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2012

Open to Public  
Inspection

Form 990

Department of the Treasury  
Internal Revenue Service

## 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

## A For the 2012 calendar year, or tax year beginning 07-01-2012, 2012, and ending 06-30-2013

B Check if applicable	C Name of organization THE CHILDREN'S AID SOCIETY		D Employer identification number 13-5562191
<input type="checkbox"/> Address change	Doing Business As		
<input type="checkbox"/> Name change			
<input type="checkbox"/> Initial return	Number and street (or P O box if mail is not delivered to street address)	Room/suite	E Telephone number (212) 949-4800
<input type="checkbox"/> Terminated			
<input type="checkbox"/> Amended return	City or town, state or country, and ZIP + 4 NEW YORK, NY 10010		
<input type="checkbox"/> Application pending			G Gross receipts \$ 236,899,519
F Name and address of principal officer WILLIAM D WEISBERG PHD 105 EAST 22ND STREET NEW YORK, NY 10010		H(a) Is this a group return for affiliates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

I Tax-exempt status  501(c)(3)  501(c) ( ) (insert no)  4947(a)(1) or  527

J Website: ► WWW CHILDRENSAIDSOCIETY.ORG

K Form of organization  Corporation  Trust  Association  Other ► L Year of formation 1855 M State of legal domicile NY

## Part I Summary

1 Briefly describe the organization's mission or most significant activities THE CHILDREN'S AID SOCIETY HELPS NEW YORK CITY CHILDREN IN POVERTY TO SUCCEED AND THRIVE		
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	31
4 Number of independent voting members of the governing body (Part VI, line 1b) . . . . .	4	31
5 Total number of individuals employed in calendar year 2012 (Part V, line 2a) . . . . .	5	2,701
6 Total number of volunteers (estimate if necessary) . . . . .	6	850
7a Total unrelated business revenue from Part VIII, column (C), line 12 . . . . .	7a	68,573
b Net unrelated business taxable income from Form 990-T, line 34 . . . . .	7b	0

8 Contributions and grants (Part VIII, line 1h) . . . . .	Prior Year	Current Year
9 Program service revenue (Part VIII, line 2g) . . . . .	36,739,102	31,966,571
10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) . . . . .	60,104,695	65,750,966
11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) . . . . .	42,378,997	19,165,220
12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) . . . . .	537,826	271,697
	139,760,620	117,154,454

13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) . . . . .	Prior Year	Current Year
14 Benefits paid to or for members (Part IX, column (A), line 4) . . . . .	3,547,925	6,365,867
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) . . . . .	73,989,390	79,934,530
b Total fundraising expenses (Part IX, column (D), line 25) ► 3,103,804 . . . . .	55,599	69,381
17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) . . . . .	32,698,904	35,322,782
18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) . . . . .	110,291,818	121,692,560
19 Revenue less expenses Subtract line 18 from line 12 . . . . .	29,468,802	-4,538,106

20 Total assets (Part X, line 16) . . . . .	Beginning of Current Year	End of Year
21 Total liabilities (Part X, line 26) . . . . .	303,789,232	326,166,823
22 Net assets or fund balances Subtract line 21 from line 20 . . . . .	51,667,166	48,443,863
	252,122,066	277,722,960

## 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 WILLIAM D WEISBERG PHD INTERIM PRESIDENT AND CEO Type or print name and title	2014-05-14 Date
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Paid Preparer Use Only	Print/Type preparer's name ROBERT R LYONS CPA	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed	PTIN P00227472
	Firm's name ► MARKS PANETH LLP			Firm's EIN ► 11-3518842	
	Firm's address ► 685 THIRD AVENUE NEW YORK, NY 10017			Phone no (212) 503-8800	

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

**Part III Statement of Program Service Accomplishments**Check if Schedule O contains a response to any question in this Part III **1 Briefly describe the organization's mission**

THE CHILDREN'S AID SOCIETY HELPS NEW YORK CITY CHILDREN IN POVERTY TO SUCCEED AND THRIVE WE DO THIS BY PROVIDING COMPREHENSIVE SUPPORTS TO CHILDREN AND THEIR FAMILIES IN TARGETED HIGH-NEEDS NEW YORK CITY NEIGHBORHOODS

**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 organization's program service accomplishments for each of its three largest program services, as measured by expenses Section 501(c)(3) and 501(c)(4) organizations 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 \$ 11,612,396 including grants of \$ 113,071 ) (Revenue \$ 6,367,496 )

EARLY CHILDHOOD THE EARLY CHILDHOOD DIVISION PREPARES YOUNG CHILDREN FOR SCHOOL SUCCESS THROUGH PHYSICAL, SOCIAL, EMOTIONAL, AND COGNITIVE DEVELOPMENT CORE SERVICES INCLUDE EARLY HEAD START (AGES 0-3) AND HEAD START AND EARLY LEARN DAY CARE (AGES 3-5)

**4b** (Code) (Expenses \$ 18,843,068 including grants of \$ 1,092,719 ) (Revenue \$ 30,455,961 )

SCHOOL AGE THE SCHOOL AGE DIVISION FOCUSES ON AGES 5-13 (KINDERGARTEN THROUGH 8TH GRADE), AND PROMOTES PHYSICAL, SOCIAL AND EMOTIONAL WELL-BEING AS KEY FACTORS FOR HIGH SCHOOL GRADUATION AND COLLEGE SUCCESS SCHOOL AGE PROGRAMS OPERATE IN CHILDREN'S AID LOCATIONS AND IN FULL-SERVICE COMMUNITY SCHOOL PARTNERSHIPS, AND ENGAGE CHILDREN, FAMILIES, SCHOOLS AND COMMUNITIES THROUGH AN INTEGRATED FOCUS ON ACADEMICS, SERVICES, SUPPORTS, AND OPPORTUNITIES CORE SERVICES INCLUDE OUT-OF-SCHOOL TIME PROGRAMS IN CHILDREN'S AID COMMUNITY CENTERS AND SCHOOLS, SUMMER CAMPS, ATHLETIC PROGRAMMING, AND THE NATIONAL CENTER FOR COMMUNITY SCHOOLS, WHICH PROVIDES TECHNICAL ASSISTANCE TO DEVELOP THE COMMUNITY SCHOOL MODEL NATIONALLY AND INTERNATIONALLY

**4c** (Code) (Expenses \$ 15,402,365 including grants of \$ 549,601 ) (Revenue \$ 5,306,199 )

ADOLESCENCE THE ADOLESCENCE DIVISION WORKS WITH ADOLESCENTS AND YOUNG ADULTS TO ENHANCE YOUNG PEOPLE'S PHYSICAL, SOCIAL, AND EMOTIONAL COMPETENCIES, IMPROVE THEIR ACADEMIC PERFORMANCE, AND PREPARE THEM FOR SUCCESSFUL CAREERS AND FINANCIAL INDEPENDENCE CORE SERVICES INCLUDE THE CARRERA-ADOLESCENT PREGNANCY PREVENTION PROGRAM, WHICH MEETS THE TOP TIER EVIDENCE OF EFFECTIVENESS STANDARDS BY THE COALITION FOR EVIDENCE-BASED POLICY, THE EXCEL COLLEGE SUPPORT PROGRAM PROVIDING ASSISTANCE TO HELP YOUNG PEOPLE ENTER AND COMPLETE COLLEGE, THE HOPE LEADERSHIP ACADEMY, WHICH PROVIDES WRAP-AROUND SUPPORTS AND DEVELOPS LEADERSHIP THROUGH A PEER EDUCATION MODEL, AND TEEN EMPLOYMENT SERVICES SUCH AS AMERICORPS INTERNSHIPS, SUMMER YOUTH EMPLOYMENT PROGRAM, AND THE NEW YORK TIMES EMPLOYMENT PROGRAM

(Code) (Expenses \$ 61,788,458 including grants of \$ 4,610,476 ) (Revenue \$ 23,621,310 )

CHILD WELFARE & FAMILY SERVICES, HEALTH & WELLNESS AND NATIONAL CENTER FOR COMMUNITY SCHOOLS CHILD WELFARE & FAMILY SERVICES THE CHILD WELFARE & FAMILY SERVICES ("CWF'S") DIVISION PROMOTES CHILD AND FAMILY STABILITY THROUGH LEGAL AND HOUSING ADVOCACY, HOME-BASED SERVICES FOR CHILDREN AT RISK OF FOSTER CARE PLACEMENT, AND SUPPORTS FOR YOUNG ADULTS AT RISK OF DISCONNECTION FROM SOCIETY, MANY OF WHOM HAVE BEEN INVOLVED WITH THE CRIMINAL JUSTICE SYSTEM CWF'S ALSO FINDS HIGH-QUALITY, LOVING HOMES FOR CHILDREN PLACED IN FOSTER CARE AND SUPPORTS PARENTS SEEKING TO REUNIFY WITH THEIR CHILDREN ADDITIONAL PROGRAMS INCLUDE THE FAMILY WELLNESS PROGRAM, WHICH OFFERS COMPREHENSIVE SERVICES TO FAMILIES IMPACTED BY DOMESTIC VIOLENCE, THE NEXT GENERATION CENTER WHERE TEENS AND YOUNG ADULTS, PARTICULARLY THOSE AGING OUT OF FOSTER CARE, ARE SUPPORTED IN THEIR TRANSITION ADULTHOOD, THE FAMILY REWARDS PROGRAM, WHICH PROVIDES MONETARY INCENTIVES FOR SCHOOL AND HEALTH OUTCOMES, THE OFFICE OF CLIENT ADVOCACY, WHICH STABILIZES LOW-INCOME FAMILIES THROUGH LEGAL ADVOCACY AND MATERIAL ASSISTANCE, AND COLLEGE SAVERS, WHICH ESTABLISHES SAVINGS ACCOUNTS AND PROVIDES INCENTIVES TOWARDS SAVING FOR COLLEGE HEALTH & WELLNESS THE HEALTH & WELLNESS DIVISION PROVIDES HIGH-QUALITY SERVICES THAT REDUCE HEALTH DISPARITIES AMONG CHILDREN AND FAMILIES LIVING IN POVERTY THIS INCLUDES COMPREHENSIVE MEDICAL, MENTAL HEALTH AND DENTAL SERVICES DELIVERED BY PEDIATRICIANS, NURSE PRACTITIONERS, SOCIAL WORKERS, PSYCHIATRISTS, DENTISTS, HEALTH EDUCATORS, MEDICAL ASSISTANTS, AND OTHER SUPPORT STAFF SPECIALIZED PROGRAMS ALSO AIM TO REDUCE CHILDHOOD OBESITY, EDUCATING CHILDREN AND FAMILIES ABOUT THE BENEFITS OF HEALTHY LIVING THROUGH DIET, NUTRITION AND EXERCISE NATIONAL CENTER FOR COMMUNITY SCHOOLS OFFERS TECHNICAL ASSISTANCE IN ALL ASPECTS OF DESIGNING, IMPLEMENTING AND SUSTAINING COMMUNITY SCHOOLS TO MEET THE UNIQUE NEEDS AND STRENGTHS OF INDIVIDUAL COMMUNITIES OUR SERVICES ARE TARGETED TO INDIVIDUAL SCHOOLS, SCHOOL BOARDS AND DISTRICT ADMINISTRATORS, FUNDERS, EDUCATION REFORM LEADERS, COMMUNITY ORGANIZATIONS, INTERMEDIARIES, PARENT ASSOCIATIONS, POLICY MAKERS, UNIVERSITIES, RESEARCH CENTERS AND OTHERS THROUGH FACILITATED PLANNING AND CAREFULLY TAILORED TRAINING AND CONSULTATION, THE CENTER BUILDS LOCAL CAPACITY IN FOUR MAJOR AREAS COMPREHENSIVENESS, COLLABORATION, COHERENCE, AND COMMITMENT

**4d** Other program services (Describe in Schedule O )

(Expenses \$ 61,788,458 including grants of \$ 4,610,476 ) (Revenue \$ 23,621,310 )

**4e** Total program service expenses ► 107,646,287

**Part IV Checklist of Required Schedules**

**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 for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I

**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 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV

**10** Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, 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 XI

**12a** Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII

**12b** Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional

**13** Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E

**14a** 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, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV

**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

**20a** Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H
 

- b** If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?

