10%-facts-and-circumstances test - 2010. If the organization did not check a box on line 13, 16a or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization		☐
b 10%-facts-and-circumstances test - 2009. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization		☐
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions		☐

Schedule A (Form 990 or 990-EZ) 2010

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 or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support (Subtract line 7c from line 6)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
13 Total support. (Add lines 9, 10c, 11, and 12)						
14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here ☐						

Section C. Computation of Public Support Percentage

15 Public support percentage for 2010 (line 8, column (f) divided by line 13, column (f))	15	%
16 Public support percentage from 2009 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2010 (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from 2009 Schedule A, Part III, line 17	18	%

19a 33 1/3 % support tests - 2010. 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 - 2009. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3 %, and line 18 is not more than 33 1/3 %, check this box and stop here. The organization qualifies as a publicly supported organization ☐

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

Part IV **Supplemental Information.** Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; or Part III, line 12. Also complete this part for any additional information. (See instructions)

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Name of the organization

CHAPIN HALL CENTER FOR CHILDREN

Supplemental Financial Statements

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

► Attach to Form 990. ► See separate instructions.

OMB No 1545-0047

2010

Open to Public
Inspection

Employer identification number

36-2167012

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

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate contributions to (during year)		
3 Aggregate grants from (during year)		
4 Aggregate value at end of year		
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?		☐ Yes ☐ No
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?		☐ Yes ☐ No

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

1 Purpose(s) of conservation easements held by the organization (check all that apply)

☐ Preservation of land for public use (e.g., recreation or education)	☐ Preservation of an historically important land area
☐ Protection of natural habitat	☐ Preservation of a certified historic structure
☐ Preservation of open space	

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year

	Held at the End of the Tax Year
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included in (a)	2c
d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ► _____

4 Number of states where property subject to conservation easement is located ► _____

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? ☐ Yes ☐ No

6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year ► _____

7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ► \$ _____

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)? ☐ Yes ☐ No

9 In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements

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

1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items

b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items.

(i) Revenues included in Form 990, Part VIII, line 1 ► \$ _____

(ii) Assets included in Form 990, Part X ► \$ _____

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items

a Revenues included in Form 990, Part VIII, line 1 ► \$ _____

b Assets included in Form 990, Part X ► \$ _____

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

Schedule D (Form 990) 2010

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

3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply)

- a ☐ Public exhibition d ☐ Loan or exchange programs
 b ☐ Scholarly research e ☐ Other _____
 c ☐ Preservation for future generations

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

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? ☐ Yes ☐ No

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

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XI V and complete the following table

	Amount
c Beginning balance	1c
d Additions during the year	1d
e Distributions during the year	1e
f Ending balance	1f

2a Did the organization include an amount on Form 990, Part X, line 21? ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XI V

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

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	12,088,528	11,050,394	12,703,271.		
b Contributions	0	0	0		
c Net investment earnings, gains, and losses	1,274,727.	1,078,009.	-1,620,636		
d Grants or scholarships	0.	0.	0		
e Other expenditures for facilities and programs	0	0.	0		
f Administrative expenses	43,534	39,875.	32,241		
g End of year balance	13,319,721	12,088,528.	11,050,394.		

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

- a Board designated or quasi-endowment ▶ 62.4600 %
 b Permanent endowment ▶ 37.5300 %
 c Term endowment ▶ 0.0000 %

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by

- (i) unrelated organizations
 (ii) related organizations

	Yes	No
3a(i)		X
3a(ii)		X
3b		

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

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

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

Description of investment	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings		5,575,036.	2,680,349.	2,894,687.
c Leasehold improvements				
d Equipment		303,402.	153,168.	150,234.
e Other				
Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c).)				3,044,921.

Schedule D (Form 990) 2010

Part VII Investments - Other Securities. See Form 990, Part X, line 12

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A) INVESTMENT PORTFOLIO (TRIP)	29,963,730.	FMV
(B) -----		
(C) -----		
(D) -----		
(E) -----		
(F) -----		
(G) -----		
(H) -----		
(I) -----		
Total. (Column (b) must equal Form 990, Part X, col (B) line 12) ▶	29,963,730.	

Part VIII Investments - Program Related. See Form 990, Part X, line 13.

