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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)

OMB No 1545-0047

Open to Public

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

A Fo	or the	2012 ca	lendar year, or tax year beginning	07-01-2012 , 2012, and ending 06-	30-2013		•
		applicable	C Name of organization			D Employer	identification number
	dress cl		CHAPIN HALL CENTER FOR CHILDREN			36-2167	7012
	me cha	_	Doing Business As chapin hall at the univ of chicago				
	tial retu rminate		Number and street (or P O box if mai 1313 EAST 60TH STREET Suite	Il is not delivered to street address) Room/s	uite	E Telephone	number
An	nended	return	City or town, state or country, and ZII	P + 4		(773)75	33-5900
Γ Ap	plication	n pending	CHICAGO, IL 60637			G Gross rece	ıpts \$ 12,953,824
			F Name and address of princ	ıpal officer	H(a) Is	s this a group re	
			BRYAN SAMUELS 1313 EAST 60TH STREET			ffiliates?	┌ Yes ┌ No
			CHICAGO,IL 60637		 H(b) Δ	re all affiliates ii	ncluded? TYes TNo
			<u> </u>				list (see instructions)
		npt status	,(-)(-) ,(-) (sert no) 4947(a)(1) or 527	 H(c)	Group exemption	number 🕨
J W	ebsite	e: ► W\	WW CHAPINHALL ORG		11(0)	' '	
		rganızatıo	Corporation Trust Association	Other ►	L Year	of formation 1865	M State of legal domicile IL
Pa	rt I	Sun	nmary				
Governance		KNOWL		IS AN INDEPENDENT POLICY RES			
၌ ၁	2	Check t	his box দ if the organization disc	continued its operations or disposed	of more tha	an 25% of its ne	t assets
	3	Number	of voting members of the governin	g body (Part VI, line 1a)		1	3 11
Activities &	1			the governing body (Part VI, line 1b		—	4 11
돌 전	1			alendar year 2012 (Part V, line 2a)		<u> </u>	5 0
đ	6	Total nu	umber of volunteers (estimate if ne	cessary)		[6 11
				t VIII, column (C), line 12		<u> </u>	7a 0
	b	Net unr	elated business taxable income fro	m Form 990-T, line 34			7b
						Prior Year	Current Year
<u>o</u>	8		ibutions and grants (Part VIII, line		·	11,836,099	9 8,746,261
Rayenue	9 10		am service revenue (Part VIII, line	e 2g)	•	1,709,486	<u> </u>
Æ	11		revenue (Part VIII, column (A), lı	, ,, ,	'	-22,02	
	12	Total		must equal Part VIII, column (A), lır	ne	13,523,56	
	13			X, column (A), lines 1-3)		(0
	14	Bene	fits paid to or for members (Part IX	, column (A), line 4)		(0
ø	15	Salar 5–10		benefits (Part IX, column (A), lines		9,744,12!	7,966,878
Expenses	16a		•	olumn (A), line 11e)			0 0
₩ E	Ь		undraising expenses (Part IX, column (D),				-
Ш	17			nes 11a-11d, 11f-24e)		3,741,760	2,767,418
	18	Total	expenses Add lines 13-17 (must	equal Part IX, column (A), line 25)		13,485,88	5 10,734,296
	19	Reve	nue less expenses Subtract line 1	8 from line 12		37,678	-191,967
Not Assets or Fund Balances					Begin	ning of Current Year	End of Year
Seet Lagar	20	Total	assets (Part X, line 16)			39,605,18	3 38,685,275
A B	21		liabilities (Part X, line 26)		. [7,912,78	
	22	_	ssets or fund balances Subtract lı	ne 21 from line 20		31,692,40	31,681,201
Unde my k prepa	nowled arer ha	alties of dge and as any l	belief, it is true, correct, and comp nowledge *** nature of officer	nined this return, including accompa plete Declaration of preparer (other t			
Her	e		ABETH BENNETT director of finance and bure or print name and title	udget			
		<u> </u>	Print/Type preparer's name	Preparer's signature	Date	Check If PT	TIN
Pai	d	-	Rebekuh Eley Firm's name BDO USA LLP			self-employed Firm's EIN	
	pare	Г					
lle	Ωn	tv l	Firm's address 🟲 330 N Wabash Suite 320	U		Phone no (312) 8	56-9100

CHICAGO, IL 60611

May the IRS discuss this return with the preparer shown above? (see instructions) $\,$.