	Yes	No
<b>1</b>	Yes	
<b>2</b>	Yes	
<b>3</b>		No
<b>4</b>	Yes	
<b>5</b>		No
<b>6</b>		No
<b>7</b>		No
<b>8</b>		No
<b>9</b>		No
<b>10</b>	Yes	
<b>11a</b>	Yes	
<b>11b</b>	Yes	
<b>11c</b>		No
<b>11d</b>		No
<b>11e</b>	Yes	
<b>11f</b>	Yes	
<b>12a</b>		No
<b>12b</b>	Yes	
<b>13</b>		No
<b>14a</b>		No
<b>14b</b>		No
<b>15</b>		No
<b>16</b>		No
<b>17</b>	Yes	
<b>18</b>	Yes	
<b>19</b>		No
<b>20a</b>		No
<b>20b</b>		

**Part IV Checklist of Required Schedules (continued)**

21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		No
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	Yes	
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	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	<b>Section 501(c)(3) and 501(c)(4) organizations.</b> Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No
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		No
26	Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		No
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)	28a		No
a	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28c		No
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	29	Yes	
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	30		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	31		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	32		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	33	Yes	
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	34	Yes	
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	35a		No
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35b		
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	36		No
36	<b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	37		No
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	38	Yes	
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?			
	<b>Note.</b> All Form 990 filers are required to complete Schedule O			

**Part V Statements Regarding Other IRS Filings and Tax Compliance**

Check if Schedule O contains a response to any question in this Part V

		Yes	No
<b>1a</b> Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable	<b>1a</b>	305	
<b>b</b> Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	<b>1b</b>	0	
<b>c</b> Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	<b>1c</b>		
<b>2a</b> 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	<b>2a</b>	2,701	
<b>b</b> If at least one is reported on line 2a, did the organization file all required federal employment tax returns? <b>Note.</b> If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	<b>2b</b>	Yes	
<b>3a</b> Did the organization have unrelated business gross income of \$1,000 or more during the year?	<b>3a</b>	Yes	
<b>b</b> If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	<b>3b</b>	Yes	
<b>4a</b> 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)?	<b>4a</b>	Yes	
<b>b</b> If "Yes," enter the name of the foreign country <b>CJ</b> See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
<b>5a</b> Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	<b>5a</b>	No	
<b>b</b> Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	<b>5b</b>	No	
<b>c</b> If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	<b>5c</b>		
<b>6a</b> Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	<b>6a</b>	No	
<b>b</b> If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	<b>6b</b>		
<b>7 Organizations that may receive deductible contributions under section 170(c).</b>	<b>7a</b>	No	
<b>a</b> 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?	<b>7b</b>		
<b>b</b> If "Yes," did the organization notify the donor of the value of the goods or services provided?	<b>7c</b>	No	
<b>c</b> Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	<b>7d</b>		
<b>e</b> Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	<b>7e</b>	No	
<b>f</b> Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	<b>7f</b>	No	
<b>g</b> If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	<b>7g</b>		
<b>h</b> If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	<b>7h</b>		
<b>8 Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.</b> Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	<b>8</b>		
<b>9 Sponsoring organizations maintaining donor advised funds.</b>	<b>9a</b>		
<b>a</b> Did the organization make any taxable distributions under section 4966?	<b>9b</b>		
<b>10 Section 501(c)(7) organizations.</b> Enter	<b>10a</b>		
<b>a</b> Initiation fees and capital contributions included on Part VIII, line 12	<b>10b</b>		
<b>b</b> Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
<b>11 Section 501(c)(12) organizations.</b> Enter	<b>11a</b>		
<b>b</b> Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	<b>11b</b>		
<b>12a Section 4947(a)(1) non-exempt charitable trusts.</b> Is the organization filing Form 990 in lieu of Form 1041?	<b>12a</b>		
<b>b</b> If "Yes," enter the amount of tax-exempt interest received or accrued during the year	<b>12b</b>		
<b>13 Section 501(c)(29) qualified nonprofit health insurance issuers.</b>	<b>13a</b>		
<b>a</b> Is the organization licensed to issue qualified health plans in more than one state? <b>Note.</b> See the instructions for additional information the organization must report on Schedule O	<b>13b</b>		
<b>b</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	<b>13c</b>		
<b>14a</b> Did the organization receive any payments for indoor tanning services during the tax year?	<b>14a</b>	No	
<b>b</b> If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	<b>14b</b>		

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

### Section A. Governing Body and Management

			Yes	No
<b>1a</b> Enter the number of voting members of the governing body at the end of the tax year	<b>1a</b>	31		
If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O				
<b>b</b> Enter the number of voting members included in line 1a, above, who are independent	<b>1b</b>	31		
<b>2</b> 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?	<b>2</b>		No	
<b>3</b> 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?	<b>3</b>		No	
<b>4</b> Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	<b>4</b>		No	
<b>5</b> Did the organization become aware during the year of a significant diversion of the organization's assets?	<b>5</b>		No	
<b>6</b> Did the organization have members or stockholders?	<b>6</b>		Yes	
<b>7a</b> Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	<b>7a</b>		Yes	
<b>b</b> Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	<b>7b</b>		No	
<b>8</b> Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following	<b>8a</b>		Yes	
<b>a</b> The governing body?	<b>8b</b>		Yes	
<b>b</b> Each committee with authority to act on behalf of the governing body?	<b>9</b>		No	
<b>9</b> 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				

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

		Yes	No
<b>10a</b> Did the organization have local chapters, branches, or affiliates?	<b>10a</b>		No
<b>b</b> If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	<b>10b</b>		
<b>11a</b> Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	<b>11a</b>	Yes	
<b>b</b> Describe in Schedule O the process, if any, used by the organization to review this Form 990			
<b>12a</b> Did the organization have a written conflict of interest policy? If "No," go to line 13	<b>12a</b>	Yes	
<b>b</b> Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	<b>12b</b>	Yes	
<b>c</b> Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	<b>12c</b>	Yes	
<b>13</b> Did the organization have a written whistleblower policy?	<b>13</b>	Yes	
<b>14</b> Did the organization have a written document retention and destruction policy?	<b>14</b>	Yes	
<b>15</b> 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?	<b>15a</b>	Yes	
<b>a</b> The organization's CEO, Executive Director, or top management official	<b>15b</b>	Yes	
<b>b</b> Other officers or key employees of the organization			
If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			
<b>16a</b> Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	<b>16a</b>		No
<b>b</b> If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	<b>16b</b>		

### Section C. Disclosure

<b>17</b> List the States with which a copy of this Form 990 is required to be filed	AL, AK, AZ, AR, CA, CO, CT, DC, FL, GA, HI, IL, KS, KY, ME, MD, MA, MI, MN, MS, NH, NJ, NM, NY, NC, ND, OH, OK, OR, PA, RI, SC, TN, UT, VA, WA, WV, WI
<b>18</b> Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you made these available. Check all that apply	<input checked="" type="checkbox"/> Own website <input type="checkbox"/> Another's website <input checked="" type="checkbox"/> Upon request <input type="checkbox"/> Other (explain in Schedule O)
<b>19</b> Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year	
<b>20</b> State the name, physical address, and telephone number of the person who possesses the books and records of the organization	NANCY SANTIAGO 105 EAST 22ND STREET NEW YORK, NY (646) 459-8412

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

Check if Schedule O contains a response to any question in this Part VIII

**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, or 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.

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

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

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **14**

	<b>Yes</b>	<b>No</b>
<b>3</b> Did the organization list any <b>former</b> officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i> . . . . .	<b>3</b>	No
<b>4</b> For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i> . . . . .	<b>4</b>	Yes
<b>5</b> Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i> . . . . .	<b>5</b>	No

## **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. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation
COMMUNITY SERVICE COUNCIL OF GREATER TUL 16 E 16 STREET SUITE 202 TULSA OK 74119	ADOLESCENCE PREGNANCY PREVENTION PROGRAM	1,006,376
ROSIN STEINHAGEN MENDEL 801 SECOND AVE 7TH FL NEW YORK NY 10017	LEGAL SERVICES	782,644
PHILLIBER RESEARCH ASSOCIATES 16 MAIN STREET ACCORD NY 12404	RESEARCH AND EVALUATION	426,431
MICHAEL A CARRERA LTD 444 EAST 82ND ST NEW YORK NY 10028	ADOLESCENCE PREGNANCY PREVENTION PROGRAM	420,000
THE SHERIDAN GROUP 1224 M STREET NW SUITE 300 WASHINGTON DC 20005	PUBLIC ADVOCACY	227,581
<b>2</b> Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization: <u>18</u>		