(a) Description of investment type	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		
Total. (Column (b) must equal Form 990, Part X, col (B) line 13) ▶		

Part IX Other Assets. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
Total. (Column (b) must equal Form 990, Part X, col (B) line 15) ▶	

Part X Other Liabilities. See Form 990, Part X, line 25

1. (a) Description of liability	(b) Amount
(1) Federal income taxes	
(2) INTEREST RATE SWAP	408,349.
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
(11)	
Total. (Column (b) must equal Form 990, Part X, col (B) line 25) ▶	408,349.

2. FIN 48 (ASC 740) Footnote In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740)

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

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	13,154,163.
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	11,811,037.
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	1,343,126.
4	Net unrealized gains (losses) on investments	4	2,699,623.
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	32,659.
9	Total adjustments (net) Add lines 4 through 8	9	2,732,282.
10	Excess or (deficit) for the year per audited financial statements Combine lines 3 and 9	10	4,075,408.

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

1	Total revenue, gains, and other support per audited financial statements	1	16,096,080.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a	Net unrealized gains on investments	2a	2,699,623.
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIV)	2d	32,659.
e	Add lines 2a through 2d	2e	2,732,282.
3	Subtract line 2e from line 1	3	13,363,798.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	163,854.
b	Other (Describe in Part XIV)	4b	-373,489.
c	Add lines 4a and 4b	4c	-209,635.
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5	13,154,163.

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

1	Total expenses and losses per audited financial statements	1	12,020,572.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIV)	2d	373,489.
e	Add lines 2a through 2d	2e	373,489.
3	Subtract line 2e from line 1	3	11,647,083.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	163,854.
b	Other (Describe in Part XIV)	4b	
c	Add lines 4a and 4b	4c	163,854.
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	5	11,810,937.

Part XIV Supplemental Information

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, line 2, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b. Also complete this part to provide any additional information.

SEE PAGE 5

Part XIV Supplemental Information (continued)

PART V, LINE 4

THE ORGANIZATION PLANS TO USE THE ENDOWMENT TO PROVIDE PARTIAL FUNDING TO FINANCE RESEARCH OPERATIONS AT CHAPIN HALL. CHAPIN HALL'S INVESTMENTS, WHICH INCLUDE THE PERMANENTLY RESTRICTED ENDOWMENT, THE BOARD RESTRICTED ENDOWMENT AND OTHER BOARD DESIGNATED FUNDS (QUASI-ENDOWMENT), ARE INTENDED TO PROVIDE INCOME AND APPRECIATION OVER TIME, AT A RATE THAT EXCEEDS THE ANNUAL 5% PAY-OUT FROM FUNDS AND MANAGEMENT FEES. OVER TIME IT IS EXPECTED THAT THE FUNDS WILL GROW TO MATCH BOTH INFLATIONARY NEEDS AND STRATEGIC OPPORTUNITIES.

PART X, LINE 2, FIN 48

IN 2010, CHAPIN HALL ADOPTED ASC 740-10-25. THE ADOPTION AND CONTINUING APPLICATION OF ASC 740-10-25 HAD NO MATERIAL EFFECT ON CHAPIN HALL'S FINANCIAL STATEMENTS. NO INTEREST OR PENALTIES HAVE BEEN ACCRUED RELATIVE TO TAX POSITIONS. AS A RESULT, NO LIABILITY FOR UNCERTAIN TAX POSITIONS HAS BEEN RECORDED AS OF JUNE 30, 2011 OR 2010. TAX YEARS GOING BACK TO 2008 REMAIN OPEN.

PART XI, LINE 8

CHANGE IN FAIR VALUE OF INTEREST RATE SWAP: \$32,659

Part XIV Supplemental Information (continued)

PART XII, LINE 2D

CHANGE IN FAIR VALUE OF INTEREST RATE SWAP: \$32,659

PART XII, LINE 4B

RENTAL EXPENSES -\$373,489

PART XIII, LINE 2D

RENTAL EXPENSES \$373,489

**SCHEDULE J
(Form 990)**

Department of the Treasury
Internal Revenue Service

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest
Compensated Employees

▶ Complete if the organization answered "Yes" to Form 990,
Part IV, line 23.

▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

2010

**Open to Public
Inspection**

Name of the organization

CHAPIN HALL CENTER FOR CHILDREN

Employer identification number

36-2167012

Part I Questions Regarding Compensation

1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.

☒ First-class or charter travel

☐ Travel for companions

☐ Tax indemnification and gross-up payments

☐ Discretionary spending account

☐ Housing allowance or residence for personal use

☐ Payments for business use of personal residence

☐ Health or social club dues or initiation fees

☐ Personal services (e.g., maid, chauffeur, chef)

b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain.

2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?

3 Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director. Check all that apply.

☒ Compensation committee

☐ Independent compensation consultant

☒ Form 990 of other organizations

☒ Written employment contract

☒ Compensation survey or study

☒ Approval by the board or compensation committee

4 During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:

a Receive a severance payment or change-of-control payment from the organization or a related organization?

b Participate in, or receive payment from, a supplemental nonqualified retirement plan?

c Participate in, or receive payment from, an equity-based compensation arrangement?

If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.

Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9.

5 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:

a The organization?

b Any related organization?

If "Yes" to line 5a or 5b, describe in Part III.

6 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:

a The organization?

b Any related organization?

If "Yes" to line 6a or 6b, describe in Part III.

7 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III.

8 Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III.

9 If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

Yes No

1b

X

2

X

4a

X

4b

X

4c

X

5a

X

5b

X

6a

X

6b

X

7

X

8

X

9

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

Schedule J (Form 990) 2010

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

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

Note. The sum of columns (B)(i)-(iii) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a.

(A) Name	(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
1 MATTHEW WARD STAGNER	(i) 236,454.	(ii) 0.	(iii) 0.	29,600.	24,490.	290,544.	0.
2 ADA SKYLES	(i) 155,921.	(ii) 0.	(iii) 0.	12,546.	1,111.	169,578.	0.
3 ROBERT GOERGE	(i) 193,692.	(ii) 0.	(iii) 0.	16,245.	22,105.	232,042.	0.
4 DEBORAH DARO TUGGLE	(i) 155,399.	(ii) 0.	(iii) 0.	13,209.	20,327.	188,935.	0.
5 FRIEDHELM WULCZYN	(i) 200,047.	(ii) 0.	(iii) 0.	16,209.	7,474.	223,730.	0.
6 DEBORAH GOREMAN-SMITH	(i) 181,547.	(ii) 0.	(iii) 0.	15,145.	20,462.	217,154.	0.
7	(i)	(ii)	(iii)				
8	(i)	(ii)	(iii)				
9	(i)	(ii)	(iii)				
10	(i)	(ii)	(iii)				
11	(i)	(ii)	(iii)				
12	(i)	(ii)	(iii)				
13	(i)	(ii)	(iii)				
14	(i)	(ii)	(iii)				
15	(i)	(ii)	(iii)				
16	(i)	(ii)	(iii)				

Schedule J (Form 990) 2010

Part III Supplemental Information

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

SCHEDULE J, LINE 1A

FIRST-CLASS OR CHARTER TRAVEL

THE UNIVERSITY OF CHICAGO'S (AND CHAPIN HALL'S) POLICY IS TO RECEIVE

PRIOR APPROVAL FROM THE PROVOST'S OFFICE BEFORE PURCHASING A FIRST OR

BUSINESS CLASS AIR FARE TICKET. DR. FRED WULCZYN RECEIVED A GRANT FROM

NEW SOUTH WALES, AUSTRALIA, WHICH REQUIRES TRIPS BETWEEN THE UNITED

STATES AND AUSTRALIA. DUE TO THE STRENUOUS DURATION OF TRAVELING, DR.

WULCZYN WAS GIVEN PERMISSION BY BOTH THE GRANTOR AND UOFC'S PROVOST

OFFICE TO TRAVEL FIRST CLASS TO AUSTRALIA.

**SCHEDULE K
(Form 990)**

Department of the Treasury
Internal Revenue Service

Supplemental Information on Tax-Exempt Bonds

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information on Schedule O (Form 990).

▶ Attach to Form 990. ▶ See separate instructions.

OMB No. 1545-0047

2010

Open to Public
Inspection

Name of the organization

CHAPIN HALL CENTER FOR CHILDREN

Employer identification number

36-2167012

Part I Bond Issues

(a) Issuer name	(b) Issuer EIN	(c) CUSIP #	(d) Date issued	(e) Issue price	(f) Description of purpose	(g) Defeased		(h) On behalf of issuer		(i) Pooled Financing
						Yes	No	Yes	No	Yes No
A ILLINOIS EDUCATIONAL FACILITIES AUTHORITY	52-1297563	4520014V9	05/15/2003	5,250,000	REFUND 1994 BONDS, INTEREST AN		X		X	X
B										
C										
D										