**2** Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization **→ 8**

**Part VIII Statement of Revenue**

Check if Schedule O contains a response to any question in this Part VIII

		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514	
<b>Contributions, Gifts, Grants and Other Similar Amounts</b>	<b>1a</b> Federated campaigns . . . . .	<b>1a</b>				
	<b>b</b> Membership dues . . . . .	<b>1b</b>				
	<b>c</b> Fundraising events . . . . .	<b>1c</b>	707,006			
	<b>d</b> Related organizations . . . . .	<b>1d</b>				
	<b>e</b> Government grants (contributions)	<b>1e</b>	12,244,250			
	<b>f</b> All other contributions, gifts, grants, and similar amounts not included above	<b>1f</b>	19,015,315			
	<b>g</b> Noncash contributions included in lines 1a-1f \$		162,316			
	<b>h</b> <b>Total.</b> Add lines 1a-1f . . . . .			31,966,571		
<b>Program Service Revenue</b>	<b>2a</b> GOVT FEES & CONTRACTS	Business Code				
		624100	58,109,374	58,109,374		
	<b>b</b> PROGRAM FEES	624100	7,641,592	7,641,592		
	<b>c</b>					
	<b>d</b>					
	<b>e</b>					
	<b>f</b> All other program service revenue					
	<b>g</b> <b>Total.</b> Add lines 2a-2f . . . . .		65,750,966			
<b>Other Revenue</b>	<b>3</b> Investment income (including dividends, interest, and other similar amounts) . . . . .		3,779,351		65,395 3,713,956	
	<b>4</b> Income from investment of tax-exempt bond proceeds					
	<b>5</b> Royalties . . . . .					
	<b>6a</b> Gross rents	(i) Real	(ii) Personal			
		610,384				
	<b>b</b> Less rental expenses	607,206				
	<b>c</b> Rental income or (loss)	3,178				
	<b>d</b> Net rental income or (loss) . . . . .			3,178	3,178	
<b>7a</b> Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other				
	123,921,965	10,173,382				
<b>b</b> Less cost or other basis and sales expenses	115,948,761	2,760,717				
<b>c</b> Gain or (loss)	7,973,204	7,412,665				
<b>d</b> Net gain or (loss) . . . . .			15,385,869	15,385,869		
<b>8a</b> Gross income from fundraising events (not including \$ 707,006 of contributions reported on line 1c) See Part IV, line 18 . . . . .						
<b>a</b>	696,900					
<b>b</b> Less direct expenses . . . . .	<b>b</b>	428,381				
<b>c</b> Net income or (loss) from fundraising events . . . . .			268,519	268,519		
<b>9a</b> Gross income from gaming activities See Part IV, line 19 . . . . .	<b>a</b>					
<b>b</b> Less direct expenses . . . . .	<b>b</b>					
<b>c</b> Net income or (loss) from gaming activities . . . . .						
<b>10a</b> Gross sales of inventory, less returns and allowances . . . . .	<b>a</b>					
<b>b</b> Less cost of goods sold . . . . .	<b>b</b>					
<b>c</b> Net income or (loss) from sales of inventory . . . . .						
Miscellaneous Revenue		Business Code				
<b>11a</b>						
<b>b</b>						
<b>c</b>						
<b>d</b> All other revenue . . . . .						
<b>e</b> <b>Total.</b> Add lines 11a-11d . . . . .						
<b>12</b> <b>Total revenue.</b> See Instructions . . . . .		117,154,454	65,750,966	68,573	19,368,344	

**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)

Check if Schedule O contains a response to any question in this Part IX 

<b>Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.</b>	<b>(A) Total expenses</b>	<b>(B) Program service expenses</b>	<b>(C) Management and general expenses</b>	<b>(D) Fundraising expenses</b>
1 Grants and other assistance to governments and organizations in the United States See Part IV, line 21				
2 Grants and other assistance to individuals in the United States See Part IV, line 22	6,365,867	6,365,867		
3 Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	2,857,841	1,043,536	1,501,242	313,063
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	58,906,487	53,487,421	4,043,164	1,375,902
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	3,720,186	3,317,586	297,619	104,981
9 Other employee benefits	8,820,477	8,048,420	554,011	218,046
10 Payroll taxes	5,629,539	5,027,268	453,682	148,589
11 Fees for services (non-employees)				
a Management				
b Legal	874,054	726,104	147,950	
c Accounting	191,099	57,445	130,154	3,500
d Lobbying	169,053		169,053	
e Professional fundraising services See Part IV, line 17	69,381			69,381
f Investment management fees				
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	7,011,924	5,690,495	1,066,270	255,159
12 Advertising and promotion				
13 Office expenses	4,269,300	3,895,648	283,823	89,829
14 Information technology	1,104,297	521,970	475,030	107,297
15 Royalties				
16 Occupancy	4,953,870	4,157,925	729,402	66,543
17 Travel	1,294,612	1,190,887	98,155	5,570
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings				
20 Interest	285,044		285,044	
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	1,518,808	1,184,157	320,813	13,838
23 Insurance	895,729	795,226	81,877	18,626
24 Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)				
a FOSTER BOARDING HOME	9,264,428	9,264,428		
b TRAINING AND CONFERENCE	1,413,644	1,326,067	78,813	8,764
c FOOD	1,098,817	1,056,281	34,522	8,014
d PRINTING AND PROMOTION	321,726	204,276	73,138	44,312
e All other expenses	656,377	285,280	118,707	252,390
<b>25 Total functional expenses.</b> Add lines 1 through 24e	121,692,560	107,646,287	10,942,469	3,103,804
<b>26 Joint costs.</b> Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

**Part X Balance Sheet**Check if Schedule O contains a response to any question in this Part X 

		<b>(A)</b> Beginning of year	<b>(B)</b> End of year
<b>Assets</b>	<b>1</b> Cash—non-interest-bearing	2,662,562	<b>1</b>
	<b>2</b> Savings and temporary cash investments	14,792,734	<b>2</b>
	<b>3</b> Pledges and grants receivable, net	5,720,201	<b>3</b>
	<b>4</b> Accounts receivable, net	13,139,300	<b>4</b>
	<b>5</b> Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L		
			<b>5</b>
	<b>6</b> Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L		<b>6</b>
	<b>7</b> Notes and loans receivable, net		<b>7</b>
	<b>8</b> Inventories for sale or use		<b>8</b>
	<b>9</b> Prepaid expenses and deferred charges	1,856,947	<b>9</b>
	<b>10a</b> Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	42,914,675	
	<b>10b</b> Less accumulated depreciation	21,926,612	22,614,873
	<b>10c</b>	<b>10c</b>	20,988,063
	<b>11</b> Investments—publicly traded securities	207,454,365	<b>11</b>
	<b>12</b> Investments—other securities See Part IV, line 11	34,420,708	<b>12</b>
	<b>13</b> Investments—program-related See Part IV, line 11		<b>13</b>
	<b>14</b> Intangible assets		<b>14</b>
	<b>15</b> Other assets See Part IV, line 11	1,127,542	<b>15</b>
	<b>16</b> <b>Total assets.</b> Add lines 1 through 15 (must equal line 34)	303,789,232	<b>16</b>
<b>Liabilities</b>	<b>17</b> Accounts payable and accrued expenses	46,944,122	<b>17</b>
	<b>18</b> Grants payable		<b>18</b>
	<b>19</b> Deferred revenue	1,116,808	<b>19</b>
	<b>20</b> Tax-exempt bond liabilities		<b>20</b>
	<b>21</b> Escrow or custodial account liability Complete Part IV of Schedule D		<b>21</b>
	<b>22</b> Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L		<b>22</b>
	<b>23</b> Secured mortgages and notes payable to unrelated third parties	2,775,000	<b>23</b>
	<b>24</b> Unsecured notes and loans payable to unrelated third parties		<b>24</b>
	<b>25</b> Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D	831,236	<b>25</b>
	<b>26</b> <b>Total liabilities.</b> Add lines 17 through 25	51,667,166	<b>26</b>
<b>Net Assets or Fund Balances</b>	<b>Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.</b>		
	<b>27</b> Unrestricted net assets	228,909,131	<b>27</b>
	<b>28</b> Temporarily restricted net assets	17,402,343	<b>28</b>
	<b>29</b> Permanently restricted net assets	5,810,592	<b>29</b>
	<b>Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.</b>		
	<b>30</b> Capital stock or trust principal, or current funds		<b>30</b>
	<b>31</b> Paid-in or capital surplus, or land, building or equipment fund		<b>31</b>
	<b>32</b> Retained earnings, endowment, accumulated income, or other funds		<b>32</b>
	<b>33</b> Total net assets or fund balances	252,122,066	<b>33</b>
	<b>34</b> Total liabilities and net assets/fund balances	303,789,232	<b>34</b>
		277,722,960	
		326,166,823	

**Part XI Reconciliation of Net Assets**Check 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	117,154,454
2	Total expenses (must equal Part IX, column (A), line 25)	2	121,692,560
3	Revenue less expenses Subtract line 2 from line 1	3	-4,538,106
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	252,122,066
5	Net unrealized gains (losses) on investments	5	20,003,000
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	10,136,000
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	277,722,960

**Part XII Financial Statements and Reporting**Check if Schedule O contains a response to any question in this Part XII 

	Yes	No
1 Accounting method used to prepare the Form 990 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? If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both <input type="checkbox"/> Separate basis <input checked="" type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	2a	No
2b Were the organization's financial statements audited by an independent accountant? If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both <input type="checkbox"/> Separate basis <input checked="" type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	2b	Yes
2c If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	2c	Yes
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?	3a	Yes
3b 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	3b	Yes

**SCHEDULE A**  
(Form 990 or 990EZ)**Public Charity Status and Public Support****2012****Open to Public  
Inspection**

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.

Department of the Treasury  
Internal Revenue ServiceName of the organization  
THE CHILDREN'S AID SOCIETY

Employer identification number

13-5562191

**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

e  a  Type I b  Type II c  Type III - Functionally integrated d  Type III - Non-functionally integrated

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?

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

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

(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 monetary support
<b>Total</b>						

**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) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	84,177,750	29,591,350	84,730,195	86,518,944	90,344,464	375,362,703
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 <b>Total.</b> Add lines 1 through 3	84,177,750	29,591,350	84,730,195	86,518,944	90,344,464	375,362,703
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)						1,109,766
6 <b>Public support.</b> Subtract line 5 from line 4						374,252,937

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ►	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
7 Amounts from line 4	84,177,750	29,591,350	84,730,195	86,518,944	90,344,464	375,362,703
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	4,652,629	4,591,685	3,917,058	4,505,072	3,782,529	21,448,973
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 <b>Total support</b> (Add lines 7 through 10)						396,811,676
12 Gross receipts from related activities, etc (see instructions)					12	92,394,440
13 <b>First five years.</b> If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and <b>stop here</b> . . . . .						

**Section C. Computation of Public Support Percentage**

14 Public support percentage for 2012 (line 6, column (f) divided by line 11, column (f))	14	94 320 %
15 Public support percentage for 2011 Schedule A, Part II, line 14	15	94 060 %
16a <b>33 1/3% support test—2012.</b> If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and <b>stop here</b> . The organization qualifies as a publicly supported organization		►✓
b <b>33 1/3% support test—2011.</b> 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 <b>stop here</b> . The organization qualifies as a publicly supported organization		►□
17a <b>10%-facts-and-circumstances test—2012.</b> 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 <b>stop here</b> . Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization		►□
b <b>10%-facts-and-circumstances test—2011.</b> 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 <b>stop here</b> . Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization		►□
18 <b>Private foundation.</b> If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions		►□

**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) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(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						
<b>6 Total.</b> Add lines 1 through 5						
<b>7a</b> Amounts included on lines 1, 2, and 3 received from disqualified persons						
<b>b</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						
<b>c</b> Add lines 7a and 7b						
<b>8 Public support</b> (Subtract line 7c from line 6 )						

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ►	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
9 Amounts from line 6						
<b>10a</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
<b>b</b> Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
<b>c</b> Add lines 10a and 10b						
<b>11</b> Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
<b>12</b> Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV )						
<b>13 Total support.</b> (Add lines 9, 10c, 11, and 12 )						
<b>14 First five years.</b> If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and <b>stop here</b>						

**Section C. Computation of Public Support Percentage**

15 Public support percentage for 2012 (line 8, column (f) divided by line 13, column (f))	15
16 Public support percentage from 2011 Schedule A, Part III, line 15	16

**Section D. Computation of Investment Income Percentage**

17 Investment income percentage for 2012 (line 10c, column (f) divided by line 13, column (f))	17
18 Investment income percentage from 2011 Schedule A, Part III, line 17	18
<b>19a 33 1/3% support tests—2012.</b> 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 <b>stop here</b> . The organization qualifies as a publicly supported organization	
<b>b 33 1/3% support tests—2011.</b> 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 <b>stop here</b> . The organization qualifies as a publicly supported organization	
<b>20 Private foundation.</b> 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; and Part III, line 12. Also complete this part for any additional information. (See instructions).