Part II Proceeds

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
1 Amount of bonds retired								
2 Amount of bonds legally defeased								
3 Total proceeds of issue		5,235,737.						
4 Gross proceeds in reserve funds								
5 Capitalized interest from proceeds								
6 Proceeds in refunding escrows		5,100,512.						
7 Issuance costs from proceeds		105,000.						
8 Credit enhancement from proceeds								
9 Working capital expenditures from proceeds		30,225.						
10 Capital expenditures from proceeds								
11 Other spent proceeds								
12 Other unspent proceeds								
13 Year of substantial completion	1985							
14 Were the bonds issued as part of a current refunding issue?	X							
15 Were the bonds issued as part of an advance refunding issue?		X						
16 Has the final allocation of proceeds been made?	X							
17 Does the organization maintain adequate books and records to support the final allocation of proceeds?	X							

Part III Private Business Use

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
1 Was the organization a partner in a partnership, or a member of an LLC, which owned property financed by tax-exempt bonds?		X						
2 Are there any lease arrangements that may result in private business use of bond-financed property?		X						

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

Schedule K (Form 990) 2010

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Part III Private Business Use (Continued)

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
3a Are there any management or service contracts that may result in private business use of bond-financed property?		X						
b Are there any research agreements that may result in private business use of bond-financed property?		X						
c Does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts or research agreements relating to the financed property?		X						
4 Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government							%	%
5 Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 501(c)(3) organization, or a state or local government							%	%
6 Total of lines 4 and 5							%	%
7 Has the organization adopted management practices and procedures to ensure the post-issuance compliance of its tax-exempt bond liabilities?	X							

Part IV Arbitrage

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
1 Has a Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate, been filed with respect to the bond issue?	X							
2 Is the bond issue a variable rate issue?	X							
3a Has the organization or the governmental issuer entered into a qualified hedge with respect to the bond issue?		X						
b Name of provider								
c Term of hedge								
d Was the hedge superintegrated?								
e Was the hedge terminated?								
4a Were gross proceeds invested in a GIC?		X						
b Name of provider								
c Term of GIC								
d Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?								
5 Were any gross proceeds invested beyond an available temporary period?		X						
6 Did the bond issue qualify for an exception to rebate?	X							

Part V Supplemental Information. Complete this part to provide additional information for responses to questions on Schedule K (see instructions).

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

OMB No 1545-0047

2010

**Open to Public
Inspection**

Name of the organization

CHAPIN HALL CENTER FOR CHILDREN

Employer identification number

36-2167012

PART VI, SECTION A, LINE 3

THE UNIVERSITY OF CHICAGO PROVIDES CERTAIN ADMINISTRATIVE SUPPORT TO
CHAPIN HALL. CHAPIN HALL HAS NO OFFICIAL EMPLOYEES OF ITS OWN; ALL STAFF
ARE EMPLOYEES OF THE UNIVERSITY OF CHICAGO. ACCORDINGLY, THE UNIVERSITY
OF CHICAGO IS RESPONSIBLE FOR ISSUING ALL 1099S, W-2S AND FILING ALL
PAYROLL TAX RETURNS. FOUR DIRECTORS OF CHAPIN HALL, SUSAN MAYER, SUSAN
LEVINE, JEANNE MARSH, AND COLM O'MUIRCHEARTAIGH, ARE ALSO EMPLOYEES OF
THE UNIVERSITY OF CHICAGO.

PART VI, SECTION A, LINE 11

THE ORGANIZATION'S FORM 990 UNDERGOES A NUMBER OF INTERNAL AND EXTERNAL
REVIEWS BEFORE IT IS FILED WITH THE IRS. THE RETURN IS PREPARED BY THE
ORGANIZATION'S PUBLIC ACCOUNTING FIRM, BDO USA, LLP AND IS REVIEWED BY
THE ORGANIZATION'S DIRECTOR OF FINANCE AND BUDGET. A FINAL DRAFT OF THE
FORM 990 IS PROVIDED TO EACH MEMBER OF THE ORGANIZATION'S BOARD OF
DIRECTORS BEFORE IT IS FILED WITH THE IRS.

PART VI, SECTION B, LINE 12C

ANNUALLY, THE OFFICERS AND DIRECTORS OF THE CORPORATION MUST COMPLETE A
CONFLICT OF INTEREST STATEMENT THAT IS REVIEWED AND MONITORED BY THE
ASSOCIATE DIRECTOR. ADDITIONALLY, EACH OFFICER AND DIRECTOR ACKNOWLEDGES
THAT SHOULD A POSSIBLE CONFLICT ARISE, IT IS HIS OR HER OBLIGATION TO
CALL IT TO THE ATTENTION OF THE CHAIR OF THE BOARD OF DIRECTORS OR THE
EXECUTIVE DIRECTOR OF CHAPIN HALL, AS APPROPRIATE, AND TO ABSTAIN FROM

Name of the organization

CHAPIN HALL CENTER FOR CHILDREN

Employer identification number

36-2167012

ANY PARTICIPATION IN THE MATTER.

ANNUALLY, THE EXECUTIVE DIRECTOR AND ASSOCIATE DIRECTOR ARE REQUIRED TO COMPLETE THE UNIVERSITY OF CHICAGO CONFLICT OF INTEREST ASSURANCE AND, WHEN APPROPRIATE, DISCLOSURE OF THE INFORMATION REGARDING OUTSIDE PROFESSIONAL AND COMMERCIAL INTERESTS/CONFLICT OF INTEREST STATEMENT. THIS IS MONITORED BY THE UNIVERSITY OF CHICAGO UNIVERSITY RESEARCH ADMINISTRATION.

PART VI, SECTION B, LINE 15

ON AN ANNUAL BASIS THE COMPENSATION COMMITTEE OF THE CHAPIN HALL BOARD OF DIRECTORS MEETS TO REVIEW THE CURRENT COMPENSATION OF THE EXECUTIVE DIRECTOR, SENIOR ADMINISTRATIVE STAFF AND SENIOR RESEARCH STAFF, AND TO MAKE RECOMMENDATIONS FOR ANNUAL SALARY INCREASES. DATA THAT IS CONSIDERED IN SALARY DECISIONS INCLUDES INTERNAL COMPARABILITY DATA, EXTERNAL MARKET DATA, AND ECONOMIC INDICATORS SUCH AS THE FISCAL HEALTH OF THE ORGANIZATION AND THE CONSUMER PRICE INDEX. RECOMMENDATIONS FOR SALARY INCREASES ARE THEN FORWARDED TO THE EXECUTIVE COMMITTEE OF THE BOARD OF DIRECTORS FOR REVIEW AND APPROVAL.

PART VI, SECTION C, LINE 19

THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC UPON REQUEST.

PART XI, LINE 3

CHAPIN HALL'S RESEARCH GRANTS AND CONTRACTS ARE PRIMARILY ARRANGED

Name of the organization

Employer identification number

CHAPIN HALL CENTER FOR CHILDREN

36-2167012

THROUGH THE UNIVERSITY OF CHICAGO FOR FY 2011. ACCORDINGLY, AUDITS
REQUIRED THROUGH THE SINGLE AUDIT ACT AND OMB CIRCULAR A-133 WERE CARRIED
OUT THROUGH THE UNIVERSITY OF CHICAGO.

CHAPIN HALL'S DIRECT FEDERAL GRANTS FOR FY 2011 DO NOT REQUIRE AN A-133
AUDIT.

ATTACHMENT 1FORM 990, PART III, LINE 1 - ORGANIZATION'S MISSION

ESTABLISHED IN 1985, CHAPIN HALL IS AN INDEPENDENT POLICY RESEARCH
CENTER WHOSE MISSION IS TO BUILD KNOWLEDGE THAT IMPROVES POLICIES
AND PROGRAMS FOR CHILDREN AND YOUTH, FAMILIES, AND THEIR
COMMUNITIES.

THE AIM OF CHAPIN HALL'S MULTIDISCIPLINARY RESEARCH IS TO LEARN MORE
ABOUT THE STATE OF OUR YOUNG PEOPLE AND THEIR FAMILIES AND THE DEGREE
TO WHICH THE POLICIES AND PROGRAMS DESIGNED TO SUPPORT THEM ARE
SUCCEEDING. WHILE OUR RESEARCH CONCERNS THE WELL-BEING OF ALL
CHILDREN AND YOUTH, WE PARTICULARLY FOCUS ON WHAT IS HAPPENING TO THE
MOST VULNERABLE SO THAT POLICYMAKERS AND PRACTITIONERS CAN CREATE
INSTITUTIONS AND PROGRAMS THAT WILL HELP THEM DEVELOP INTO HEALTHY,
EDUCATED, PRODUCTIVE ADULTS.

THE CONCEPT OF CHAPIN HALL HAS BEEN REPLICATED IN MANY OTHER
LOCATIONS WITHIN AND OUTSIDE THE UNITED STATES, OFTEN WITH THE HELP
OF CHAPIN HALL RESEARCH FELLOWS. CHAPIN HALL SERVES AS A FULCRUM FOR
INTERCHANGE AMONG THE COMMUNITIES OF PUBLIC POLICY AND CHILD-FAMILY

Name of the organization

Employer identification number

CHAPIN HALL CENTER FOR CHILDREN

36-2167012

ATTACHMENT 1 (CONT'D)FORM 990, PART III, LINE 1 - ORGANIZATION'S MISSION

RESEARCH, BOTH NATIONALLY AND INTERNATIONALLY.