**Facts And Circumstances Test**

**Explanation**

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**SCHEDULE C**  
(Form 990 or 990-EZ)**Political Campaign and Lobbying Activities****2012****Open to Public  
Inspection****For Organizations Exempt From Income Tax Under section 501(c) and section 527**

► Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ.

► See separate instructions.

**If the organization answered "Yes" to Form 990, Part IV, Line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then**

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

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

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

**If the organization answered "Yes" to Form 990, Part IV, Line 5 (Proxy Tax) or Form 990-EZ, Part V, line 35c (Proxy Tax), then**

- Section 501(c)(4), (5), or (6) organizations Complete Part III

Name of the organization  
THE CHILDREN'S AID SOCIETY

Employer identification number

13-5562191

**Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.**

- 1 Provide a description of the organization's direct and indirect political campaign activities in Part IV
- 2 Political expenditures ► \$ \_\_\_\_\_
- 3 Volunteer hours \_\_\_\_\_

**Part I-B Complete if the organization is exempt under section 501(c)(3).**

- 1 Enter the amount of any excise tax incurred by the organization under section 4955 ► \$ \_\_\_\_\_
- 2 Enter the amount of any excise tax incurred by organization managers under section 4955 ► \$ \_\_\_\_\_
- 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year?  Yes  No
- 4a Was a correction made?  Yes  No
- b If "Yes," describe in Part IV

**Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).**

- 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities ► \$ \_\_\_\_\_
- 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities ► \$ \_\_\_\_\_
- 3 Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b ► \$ \_\_\_\_\_
- 4 Did the filing organization file **Form 1120-POL** for this year?  Yes  No
- 5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments For each organization listed, enter the amount paid from the filing organization's funds Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds If none, enter -0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-

**Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).**

**A** Check  if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures)

**B** Check  if the filing organization checked box A and "limited control" provisions apply

<b>Limits on Lobbying Expenditures</b> (The term "expenditures" means amounts paid or incurred.)		<b>(a) Filing organization's totals</b>	<b>(b) Affiliated group totals</b>
<b>1a</b> Total lobbying expenditures to influence public opinion (grass roots lobbying)			
<b>b</b> Total lobbying expenditures to influence a legislative body (direct lobbying)			
<b>c</b> Total lobbying expenditures (add lines 1a and 1b)			
<b>d</b> Other exempt purpose expenditures			
<b>e</b> Total exempt purpose expenditures (add lines 1c and 1d)			
<b>f</b> Lobbying nontaxable amount Enter the amount from the following table in both columns			
<b>If the amount on line 1e, column (a) or (b) is:</b>	<b>The lobbying nontaxable amount is:</b>		
Not over \$500,000	20% of the amount on line 1e		
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000		
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000		
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000		
Over \$17,000,000	\$1,000,000		
<b>g</b> Grassroots nontaxable amount (enter 25% of line 1f)			
<b>h</b> Subtract line 1g from line 1a If zero or less, enter -0-			
<b>i</b> Subtract line 1f from line 1c If zero or less, enter -0-			
<b>j</b> If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?		<input type="checkbox"/> Yes	<input type="checkbox"/> No

**4-Year Averaging Period Under Section 501(h)**

**(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 2a through 2f on page 4.)**

<b>Lobbying Expenditures During 4-Year Averaging Period</b>					
Calendar year (or fiscal year beginning in)	<b>(a) 2009</b>	<b>(b) 2010</b>	<b>(c) 2011</b>	<b>(d) 2012</b>	<b>(e) Total</b>
<b>2a</b> Lobbying nontaxable amount					
<b>b</b> Lobbying ceiling amount (150% of line 2a, column(e))					
<b>c</b> Total lobbying expenditures					
<b>d</b> Grassroots nontaxable amount					
<b>e</b> Grassroots ceiling amount (150% of line 2d, column (e))					
<b>f</b> Grassroots lobbying expenditures					

**Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).**

For each "Yes" response to lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.

	(a)		(b)	
	Yes	No	Amount	
1 During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of				
a Volunteers?	Yes			
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?	Yes			
c Media advertisements?		No		
d Mailings to members, legislators, or the public?		No		
e Publications, or published or broadcast statements?		No		
f Grants to other organizations for lobbying purposes?		No		
g Direct contact with legislators, their staffs, government officials, or a legislative body?	Yes		233,384	
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		No		
i Other activities?		No		
j Total Add lines 1c through 1i			233,384	
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		No		
b If "Yes," enter the amount of any tax incurred under section 4912				
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				

**Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).**

	Yes	No
1 Were substantially all (90% or more) dues received nondeductible by members?	1	
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?	2	
3 Did the organization agree to carry over lobbying and political expenditures from the prior year?	3	

**Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, line 3, is answered "Yes."**

1 Dues, assessments and similar amounts from members	1	
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).	2a	
a Current year	2b	
b Carryover from last year	2c	
c Total	3	
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	4	
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	5	
5 Taxable amount of lobbying and political expenditures (see instructions)		

**Part IV Supplemental Information**

Complete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated group list), Part II-A, line 2, and Part II-B, line 1. Also, complete this part for any additional information

Identifier	Return Reference	Explanation
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**SCHEDULE D**  
(Form 990)**Supplemental Financial Statements****2012****Open to Public  
Inspection**

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b  
 ► Attach to Form 990. ► See separate instructions.

Department of the Treasury  
Internal Revenue Service

**Employer identification number**  
13-5562191

**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)	<input type="checkbox"/> Preservation of land for public use (e.g., recreation or education) <input type="checkbox"/> Preservation of an historically important land area
	<input type="checkbox"/> Protection of natural habitat <input type="checkbox"/> Preservation of a certified historic structure
	<input type="checkbox"/> Preservation of open space
2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year	
a Total number of conservation easements	<b>Held at the End of the Year</b>
b Total acreage restricted by conservation easements	2a
c Number of conservation easements on a certified historic structure included in (a)	2b
d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register	2c
3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ► _____	2d
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? <input type="checkbox"/> Yes <input type="checkbox"/> 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 section 170(h)(4)(B)(ii)? <input type="checkbox"/> Yes <input type="checkbox"/> No	
9 In Part XIII, 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 XIII, 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	► \$ _____



**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) LONE PINON, LTD	12,528,248	F
(B) LONE CASCADE, L P	18,308,930	F
(C) LONE DRAGON PINE, L P	917,513	F
(D) JUBILEE TAX EXEMPT PARTNERS L P	6,902,290	F
(E) MILLENIUM PARTNERSHIP	89,686	F
(F) CAMPBELL DEVON	37,041	F

**Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return**

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

**Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return**

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

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

Identifier	Return Reference	Explanation
	PART IV, LINE 1B	IN MARCH 2010 CAS BECAME THE ADMINISTRATOR FOR ONE OF OUR BEQUESTS
DESCRIPTION OF INTENDED USE OF ENDOWMENT FUNDS	PART V, LINE 4	THE ENDOWMENTS CONSIST OF DONOR-RESTRICTED ENDOWMENT FUNDS AND BOARD DESIGNATED SPECIAL PURPOSE FUNDS CHILDREN'S AID RECOGNIZES THAT NEW YORK STATE ADOPTED AS LAW THE NEW YORK PRUDENT MANAGEMENT OF INSTITUTIONAL FUNDS ACT ("NYPMIFA") ON SEPTEMBER 17, 2010 NYPMIFA REPLACES THE PRIOR LAW WHICH WAS THE UNIFORM MANAGEMENT OF INSTITUTIONAL FUNDS ACT ("UMIFA") NYPMIFA CREATES A REBUTTABLE PRESUMPTION OF IMPRUDENCE IF AN ORGANIZATION APPROPRIATES MORE THAN 7% OF A DONOR-RESTRICTED PERMANENT ENDOWMENT FUND'S FAIR VALUE (AVERAGED OVER A PERIOD OF NOT LESS THAN THE PRECEDING FIVE YEARS) IN ANY YEAR ANY UNAPPROPRIATED EARNINGS THAT WOULD OTHERWISE BE CONSIDERED UNRESTRICTED BY THE DONOR WILL BE REFLECTED AS TEMPORARILY RESTRICTED UNTIL APPROPRIATED CHILDREN'S AID'S BOARD HAS INTERPRETED NYPMIFA AS ALLOWING CHILDREN'S AID TO APPROPRIATE FOR EXPENDITURE OR ACCUMULATE SO MUCH OF AN ENDOWMENT FUND AS CHILDREN'S AID DETERMINES IS PRUDENT FOR THE USES, BENEFITS, PURPOSES AND DURATION FOR WHICH THE ENDOWMENT FUND WAS ESTABLISHED, SUBJECT TO THE INTENT OF THE DONOR AS EXPRESSED IN THE GIFT INSTRUMENT CHILDREN'S AID'S POLICY IS THAT ENDOWMENT EARNINGS WILL BE APPROPRIATED FOR EXPENDITURES IN ACCORDANCE WITH THE DONOR'S STIPULATIONS IN THE ABSENCE OF DONOR STIPULATIONS, ENDOWMENT EARNINGS ARE CLASSIFIED AS TEMPORARILY RESTRICTED UNTIL APPROPRIATED FOR OPERATIONS BY THE BOARD OF TRUSTEES
DESCRIPTION OF UNCERTAIN TAX POSITIONS UNDER FIN 48	PART X, LINE 2	CHILDREN'S AID HAS NO UNCERTAIN TAX POSITIONS AS OF JUNE 30, 2013 AND 2012 IN ACCORDANCE WITH ACCOUNTING STANDARDS CODIFICATION ("ASC") TOPIC 740, "INCOME TAXES," WHICH PROVIDES STANDARDS FOR ESTABLISHING AND CLASSIFYING ANY TAX PROVISIONS FOR UNCERTAIN TAX POSITIONS CHILDREN'S AID IS NO LONGER SUBJECT TO FEDERAL OR STATE AND LOCAL INCOME TAX EXAMINATIONS BY TAX AUTHORITIES FOR THE YEAR ENDED JUNE 30, 2010 AND PRIOR YEARS

2012

Open to Public  
InspectionSCHEDULE G  
(Form 990 or 990-EZ)Supplemental Information Regarding  
Fundraising or Gaming Activities

Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a. Form 990-EZ filers are not required to complete this part.

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

Department of the Treasury  
Internal Revenue ServiceName of the organization  
THE CHILDREN'S AID SOCIETY

Employer identification number

13-5562191

**Part I Fundraising Activities.** Complete if the organization answered "Yes" to Form 990, Part IV, line 17.

**1** Indicate whether the organization raised funds through any of the following activities. Check all that apply

<b>a</b> <input checked="" type="checkbox"/> Mail solicitations	<b>e</b> <input checked="" type="checkbox"/> Solicitation of non-government grants
<b>b</b> <input checked="" type="checkbox"/> Internet and email solicitations	<b>f</b> <input checked="" type="checkbox"/> Solicitation of government grants
<b>c</b> <input checked="" type="checkbox"/> Phone solicitations	<b>g</b> <input checked="" type="checkbox"/> Special fundraising events
<b>d</b> <input checked="" type="checkbox"/> In-person solicitations	

**2a** Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services?  Yes  No

**b** If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
RESOURCE & EVENT MANAGEMENT LTD 232 MADISON AVENUE SUITE 1107  NEW YORK, NY 10016	ANNUAL GALA FUNDRAISER		No	1,184,131	33,381	1,150,750
SUSAN BRUDER 68 NEW MILL ROAD  SMITHSTOWN, NY 11787	FUNDRAISER ANNUAL GOLF CLASSIC		No	219,775	36,000	183,775
<b>Total . . . . .</b>				1,403,906	69,381	1,334,525

**3** List all states in which the organization is registered or licensed to solicit funds or has been notified it is exempt from registration or licensing

AL, AK, AZ, AR, CA, CO, CT, DC, FL, GA, HI, IL, KS, KY, ME, MD, MA, MI, MN, MS, NH, NJ, NM, NY, NC, ND, OH, OK, OR, PA, RI, SC, TN, UT, VA, WA, WV, WI

**Part II Fundraising Events.** Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

		(a) Event #1 <u>ANNUAL GALA</u> (event type)	(b) Event #2 <u>BALTUSROL GOLF CLASSIC</u> (event type)	(c) Other events (total number)	(d) Total events (add col (a) through col (c))
1	Gross receipts . . .	1,184,131	219,775		1,403,906
2	Less Contributions . . .	498,131	208,875		707,006
3	Gross income (line 1 minus line 2) . . .	686,000	10,900		696,900
4	Cash prizes . . .				
5	Noncash prizes . . .		11,465		11,465
6	Rent/facility costs . . .		115,789		115,789
7	Food and beverages . . .				
8	Entertainment . . .				
9	Other direct expenses . . .	301,127			301,127
10	Direct expense summary Add lines 4 through 9 in column (d) . . . . .				(428,381) ►
11	Net income summary Combine line 3, column (d), and line 10 . . . . .				268,519 ►

**Part III Gaming.** Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

		(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))
1	Gross revenue . . . . .				
2	Cash prizes . . . . .				
3	Non-cash prizes . . . . .				
4	Rent/facility costs . . . . .				
5	Other direct expenses . . . . .				
6	Volunteer labor . . . . .	<input type="checkbox"/> Yes ..... <input type="checkbox"/> No	<input type="checkbox"/> Yes ..... <input type="checkbox"/> No	<input type="checkbox"/> Yes ..... <input type="checkbox"/> No	
7	Direct expense summary Add lines 2 through 5 in column (d) . . . . .				►
8	Net gaming income summary Combine lines 1 and 7 in column (d) . . . . .				►

9 Enter the state(s) in which the organization operates gaming activities \_\_\_\_\_

a Is the organization licensed to operate gaming activities in each of these states? . . . . .  Yes  No  
b If "No," explain \_\_\_\_\_  
\_\_\_\_\_

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? . . . . .  Yes  No

b If "Yes," explain \_\_\_\_\_  
\_\_\_\_\_

Does the organization operate gaming activities with nonmembers?  Yes  No12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming?  Yes  No

13 Indicate the percentage of gaming activity operated in

a The organization's facility	13a
b An outside facility	13b

14 Enter the name and address of the person who prepares the organization's gaming/special events books and records

Name ► \_\_\_\_\_

Address ► \_\_\_\_\_

15a Does the organization have a contract with a third party from whom the organization receives gaming revenue?  Yes  No

b If "Yes," enter the amount of gaming revenue received by the organization ► \$ \_\_\_\_\_ and the amount of gaming revenue retained by the third party ► \$ \_\_\_\_\_

c If "Yes," enter name and address of the third party

Name ► \_\_\_\_\_

Address ► \_\_\_\_\_

16 Gaming manager information

Name ► \_\_\_\_\_

Gaming manager compensation ► \$ \_\_\_\_\_

Description of services provided ► \_\_\_\_\_

 Director/officer Employee Independent contractor

17 Mandatory distributions

a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?  Yes  No

b Enter the amount of distributions required under state law distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ► \$ \_\_\_\_\_

**Part IV Supplemental Information.** Complete this part to provide the explanations required by Part I, line 2b, columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this part to provide any additional information (see instructions).

Identifier	Return Reference	Explanation
EXPLANATION OF FUNDRAISING PAYMENTS	SCHEDULE G, PART I, LINE 2B, COLUMN (V)	RESOURCE & EVENT MANAGEMENT, LTD ("REM") SHALL RECEIVE A FIXED FEE OF \$70,000 WHICH INCLUDES THE SERVICES OF MS SUZANNE M HANAL AND THE COORDINATOR ASSIGNED TO THE SECOND ANNUAL GALA EVENT, ALL DAY-TO-DAY SERVICES OF AN EXPERIENCED ACCOUNT EXECUTIVE AND ALL NORMAL OFFICE BACK UP, THE USE OF OUR EXTENSIVE LISTS, ON-SITE MANAGEMENT AT THE DATE OF THE EVENT, AND THE USE OF OUR OFFICE AS THE CHILDREN'S AID SOCIETY BENEFIT OFFICE PAYMENTS WILL BE SCHEDULED AS FOLLOWS \$40,000 UPON SIGNING THIS CONTRACT, \$10,000 ON MARCH 5, 2012, \$10,000 ON JUNE 1, 2012, AND \$10,000 ON AUGUST 3, 2012 IF GROSS PROCEEDS FROM THE GALA REACH \$1 2 MILLION, REM WILL RECEIVE AN ADDITIONAL PAYMENT OF \$10,000 AND \$10,000 FOR EACH ADDITIONAL \$100,000 ABOVE THIS AMOUNT NOT TO EXCEED \$120,000 ADDITIONAL EXPENSES REIMBURSED TO REM FOR CERTAIN DIRECT OFFICE EXPENSES, NOT EXPECTED TO EXCEED \$5,000 EXPENSES INCLUDE TRANSPORTATION, PHOTOCOPYING, EXPRESS MAIL, MESSENGER, AND MISCELLANEOUS SUPPLIES ALL EXPENSES IN EXCESS OF \$5,000 ARE SUBJECT TO PRIOR WRITTEN APPROVAL FROM MS KATHY GALLAGHER DE MEIJ OR HER DESIGNEE THESE EXPENSES WILL BE BILLED TO THE CHILDREN'S AID SOCIETY WITH AN ITEMIZED STATEMENT AND SUITABLE BACK UP SUSAN BRUDER SHALL RECEIVE A FIXED FEE OF \$28,500 WHICH INCLUDES THE SERVICES OF SUSAN BRUDER FOR THE 13TH ANNUAL GOLF CLASSIC MINI OUTING ON OCTOBER 25, 2012 AND THE 14TH ANNUAL GOLF CLASSIC ON MAY 2013, ALL DAY-TO-DAY SERVICES OF AN EXPERIENCED ACCOUNT EXECUTIVE AND ALL NORMAL OFFICE BACK UP, THE SERVICES OF OUR COMMITTEE, THE USE OF OUR EXTENSIVE LISTS, LISTING AS AN ADDITIONAL INSURED UNDER LIABILITY INSURANCE FOR 2013 GOLF CLASSIC, AND THE USE OF OUR OFFICE AS THE CHILDREN'S AID SOCIETY BENEFIT OFFICE PAYMENTS WILL BE SCHEDULED AS FOLLOWS \$4,500 ON OCTOBER 2012, \$3,000 FOR THE PERIOD BEGINNING NOVEMBER 2012 THROUGH AND INCLUDING JUNE 2013 ADDITIONAL EXPENSES IN CONNECTION WITH THE EVENT INCLUDE COURIER SERVICES, PHOTOCOPYING, EXPRESS MAIL, AND MISCELLANEOUS SUPPLIES SHALL BE PAID FOR BY THE CHILDREN'S AID SOCIETY

## **Grants and Other Assistance to Organizations, Governments and Individuals in the United States**

**Complete if the organization answered "Yes," to Form 990, Part IV, line 21 or 22.**

► Attach to Form 990

2012

Open to Public  
Inspection

Department of the Treasury  
Internal Revenue Service

Name of the organization  
**THE CHILDREN'S AID SOCIETY**

**Employer identification number**

## **Part I General Information on Grants and Assistance**

**Part II Grants and Other Assistance to Governments and Organizations in the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

**(a)** Name and address of  
organization  
or government

(b) EIM

(c) IRC Code  
section  
If applicable

(d) Amount of cash grant

(e) Amount of non-cash assistance

**(f)** Method of valuation (book, FMV, appraisal, other)

**(g) Description of non-cash assistance**

**(h) Purpose of or assistance**

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table .