ATTACHMENT 2FORM 990, PART III - PROGRAM SERVICE, LINE 4A

CHAPIN HALL AT THE UNIVERSITY OF CHICAGO HAS, SINCE ITS INCEPTION
IN 1985 AS A RESEARCH AND POLICY CENTER, FOCUSED ON A MISSION OF
IMPROVING THE WELL-BEING OF CHILDREN AND YOUTH, FAMILIES, AND
THEIR COMMUNITIES.

WE DO THIS THROUGH POLICY RESEARCH-BY DEVELOPING AND TESTING NEW
IDEAS, GENERATING AND ANALYZING INFORMATION, AND EXAMINING
POLICIES, PROGRAMS, AND PRACTICES ACROSS A WIDE RANGE OF SERVICE
SYSTEMS AND ORGANIZATIONS.

CHAPIN HALL TAKES A BROAD PERSPECTIVE, EMBRACING AN INTEREST IN
POLICIES THAT PROMOTE THE WELL-BEING OF ALL CHILDREN AND YOUTH
WHILE DEVOTING SPECIAL ATTENTION TO THOSE FACING SIGNIFICANT
PROBLEMS. OUR PERSPECTIVE ALSO ENCOMPASSES THEIR FAMILIES AND
THEIR COMMUNITIES, RECOGNIZING THAT WE CANNOT IMPROVE
CIRCUMSTANCES FOR CHILDREN AND YOUTH IN ISOLATION. THE COMMUNITY
CONTEXT IN WHICH CHILDREN AND YOUTH LIVE INFLUENCES THEIR
WELL-BEING IN IMPORTANT WAYS. WE ARE INTERESTED AS MUCH IN
PREVENTING PROBLEMS AS IN AMELIORATING THEM, AND THIS BROAD
PERSPECTIVE AFFORDS US THE OPPORTUNITY TO DO BOTH.

Name of the organization

CHAPIN HALL CENTER FOR CHILDREN

Employer identification number

36-2167012

ATTACHMENT 2 (CONT'D)

CHAPIN HALL'S IMPACT DERIVES LARGELY FROM A DISTINCTIVE MARRIAGE OF THE MOST RIGOROUS ACADEMIC RESEARCH WITH INNOVATIVE PARTNERSHIPS WITH THE PUBLIC SYSTEMS, INSTITUTIONS, ORGANIZATIONS, AND PROGRAMS THAT ARE IN A POSITION TO BEST DEPLOY THAT RESEARCH. TAKEN TOGETHER, THIS BROAD PERSPECTIVE AND COMMITMENT TO WORKING IN PARTNERSHIP FORM THE CORNERSTONE OF OUR EFFORTS.

CHAPIN HALL RESEARCHERS COME FROM A VARIETY OF ACADEMIC BACKGROUNDS, INCLUDING SOCIAL WORK, PUBLIC POLICY, EDUCATION, ECONOMICS, SOCIOLOGY, PSYCHOLOGY, AND LAW. MANY HAVE SIGNIFICANT DIRECT SERVICE EXPERIENCE THAT INFORMS AND ENRICHES THEIR RESEARCH. OTHERS HAVE WORKED IN FEDERAL AND STATE GOVERNMENT, SERVICE AGENCIES, OR POLICY RESEARCH ORGANIZATIONS. WE ARE ENRICHED AS WELL BY OUR AFFILIATION WITH THE UNIVERSITY OF CHICAGO. OUR RESEARCH STAFF COLLABORATES FREQUENTLY WITH FACULTY MEMBERS IN A NUMBER OF UNIVERSITY DEPARTMENTS AND PROFESSIONAL SCHOOLS. SOME OF OUR RESEARCHERS TEACH AT THE UNIVERSITY OF CHICAGO OR HAVE HELD FACULTY POSITIONS AT OTHER UNIVERSITIES. THIS BREADTH OF EXPERIENCE PROVIDES CHAPIN HALL WITH ITS DISTINCTIVE BLEND OF ACADEMIC RIGOR AND PRACTICAL PROBLEM SOLVING.