**3** Enter total number of other organizations listed in the line 1 table .

**Part III Grants and Other Assistance to Individuals in the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 22.  
 Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
(1) SPECIFIC ASSISTANCE GIVEN TO LOW-INCOME FAMILIES SUCH AS RENT ARREARS, FUNERAL EXPENSES, FURNITURE, BEDBUG EXTERMINATION, TRANSPORTATION, SCHOOL SUPPLIES, GRADUATION EXPENSES, AND OTHER BASIC NECESSITIES	1909	1,407,346			
(2) BABY SITTING SERVICE FAMILIES ARE ASSISTED WITH BABY-SITTING SERVICES SO THAT PARENTS CAN ATTEND AGENCY MEETINGS AND THERAPY SESSIONS MEETINGS COULD, FOR EXAMPLE, REVOLVE AROUND PERMANENCY PLANNING FOR FOSTER CARE CHILDREN	41	39,085			
(3) SCHOLARSHIPS LOW-INCOME WORKING FAMILIES SELDOM HAVE THE EXTRA INCOME TO SUPERVISE THEIR CHILDREN AFTER SCHOOL AND DURING SUMMER VACATIONS OUR CITY & COUNTRY AND COMMUNITY SCHOOL DIVISIONS PROVIDE FREE AND LOW-COST AFTER-SCHOOL, WEEKEND AND SUMMER PROGRAMS, USING THAT TIME TO BUILD AN ADVANTAGE FOR CHILDREN'S FUTURE WE OFFER RECREATION, TUTORING, MENTORING, TECHNOLOGY, AND VIOLENCE PREVENTION TO FAMILIES AND CHILDREN THROUGHOUT MANHATTAN, THE BRONX, AND STATEN ISLAND IN ADDITION, WE ALSO OFFER SCHOOL AND COLLEGE SCHOLARSHIPS TO LOW-INCOME CHILDREN	901	1,383,655			
(4) STIPENDS YOUTH ENGAGED IN THE AGENCY'S JOB READINESS, EMPLOYMENT PROGRAMS AND LIFE SKILLS CLASSES RECEIVE STIPENDS FOR THEIR WORK	6545	504,847			

**Part IV Supplemental Information.**

Complete this part to provide the information required in Part I, line 2, Part III, column (b), and any other additional information

Identifier	Return Reference	Explanation
		SCHEDULE I, PART I, LINE 2 THE USE OF GRANT FUNDS ARE MONITORED CLOSELY DURING THE YEAR BY THE DEPARTMENT ADMINISTERING THE ASSISTANCE MONITORING CAN INCLUDE, AMONG OTHER THINGS REGULAR HOME VISITS TO FAMILIES WHO MIGHT RECEIVE MONTHLY ASSISTANCE FOR FOSTER CARE CHILDREN, DIRECT PURCHASES OF MATERIALS SUCH AS BEDS, LINENS, TEXT BOOKS, CLOTHES OR FOOD, UTILITY PAYMENTS, RATHER THAN CASH ASSISTANCE TO FAMILIES, AND MONITORING OF CLASSES OR PROGRAMS WHEN SCHOLARSHIPS ARE PROVIDED

**Schedule J**  
(Form 990)**Compensation Information**

OMB No 1545-0047

Department of the Treasury  
Internal Revenue Service

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees  
**► Complete if the organization answered "Yes" to Form 990, Part IV, question 23.**  
**► Attach to Form 990. ► See separate instructions.**

**2012****Open to Public Inspection**Name of the organization  
THE CHILDREN'S AID SOCIETY

Employer identification number

13-5562191

**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

<input type="checkbox"/> First-class or charter travel	<input type="checkbox"/> Housing allowance or residence for personal use
<input type="checkbox"/> Travel for companions	<input type="checkbox"/> Payments for business use of personal residence
<input type="checkbox"/> Tax indemnification and gross-up payments	<input type="checkbox"/> Health or social club dues or initiation fees
<input type="checkbox"/> Discretionary spending account	<input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)

**b** If any of the boxes in 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 filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III

<input checked="" type="checkbox"/> Compensation committee	<input checked="" type="checkbox"/> Written employment contract
<input checked="" type="checkbox"/> Independent compensation consultant	<input checked="" type="checkbox"/> Compensation survey or study
<input checked="" type="checkbox"/> Form 990 of other organizations	<input checked="" type="checkbox"/> 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?

4a No

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

4b Yes

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

4c No

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

**Only 501(c)(3) and 501(c)(4) organizations only 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?

5a No

**b** Any related organization?

5b No

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?

6a No

**b** Any related organization?

6b No

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

7 No

**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

8 No

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

9

**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) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

(A) Name and Title	(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 as deferred in prior Form 990
	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
See Additional Data Table							

**Part III Supplemental Information**

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

<b>Identifier</b>	<b>Return Reference</b>	<b>Explanation</b>
	PART I, LINE 4B	RICHARD R BUERY, JR PARTICIPATED IN A SUPPLEMENTAL NONQUALIFIED RETIREMENT PLAN. AMOUNT EARNED FOR THE CALENDAR YEAR ENDING DECEMBER 31, 2012 WAS \$26,587.

**Software ID:**  
**Software Version:**  
**EIN:** 13-5562191  
**Name:** THE CHILDREN'S AID SOCIETY

**Form 990, Schedule J, Part II - Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees**

(A) Name	(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) 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 compensation				
RICHARD R BUERY JR	(i) 387,000 (ii) 0	0 0	21,431 0	26,698 0	3,500 0	438,629 0	0 0
WILLIAM WEISBERG	(i) 230,245 (ii) 0	0 0	568 0	30,872 0	24,154 0	285,839 0	0 0
DANIEL LEHMAN	(i) 205,564 (ii) 0	0 0	0 0	0 0	6,248 0	211,812 0	0 0
PATRICIA GRAYSON	(i) 230,944 (ii) 0	0 0	1,057 0	37,229 0	25,833 0	295,063 0	0 0
JANE M QUINN	(i) 223,906 (ii) 0	0 0	1,041 0	40,729 0	22,833 0	288,509 0	0 0
VALERIE RUSSO	(i) 187,829 (ii) 0	0 0	0 0	19,435 0	30,581 0	237,845 0	0 0
JANE GOLDEN	(i) 204,807 (ii) 0	0 0	486 0	16,403 0	13,651 0	235,347 0	0 0
BEVERLY COLON	(i) 156,463 (ii) 0	0 0	864 0	23,224 0	12,476 0	193,027 0	0 0
DREMA L BROWN	(i) 159,683 (ii) 0	0 0	0 0	14,528 0	19,845 0	194,056 0	0 0
LISA HANDWERKER	(i) 178,586 (ii) 0	0 0	766 0	33,942 0	26,430 0	239,724 0	0 0
ANGELIQUE C PANNELL	(i) 172,960 (ii) 0	0 0	140 0	21,362 0	24,953 0	219,415 0	0 0
WAYNE GREEN MD	(i) 179,200 (ii) 0	0 0	0 0	18,431 0	396 0	198,027 0	0 0
KATHLEEN DE MEIJ	(i) 137,802 (ii) 0	0 0	295 0	25,927 0	26,373 0	190,397 0	0 0
ANTHONY RAMOS	(i) 136,303 (ii) 0	0 0	0 0	8,159 0	12,259 0	156,721 0	0 0

SCHEDULE M  
(Form 990)

## Noncash Contributions

OMB No 1545-0047

2012

Open to Public  
InspectionDepartment of the Treasury  
Internal Revenue Service►Complete if the organizations answered "Yes" on Form  
990, Part IV, lines 29 or 30.  
►Attach to Form 990.Name of the organization  
THE CHILDREN'S AID SOCIETY

Employer identification number

13-5562191

## Part I Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art—Works of art . . . . .				
2 Art—Historical treasures . . . . .				
3 Art—Fractional interests . . . . .				
4 Books and publications . . . . .				
5 Clothing and household goods . . . . .				
6 Cars and other vehicles . . . . .				
7 Boats and planes . . . . .				
8 Intellectual property . . . . .				
9 Securities—Publicly traded . . . . .	X	27	162,316	FMV AT DATE OF GIFT
10 Securities—Closely held stock . . . . .				
11 Securities—Partnership, LLC, or trust interests . . . . .				
12 Securities—Miscellaneous . . . . .				
13 Qualified conservation contribution—Historic structures . . . . .				
14 Qualified conservation contribution—Other . . . . .				
15 Real estate—Residential . . . . .				
16 Real estate—Commercial . . . . .				
17 Real estate—Other . . . . .				
18 Collectibles . . . . .				
19 Food inventory . . . . .				
20 Drugs and medical supplies . . . . .				
21 Taxidermy . . . . .				
22 Historical artifacts . . . . .				
23 Scientific specimens . . . . .				
24 Archeological artifacts . . . . .				
25 Other ► ( _____ ) . . . . .				
26 Other ► ( _____ ) . . . . .				
27 Other ► ( _____ ) . . . . .				
28 Other ► ( _____ ) . . . . .				
29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement . . . . .			29	

	Yes	No
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1-28 that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period? . . . . .	30a	No
b If "Yes," describe the arrangement in Part II		
31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?	31	No
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions? . . . . .		
b If "Yes," describe in Part II	32a	Yes
33 If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II		

**Part II Supplemental Information.** Complete this part to provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

Identifier	Return Reference	Explanation
THIRD PARTY USE	PART I, LINE 32B	THE CHILDREN'S AID SOCIETY HIRES BANK OF NEW YORK (BNY) MELLON CAPITAL MANAGEMENT TO SELL THE CONTRIBUTIONS THAT ARE RECEIVED IN THE FORM OF PUBLICLY TRADED SECURITIES. THE PROCESS BEGINS WITH THE DONOR INFORMING THEIR BROKER TO TRANSFER THEIR STOCK SHARES TO BNY MELLON USING THE INSTRUCTIONS THAT ARE MADE AVAILABLE ON THE CHILDREN'S AID PUBLIC WEBSITE. BNY MELLON, UNDER THE INSTRUCTION OF CAS, WILL SELL THE SHARES UPON RECEIVING THE STOCK TRANSFER. THE CHILDREN'S AID IS THEN NOTIFIED OF THE DATE OF RECEIPT, FAIR MARKET VALUE AT THE DATE OF RECEIPT, SALE DATE AND PROCEEDS FROM SALE OF EACH STOCK CONTRIBUTION

**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 to provide any additional information.  
► Attach to Form 990 or 990-EZ.

**2012****Open to Public  
Inspection**Name of the organization  
THE CHILDREN'S AID SOCIETY**Employer identification number**

13-5562191

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION A, LINE 6	CHILDREN'S AID SOCIETY (CAS) IS A NEW YORK NOT-FOR-PROFIT CORPORATION WITH MEMBERS. CAS HAS ONE CLASS OF MEMBERS AND EACH MEMBER HAS ONE VOTE. MEMBERS OF CAS HAVE THE RIGHT TO VOTE ON CANDIDATES FOR THE BOARD OF TRUSTEES AND ON SUCH OTHER MATTERS AS REQUIRED BY NEW YORK LAW. MEMBERS OF CAS DO NOT HAVE THE RIGHT TO RECEIVE A SHARE OF CAS' PROFITS OR A SHARE OF CAS' NET ASSETS UPON DISSOLUTION

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION A, LINE 7A	MEMBERS OF CAS VOTE TO ELECT MEMBERS OF THE BOARD OF TRUSTEES

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION B, LINE 11	BEFORE THE FORM 990 IS FILED, THE FULL BOARD OF TRUSTEES IS PROVIDED NOTICE AND AN OPPORTUNITY TO REVIEW A DRAFT VIA AN ON-LINE SECURE WEBSITE PRIOR TO FILING

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION B, LINE 12C	CAS' CONFLICT OF INTEREST POLICY APPLIES TO TRUSTEES, OFFICERS, EMPLOYEES AND ANY OTHER PERSON WHO WAS IN A POSITION TO EXERCISE SUBSTANTIAL INFLUENCE OVER THE AFFAIRS OF CAS DURING THE PRIOR FIVE YEARS ON AN ANNUAL BASIS, CONFLICT OF INTEREST QUESTIONNAIRES ARE DISTRIBUTED TO TRUSTEES, OFFICERS AND KEY EMPLOYEES. POTENTIAL CONFLICTS OF INTEREST INVOLVING TRUSTEES, OFFICERS AND KEY EMPLOYEES ARE REPORTED TO THE EXECUTIVE COMMITTEE OF THE BOARD OF TRUSTEES. THE EXECUTIVE COMMITTEE DETERMINES WHETHER A CONFLICT OF INTEREST EXISTS AND EVALUATES CONFLICT OF INTEREST TRANSACTIONS. THE EXECUTIVE COMMITTEE ALSO REVIEWS EXISTING CONFLICTS OF INTEREST ON AN ANNUAL BASIS. AN INDIVIDUAL INVOLVED, DIRECTLY OR INDIRECTLY, IN AN ACTUAL OR POTENTIAL CONFLICT OF INTEREST TRANSACTION MAY NOT PARTICIPATE IN ANY DISCUSSION OF THE RELEVANT TRANSACTION.