OUR RESEARCHERS MEET REGULARLY WITH POLICYMAKERS, AGENCY DIRECTORS, PHILANTHROPIC ORGANIZATIONS, AND COMMUNITY GROUPS TO ASSURE THAT IMPORTANT FINDINGS ARE PLACED DIRECTLY IN THE HANDS OF THOSE WHO CAN BEST USE THEM. THESE PARTNERSHIPS OFTEN RAISE NEW

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ATTACHMENT 2 (CONT'D)

QUESTIONS FOR RESEARCHERS AND SUGGEST NEW AREAS OF INQUIRY,
LEADING US TO DELVE DEEPER AND REACH FURTHER.

IT IS SELDOM POSSIBLE TO IMPROVE OUR COMMUNITIES OR THE
CIRCUMSTANCES OF CHILDREN AND FAMILIES THROUGH A SINGLE POLICY OR
A SINGLE SYSTEM. POLICIES ARE NESTED WITHIN SYSTEMS, AND MUCH OF
OUR WORK TAKES PLACE AT THE INTERSECTION OF ONE OR MORE SYSTEMS.
FOR EXAMPLE, EDUCATION SYSTEMS STRUGGLE TO MEET THE NEEDS OF YOUNG
PEOPLE WHO HAVE BEEN INVOLVED WITH THE JUVENILE JUSTICE SYSTEM.
STUDENTS WHO STRUGGLE IN HIGH SCHOOL OR WHO DROP OUT MAY HAVE
DIFFICULTY BECOMING CONNECTED TO OPPORTUNITIES TO PREPARE FOR OR
PARTICIPATE IN THE WORKFORCE. CHILDREN IN FOSTER CARE OFTEN COME
FROM FAMILIES LIVING IN POVERTY OR AFFLICTED BY SUBSTANCE ABUSE OR
MENTAL HEALTH PROBLEMS. HOME VISITATION FOR NEWBORNS AND PARENTS
MAY HELP PREVENT LATER MALTREATMENT, BUT IT IS BEST NESTED IN A
SYSTEM OF CARE THAT ALSO INCLUDES HEALTH CARE AND EARLY EDUCATION.
BY WORKING AT THE NEXUS OF MULTIPLE SERVICES AND SYSTEMS-FORMAL
SERVICE SYSTEMS AS WELL AS COMMUNITY AND NORMATIVE SYSTEMS-OUR
LEVERAGE FOR IMPROVING THESE CIRCUMSTANCES IS MULTIPLIED.

CHAPIN HALL'S RESEARCH AGENDA LOOKS WITHIN SYSTEMS, SUCH AS CHILD
WELFARE AND EDUCATION, TO LEARN HOW VARIOUS POLICIES, PROGRAMS,
AND PRACTICES ARE SUCCEEDING OR STRUGGLING.

WE ALSO LOOK ACROSS SYSTEMS TO LEARN HOW THEY DO AND DO NOT WORK

Name of the organization

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ATTACHMENT 2 (CONT'D)

TOGETHER ON BEHALF OF THE CHILDREN AND FAMILIES THAT THEY ARE
DESIGNED TO SERVE.

FINALLY, WE LOOK BEYOND SYSTEMS TO THE COMMUNITIES IN WHICH
CHILDREN, YOUTH, AND FAMILIES LIVE AND HOW THEY SUPPORT-OR THWART-
HEALTHY DEVELOPMENT.

ATTACHMENT 3

PART VII - CONTINUATION OF OFFICERS, DIRECTORS, TRUSTEES,
KEY EMPLOYEES AND HIGHEST COMPENSATED EMPLOYEES

(1)=IND.TRUSTEE/DIR. (2)=INS.TRUSTEE (3)=OFFICER (4)=KEY EMP. (5)=HIGHEST COMP. (6)=FORMER

(A) NAME AND TITLE	(B) HOURS	(C) POSITION						COMPENSATION FROM		
		(1)	(2)	(3)	(4)	(5)	(6)	(D) ORG.	(E) REL. ORG.	(F) OTHER
29 NEIL B. GUTTERMAN DIRECTOR	1.00	X							0.	
30 RICHARD JONES DIRECTOR	1.00	X							0.	
31 MATTHEW WARD STAGNER EXECUTIVE DIRECTOR	40.00				X			236,454.		54,090.
32 ADA SKYLES ASSOCIATE DIRECTOR	40.00					X		155,921.		13,657.
33 ROBERT GOERGE RESEARCH FELLOW	40.00					X		193,692.		38,350.
34 DEBORAH DARO TUGGLE RESEARCH FELLOW	40.00					X		155,399.		33,536.
35 FRIEDHELM WULCZYN RESEARCH FELLOW	40.00					X		200,047.		23,683.
36 DEBORAH GOREMAN-SMITH RESEARCH FELLOW	40.00					X		181,547.		35,607.