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION B, LINE 15	IN MAY 2012, THE EXECUTIVE COMMITTEE OF THE BOARD OF TRUSTEES REVIEWED THE COMPENSATION OF CAS' FIVE HIGHEST PAID EMPLOYEES, NAMELY, THE PRESIDENT AND CHIEF EXECUTIVE OFFICER, EXECUTIVE VICE PRESIDENT AND CHIEF OPERATING OFFICER, VICE PRESIDENT AND CHIEF FINANCIAL OFFICER, VICE PRESIDENT AND DIRECTOR OF NATIONAL CENTER FOR COMMUNITY SCHOOLS, AND VICE PRESIDENT FOR DEVELOPMENT

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION C, LINE 19	THE CHILDREN'S AID MAKES AVAILABLE TO THE PUBLIC THROUGH THE PUBLIC WEBSITE THE FORM 990, ANNUAL REPORT, YEAR-END FINANCIAL STATEMENTS, ORGANIZATION'S MISSION STATEMENT AND THE MOST RECENT BOARD OF TRUSTEES AND OFFICERS. THE ABOVE DOCUMENTS ALONG WITH GOVERNING DOCUMENTS AND THE CONFLICT OF INTEREST POLICY ARE AVAILABLE UPON REQUEST. THE ANNUAL REPORT IS WIDELY DISTRIBUTED UPON ISSUANCE

Identifier	Return Reference	Explanation
CHANGES IN NET ASSETS OR FUND BALANCES	FORM 990, PART XI, LINE 9	PENSION RELATED CHANGES OTHER THAN NET PERIODIC PENSION COSTS 10,136,000

Identifier	Return Reference	Explanation
THE PROCESS OF OVERSEEING THE AUDIT AND SELECTION OF INDEPENDENT ACCOUNTANT	FORM 990, PART XI, LINE 2C	HAS NOT BEEN CHANGED FROM PRIOR YEAR

Identifier	Return Reference	Explanation
THE ORGANIZATION'S MISSION OR MOST SIGNIFICANT ACTIVITIES	FORM 990, PART I, LINE 1	<p>THE CHILDREN'S AID SOCIETY HELPS CHILDREN IN POVERTY TO SUCCEED AND THRIVE. WE HAVE BEEN SERVING CHILDREN FOR OVER 160 YEARS, A LONGEVITY THAT IS A TESTAMENT TO OUR ABILITY TO ADAPT TO THE EVER-CHANGING NEEDS OF TODAY'S YOUTH. AFTER ALL, YOU DON'T SUCCEED FOR 160 YEARS BY BEING OLD-FASHIONED. TODAY, CHILDREN'S AID SERVES NEW YORK'S NEEDIEST CHILDREN AND THEIR FAMILIES AT MORE THAN 40 LOCATIONS IN THE FIVE BOROUGHS AND WESTCHESTER COUNTY. OUR CARING BEGINS EVEN BEFORE BIRTH, THROUGH PRENATAL COUNSELING AND ASSISTANCE, AND CONTINUES THROUGH THE HIGH SCHOOL YEARS WITH COLLEGE AND JOB PREPARATORY TRAINING PROGRAMS. ALL ASPECTS OF A CHILD'S DEVELOPMENT ARE ADDRESSED AS HE OR SHE GROWS, FROM HEALTH CARE TO ACADEMICS TO SPORTS AND THE ARTS. AND BECAUSE STABLE CHILDREN LIVE IN STABLE FAMILIES, A HOST OF SERVICES ARE AVAILABLE TO PARENTS, INCLUDING HOUSING ASSISTANCE, DOMESTIC VIOLENCE COUNSELING AND HEALTH CARE ACCESS. THROUGHOUT CHILDREN'S AID'S HISTORY, PROGRAMMING HAS BEEN DRIVEN BY THE NEEDS OF THE CHILDREN WE SERVE. THIS PROACTIVE APPROACH STARTED IN 1853, WHEN CHILDREN'S AID FOUNDER CHARLES LORING BRACE ESTABLISHED THE ORPHAN TRAIN MOVEMENT IN RESPONSE TO AN EPIDEMIC OF HOMELESS CHILDREN. THIS APPROACH, WHICH MOVED CHILDREN FROM NEW YORK CITY STREETS TO THE HOMES OF FARM FAMILIES OUT WEST, HAS BEEN DEEMED THE BEGINNING OF THE MODERN FOSTER CARE SYSTEM. CHILDREN'S AID HAS CONTINUOUSLY BEEN AT THE FOREFRONT OF CHILDREN'S SERVICES. THE FIRST FREE SCHOOL LUNCH PROGRAM, THE FIRST INDUSTRIAL SCHOOL FOR POOR CHILDREN, THE FIRST DAY CARE PROGRAM FOR WORKING MOTHERS AND THE FIRST VISITING NURSE SERVICE WERE ALL CHILDREN'S AID INITIATIVES. EVEN TODAY, CHILDREN'S AID REMAINS ON THE CUTTING EDGE OF CHILDREN'S SERVICES. THE CARRERA ADOLESCENT SEXUALITY AND PREGNANCY PREVENTION PROGRAM HAS BEEN REPLICATED OR ADAPTED AT OVER 50 LOCATIONS IN 21 DIFFERENT STATES. THE COMMUNITY SCHOOL MODEL HAS BEEN ADAPTED BY PUBLIC SCHOOLS THROUGHOUT THE U.S. AND AS FAR AWAY AS VIETNAM. CHILDREN'S AID'S CONCURRENT PLANNING APPROACH TO FOSTER CARE BECAME THE BASIS FOR THE FEDERAL 1996 ADOPTION AND SAFE FAMILIES ACT, WHICH DEFINES TODAY'S MODERN FOSTER CARE SYSTEM. CHILDREN'S AID ACCOMPLISHES ALL THIS WHILE MAINTAINING A COMMITMENT TO FISCAL INTEGRITY. CHILDREN'S AID COMMITS AN ADMIRABLE 91 CENTS OF EVERY DOLLAR DONATED DIRECTLY TO CHILDREN'S SERVICES. THIS HAS EARNED CHILDREN'S AID A FOUR-STAR "EXCEPTIONAL" RATING FOR TWELVE CONSECUTIVE YEARS FROM CHARITY NAVIGATOR, WHICH RATES THE FINANCIAL RESPONSIBILITY OF NON-PROFIT ORGANIZATIONS. CHILDREN'S AID'S ABILITY TO ADAPT TO THE CHANGING NEEDS OF CHILDREN AND THEIR FAMILIES HAS KEPT US A RELEVANT AND VITAL COMPONENT IN THE LIVES OF NEW YORK CITY'S CHILDREN FOR OVER 160 YEARS. OUR FUTURE, AND THE OPPORTUNITIES WE WILL PROVIDE, ARE TRULY LIMITLESS.</p>

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION A, QUESTION 1	<p>THE EXECUTIVE COMMITTEE'S PRINCIPAL ROLE IS TO ACT FOR THE BOARD WHEN THE BOARD ITSELF IS UNABLE TO ACT. THIS COMMITTEE ALSO SHALL NOMINATE THE CHAIR OF THE GOVERNANCE &amp; NOMINATING COMMITTEE AND MAKE RECOMMENDATIONS TO THE BOARD AS TO EXECUTIVE COMPENSATION. ANY DECISION MADE BY THE EXECUTIVE COMMITTEE SHALL BE REPORTED TO THE BOARD AS SOON AS PRACTICAL. THE EXECUTIVE COMMITTEE SHALL CONSIST OF ALL OFFICERS, THE CHAIR OF THE FINANCE &amp; INVESTMENT COMMITTEE AND THE CHAIR OF THE GOVERNANCE &amp; NOMINATING COMMITTEE, AND FIVE (5) TO SEVEN (7) TRUSTEES WHO ARE NOT CHAIRS OF ANY STANDING COMMITTEE. THE EXECUTIVE COMMITTEE SHALL BE CHAIRED BY THE CHAIRMAN OF THE BOARD. THE EXECUTIVE COMMITTEE SHALL HAVE AND MAY EXERCISE ALL OF THE POWERS OF THE BOARD OF TRUSTEES BETWEEN MEETINGS OF THE BOARD, EXCEPT THAT THE EXECUTIVE COMMITTEE SHALL NOT HAVE THE POWER TO APPOINT OR ENTER INTO A CONTRACTUAL AGREEMENT REGARDING A NEWLY APPOINTED CHIEF EXECUTIVE OFFICER WITHOUT THE VOTE OF THE BOARD, SUBMIT ANY ACTION TO THE MEMBERS OF THE CORPORATION FOR THEIR APPROVAL, FILL ANY VACANCIES ON THE BOARD OF TRUSTEES OR ANY COMMITTEE, AMEND, REPEAL OR ADOPT BYLAWS, AMEND OR REPEAL ANY RESOLUTION OF THE BOARD OF TRUSTEES WHICH IS NOT BY ITS TERMS SO AMENDABLE OR REPEALABLE, MAKE DECISIONS REGARDING THE PURCHASE OR LEASING OF REAL ESTATE, OR MAKE DECISIONS REGARDING THE FIXING OF COMPENSATION, IF ANY, OF TRUSTEES. IN ADDITION, THE EXECUTIVE COMMITTEE SHALL BE RESPONSIBLE FOR WORKING WITH THE GOVERNANCE &amp; NOMINATING COMMITTEE TO RECOMMEND POLICIES AND PROCEDURES FOR DETERMINING EXECUTIVE COMPENSATION AND FOR SUCCESSION PLANNING, RETAINING COMPENSATION CONSULTANTS, CONDUCTING DUE DILIGENCE REGARDING COMPENSATION, AND MAKING RECOMMENDATIONS AS TO COMPENSATION TO THE BOARD.</p>

Identifier	Return Reference	Explanation
	FORM 990, PART VI, LINE 8A	MINUTES FROM THE FISCAL YEAR 2012 ANNUAL MEETING OF THE BOARD OF TRUSTEES WERE DOCUMENTED SOON AFTER THE MEETING BUT WERE NOT OFFICIALLY APPROVED UNTIL THE FOLLOWING YEAR'S ANNUAL MEETING. MINUTES FROM ALL OTHER BOARD OF TRUSTEE MEETINGS ARE APPROVED ON A CONTEMPORANEOUS BASIS

**SCHEDULE R  
(Form 990)****Related Organizations and Unrelated Partnerships**

OMB No 1545-0047

**2012****Open to Public  
Inspection**Department of the Treasury  
Internal Revenue ServiceName of the organization  
THE CHILDREN'S AID SOCIETYEmployer identification number  
13-5562191**Part I Identification of Disregarded Entities** (Complete if the organization answered "Yes" to Form 990, Part IV, line 33.)

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
(1) 910 EAST 172ND STREET LLC 105 EAST 22ND STREET NEW YORK, NY 10010 27-1491886	REAL ESTATE RENTAL SERVICES	NY	922,225	14,425,192	N/A

**Part II Identification of Related Tax-Exempt Organizations** (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.)

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?
Yes	No					
(1) MADISON AVENUE FUND FOR CHILDREN INC 105 EAST 22ND ST NEW YORK, NY 10010 13-3433266	TO RAISE FUNDS FOR CAS THROUGH AN ANNUAL EVENT	NY	501(C)(3)	170(B)(1)(A)(VI)	N/A	
(2) MILBANK HOUSING DEVELOPMENT FUND CORP 105 EAST 22ND ST NEW YORK, NY 10010 13-3421433	PROVIDES HOUSING AND COUNSELING FOR HOMELESS FAMILIES	NY	501(C)(3)	509(A)(2)	N/A	No
(3) THE UNITED CHARITIES 105 EAST 22ND ST NEW YORK, NY 10010 13-5562368	PROVIDES OFFICES FOR CHARITABLE ORGANIZATIONS	NY	501(C)(3)	509(A)(1)	N/A	No
(4) CHILDREN'S AID COLLEGE PREP CHARTER SCHOOL 1919 PROSPECT AVENUE 3RD FLOOR BRONX, NY 10460 90-0763840	TO PREPARE ELEMENTARY STUDENTS TO SUCCEED IN FUTURE YEARS, COLLEGE AND LIFE	NY	501(C)(3)	170(B)(1)(A)(II)	N/A	No

**Part III Identification of Related Organizations Taxable as a Partnership** (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.)

**Part IV Identification of Related Organizations Taxable as a Corporation or Trust** (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.)

**Part V Transactions With Related Organizations** (Complete if the organization answered "Yes" to Form 990, Part IV, line 34, 35b, or 36.)

**Note.** Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule

**1** During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

- a** Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity
- b** Gift, grant, or capital contribution to related organization(s)
- c** Gift, grant, or capital contribution from related organization(s)
- d** Loans or loan guarantees to or for related organization(s)
- e** Loans or loan guarantees by related organization(s)
- f** Dividends from related organization(s)
- g** Sale of assets to related organization(s)
- h** Purchase of assets from related organization(s)
- i** Exchange of assets with related organization(s)
- j** Lease of facilities, equipment, or other assets to related organization(s)
- k** Lease of facilities, equipment, or other assets from related organization(s)
- l** Performance of services or membership or fundraising solicitations for related organization(s)
- m** Performance of services or membership or fundraising solicitations by related organization(s)
- n** Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)
- o** Sharing of paid employees with related organization(s)
- p** Reimbursement paid to related organization(s) for expenses
- q** Reimbursement paid by related organization(s) for expenses
- r** Other transfer of cash or property to related organization(s)
- s** Other transfer of cash or property from related organization(s)

	Yes	No
<b>1a</b>		No
<b>1b</b>		No
<b>1c</b>	Yes	
<b>1d</b>	Yes	
<b>1e</b>	Yes	
<b>1f</b>		No
<b>1g</b>		No
<b>1h</b>		No
<b>1i</b>		No
<b>1j</b>		No
<b>1k</b>	Yes	
<b>1l</b>		No
<b>1m</b>		No
<b>1n</b>	Yes	
<b>1o</b>		No
<b>1p</b>		No
<b>1q</b>	Yes	
<b>1r</b>		No
<b>1s</b>		No

**2** If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds

(a) Name of other organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1) THE UNITED CHARITIES	K	498,375	ACCORDING TO LEASE AGREEMENT
(2) MILBANK HOUSING DEVELOPMENT FUND CORP	Q	1,009,631	DIRECT BILLING
(3) MILBANK HOUSING DEVELOPMENT FUND CORP	D	2,197,624	AMOUNTS DUE UNDER CONTRACT
(4) MILBANK HOUSING DEVELOPMENT FUND CORP	D	1,780,545	DIRECT EXPENSE
(5) CHILDREN'S AID PREP CHARTER SCHOOL	B	194,324	CONTRIBUTIONS GRANTED TO AFFILIAT
(6) CHILDREN'S AID PREP CHARTER SCHOOL	E	322,722	AMOUNTS DUE UNDER CONTRACT

**Part VI Unrelated Organizations Taxable as a Partnership** (Complete if the organization answered "Yes" to Form 990, Part IV, line 37.)

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

**Software ID:**  
**Software Version:**  
**EIN:** 13-5562191  
**Name:** THE CHILDREN'S AID SOCIETY

Schedule R (Form 990) 2012

Page 5

**Part VII Supplemental Information**

Complete this part to provide additional information for responses to questions on Schedule R (see instructions)

Identifier	Return Reference	Explanation		
<b>--&gt; Form 990, Schedule R, Part V - Transactions With Related Organizations</b>				
(a) Name of other organization	(b) Transaction type(a-s)	(c) Amount Involved	(d) Method of determining amount involved	
THE UNITED CHARITIES	K	498,375	ACCORDING TO LEASE AGREEMENT	
MILBANK HOUSING DEVELOPMENT FUND CORP	Q	1,009,631	DIRECT BILLING	
MILBANK HOUSING DEVELOPMENT FUND CORP	D	2,197,624	AMOUNTS DUE UNDER CONTRACT	
MILBANK HOUSING DEVELOPMENT FUND CORP	D	1,780,545	DIRECT EXPENSE	
CHILDREN'S AID PREP CHARTER SCHOOL	B	194,324	CONTRIBUTIONS GRANTED TO AFFILIAT	
CHILDREN'S AID PREP CHARTER SCHOOL	E	322,722	AMOUNTS DUE UNDER CONTRACT	

## Additional Data

**Software ID:**  
**Software Version:**  
**EIN:** 13-5562191  
**Name:** THE CHILDREN'S AID SOCIETY

**Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors**

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)					(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
		Or director	Individual trustee	Institutional Trustee	Officer	Key employee			
MARK M EDMISTON CHAIR	5 00	X		X			0	0	0
IRIS ABRONS VICE CHAIR	5 00	X		X			0	0	0
ANNE JEFFRIES CITRIN VICE CHAIR	5 00	X		X			0	0	0
KEVIN J WATSON TREASURER	5 00	X		X			0	0	0
MARTHA BICKNELL KELLNER SECRETARY	5 00	X		X			0	0	0
OLIVIER BRANDICOURT TRUSTEE	5 00	X					0	0	0
CAROLYN BRODY TRUSTEE	5 00	X					0	0	0
SUSAN S BROWN TRUSTEE	5 00	X					0	0	0
ELLY CHRISTOPHERSEN TRUSTEE	5 00	X					0	0	0
SAMUEL M CONVISSOR TRUSTEE	5 00	X					0	0	0
JAN CORREA TRUSTEE	5 00	X					0	0	0
SUSAN COUPEY MD TRUSTEE	5 00	X					0	0	0
GLORIA M DABIRI TRUSTEE	5 00	X					0	0	0
RUSSEL DIAMOND TRUSTEE	5 00	X					0	0	0
BART J EAGLE TRUSTEE	5 00	X					0	0	0
RICHARD EDELMAN TRUSTEE	5 00	X					0	0	0
DESMOND G FITZGERALD TRUSTEE	5 00	X					0	0	0
MRS ROBERT M GARDINER TRUSTEE	5 00	X					0	0	0
LOLITA K JACKSON TRUSTEE	5 00	X					0	0	0
LANE H KATZ TRUSTEE	5 00	X					0	0	0
URSULA G LAMOTTE TRUSTEE	5 00	X					0	0	0
CHRISTOPHER LAWRENCE TRUSTEE	5 00	X					0	0	0
BETH LEVENTHAL TRUSTEE	5 00	X					0	0	0
MARTHA BERMAN LIPP FORMER TRUSTEE	5 00	X					0	0	0
JANINE E LUKE TRUSTEE	5 00	X					0	0	0

**Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors**

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)				(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
		Former Or director	Individual trustee	Officer	Key employee			
SHARON MADISON TRUSTEE	5 00	X				0	0	0
DORIS MEISTER TRUSTEE	5 00	X				0	0	0
FELIX A ORBE TRUSTEE	5 00	X				0	0	0
CHARLES PENNER TRUSTEE	5 00	X				0	0	0
CALVIN RAMSEY TRUSTEE	5 00	X				0	0	0
AMY E SCHARF TRUSTEE	5 00	X				0	0	0
ROB SPEYER TRUSTEE	5 00	X				0	0	0
ROBERT WOLF TRUSTEE (FORMER)	5 00	X				0	0	0
ELIOT GREEN TRUSTEE (FORMER)	5 00	X				0	0	0
PETER P HANSON TRUSTEE (FORMER)	5 00	X				0	0	0
MEREDITH PHELPS RUGG TRUSTEE (FORMER)	5 00	X				0	0	0
ROSALIE K STAHL TRUSTEE (FORMER)	5 00	X				0	0	0
RICHARD R BUEY JR PRES & CEO, ASST SEC/TR	40 00			X		408,431	0	30,198
WILLIAM WEISBERG EXEC V P & COO	40 00			X		230,813	0	55,026
DANIEL LEHMAN V P & CFO	40 00			X		205,564	0	6,248
PATRICIA GRAYSON V P FOR DEVELOPMENT	40 00			X		232,001	0	63,062
JANE M QUINN V P & DIR OF NATIONAL CEN	40 00			X		224,947	0	63,562
VALERIE RUSSO V P FOR STRATEGY & EXCELLENCE	40 00			X		187,829	0	50,016
JANE GOLDEN V P FOR CHILD WELFARE & FAMILY SERVICES	40 00			X		205,293	0	30,054
BEVERLY COLON V P OF HEALTH & WELLNESS	40 00			X		157,327	0	35,700
DREMA L BROWN V P FOR SCHOOL AGE PROGRAMS	40 00			X		159,683	0	34,373
LISA HANDWERKER MEDICAL DIRECTOR	40 00			X		179,352	0	60,372
ANGELIQUE C PANNELL VP & GENERAL COUNSEL	40 00			X		173,100	0	46,315
WAYNE GREEN MD CHIEF PSYCHIATRIST	40 00			X		179,200	0	18,827
KATHLEEN DE MEIJ DIR OF ANNUAL GIVING & SP	40 00			X		138,097	0	52,300

**Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors**

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)					(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	
		Former Or director	Individual trustee	Institutional trustee	Officer	Key employee	Highest compensated employee			
ANTHONY RAMOS DIRECTOR FOR MARKETING & COMMUNICATIONS	40 00					X		136,303	0	20,418