ATTACHMENT 4

Name of the organization

CHAPIN HALL CENTER FOR CHILDREN

Employer identification number

36-2167012

ATTACHMENT 4 (CONT'D)

FORM 990, PART X - PREPAID EXPENSES AND DEFERRED CHARGESDESCRIPTIONENDING
BOOK VALUE

DEFERRED UNEXECUTED CONTRACT

EXPENSES

515,450.

TOTALS

515,450.

Application for Extension of Time To File an Exempt Organization Return

OMB No 1545-1709

► **File a separate application for each return.**

- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** and check this box ☒
- If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** (on page 2 of this form).

Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868

Electronic filing (e-file). You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/efile and click on e-file for **Charities & Nonprofits**.

Part I Automatic 3-Month Extension of Time. Only submit original (no copies needed).

A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete

Part I only

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

Type or print	Name of exempt organization	Employer identification number
	CHAPIN HALL CENTER FOR CHILDREN	36-2167012
File by the due date for filing your return. See instructions.	Number, street, and room or suite no. If a P.O. box, see instructions.	
	1313 EAST 60TH STREET	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions	
	CHICAGO, IL 60637	

Enter the Return code for the return that this application is for (file a separate application for each return)

01

Application Is For	Return Code	Application Is For	Return Code
Form 990	01	Form 990-T (corporation)	07
Form 990-BL	02	Form 1041-A	08
Form 990-EZ	03	Form 4720	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

ELIZABETH BENNETT

- The books are in the care of ► 1313 EAST 60TH STREET - CHICAGO, IL 60637

Telephone No. ► 773-256-5149

FAX No. ►

- If the organization does not have an office or place of business in the United States, check this box ☐
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) ☐ If this is for the whole group, check this box ☐. If it is for part of the group, check this box ☐ and attach a list with the names and EINs of all members the extension is for.

1 I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until **FEBRUARY 15, 2012**, to file the exempt organization return for the organization named above. The extension

is for the organization's return for:

► ☐ calendar year _____ or

► ☒ tax year beginning **JUL 1, 2010**, and ending **JUN 30, 2011**

2 If the tax year entered in line 1 is for less than 12 months, check reason: ☐ Initial return ☐ Final return
☐ Change in accounting period

3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	3a	\$	0.
b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	3b	\$	0.
c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	3c	\$	0.

Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

LHA For Paperwork Reduction Act Notice, see Instructions.

Form 8868 (Rev. 1-2011)

- If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only Part II and check this box. ☒ **X**

Note. Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868.

- If you are filing for an **Automatic 3-Month Extension**, complete only Part I (on page 1)

Part II Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no copies needed).

Type or print File by the extended due date for filing your return. See instructions.	Name of exempt organization		Employer identification number
	CHAPIN HALL CENTER FOR CHILDREN		36-2167012
	Number, street, and room or suite no. If a P.O. box, see instructions		
	1313 EAST 60TH STREET		
City, town or post office, state, and ZIP code. For a foreign address, see instructions.			
CHICAGO, IL 60637			

Enter the Return code for the return that this application is for (file a separate application for each return)

Application Is For	Return Code	Application Is For	Return Code
Form 990	01		
Form 990-BL	02	Form 1041-A	08
Form 990-EZ	03	Form 4720	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.

- The books are in the care of
Telephone No FAX No
- If the organization does not have an office or place of business in the United States, check this box ☐
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If this is for the whole group, check this box ☐. If it is for part of the group, check this box ☐ and attach a list with the names and EINs of all members the extension is for

- I request an additional 3-month extension of time until
- For calendar year , or other tax year beginning , and ending
- If the tax year entered in line 5 is for less than 12 months, check reason: ☐ Initial return ☐ Final return
☐ Change in accounting period
- State in detail why you need the extension DUE TO THE COMPLEXITY OF THE RETURN, ADDITIONAL TIME IS NECESSARY TO COMPILE THE INFORMATION NEEDED FOR A COMPLETE AND ACCURATE RETURN.

8a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	8a \$
b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868.	8b \$
c Balance Due. Subtract line 8b from line 8a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	8c \$ 0

Signature and Verification

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form.

Signature Title Date
Form 8868 (Rev. 1-2011)