Use Only

. ✓ Yes ☐ No

(Expenses \$ including grants of \$ Total program service expenses ►

7,541,477

) (Revenue \$

Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 💆	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		No
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? <i>If</i> "Yes," complete Schedule C, Part II	4		No
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		No
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 1	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 2	8		No
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^{\bullet}	9		No
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	10	Yes	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	Yes	
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	11c		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.	11d		No
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X.	11f	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	Yes	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		No
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	15		No
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	16		No
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		No
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Par	t 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		No
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	Yes	
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		No
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		No
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		No
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If</i> "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)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part	,		
_		28a		No
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		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	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		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	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33	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	34	Yes	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section $512(b)(13)$? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		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	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	38	Yes	

G I	Chack if Schodule O contains a response to any question in this Bart V			г
	Check if Schedule O contains a response to any question in this Part V	-	Yes	No
la	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1a 0			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable			
	gaming (gambling) winnings to prize winners?	1c		
а	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			
_	by this return	4		
,	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b		
3	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		No
)	If "Yes," has it filed a Form 990-T for this year? <i>If "No," provide an explanation in Schedule O</i>	3b		
a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		No
)	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts	-		
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
)	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b	<u> </u>	No
:	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	_		
		5c		_
	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?	6a		No
)	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
	Organizations that may receive deductible contributions under section 170(c).			
l	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		N
)	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to			
	file Form 8282?	7c		N
ĺ	If "Yes," indicate the number of Forms 8282 filed during the year	-		
•	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit			
	contract?	7e		N
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		N
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?			
		8		
	Sponsoring organizations maintaining donor advised funds. Did the organization make any taxable distributions under section 4966?	9a		
	Did the organization make any taxable distributions under section 49667	9a 9b		
	Section 501(c)(7) organizations. Enter	טפ		
	Initiation fees and capital contributions included on Part VIII, line 12 10a			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders			
	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
	Section 501(c)(29) qualified nonprofit health insurance issuers.			
	Is the organization licensed to issue qualified health plans in more than one state?			
-	Note. See the instructions for additional information the organization must report on Schedule O	13a		
)	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			_
	Enter the amount of reserves on hand	Ţ	ļ	
ı	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No
	If "Yes " has it filed a Form 720 to report these payments? If "No " provide an explanation in Schedule O	14h		

Section A. Governing Body and Management

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.

			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year			
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O			
b	Enter the number of voting members included in line 1a, above, who are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? .	3	Yes	
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4	Yes	
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No
6	Did the organization have members or stockholders?	6		No
7a	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?	7a		No
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		N o
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No
Se	ection B. Policies (This Section B requests information about policies not required by the Internal R	evenu	<u>ie Cod</u>	e.)
			Yes	No
	Did the organization have local chapters, branches, or affiliates?	10a		N o
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
C	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	Yes	
13	Did the organization have a written whistleblower policy?	13	Yes	
14	Did the organization have a written document retention and destruction policy?	14	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
	The organization's CEO, Executive Director, or top management official	15a	Yes	
b	Other officers or key employees of the organization	15b	Yes	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)	, [
	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No
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?	16b		

Section C. Disclosure

- 17 List the States with which a copy of this Form 990 is required to be filed►IL
- 18 Section 6104 requires an organization to make its 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
 - Own website Another's website Upon request Other (explain in Schedule O)
- 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
- State the name, physical address, and telephone number of the person who possesses the books and records of the organization ►ELIZABETH BENNETT 1313 EAST 60TH STREET CHICAGO, IL (773) 256-5149

<u>Part VII</u> Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

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

1a Complete this table for all persons required to be listed 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

(A) Name and Title	(B) A verage hours per week (list any hours	(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	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation from the	
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations	
(1) Adrienne Y Bailey	1 0	Х						0	0	0	
Director											
(2) Beverly Fleming Secretary	2 0	х		х				0	0	0	
(3) Jerry Friedman	1 0										
Director	10	Х						0	0	0	
(4) Sunil Garg	2 0										
Vice Chair		Х		Х				0	0	0	
(5) Susan Levine	1 0	Х						0	201,502	52,830	
Director		,,						·			
(6) Colm O'Muircheartaigh	1 0	Х						0	253,062	70,802	
Director (7) Jim Croft	2 0										
` ′	2 0	х		х				0	0	o	
Treasurer (8) Neil Guterman											
Director	1 0	х						0	334,215	90,286	
(9) David B Fithian	1 0										
		Х						0	342,305	27,241	
Director (10) John Hansen	2 0										
	20	Х		х				0	364,878	77,623	
Chair (11) Gina M Samuels	1 0										
	10	х						0	98,278	22,195	
Director (12) Matt Stagner	40 0			-	\vdash						
	40 0			х				252,398	0	46,729	
Executive Director (13) Cheryl Smithgall	40.0										
	40 0			х				117,569		34,401	
Acting Excecutive Director				_	\vdash						
(14) Ada Skyles	37 5					х		163,854	0	14,285	
Associate Director										·	
(15) Robert George	40 0					x		214,930	0	42,407	
Research Fellow					<u> </u>			,		, , , ,	
	40 0					×		170,143	0	38,170	
(16) Deborah Daro Tuggle									V	50,170	
Research Fellow											
	37 5					х		210,245	0	29,000	

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

	(A) Name and Title	(B) A verage hours per week (list any hours	more pers	than on is	one bot	note boo	chec x, unle n offic rustee	ess er	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations	Estir amount compe fron	F) nated of other nsation the
		for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	and r	ization elated zations
(18)	Elizabeth L Bennett	25 6					х		68,107			29,372
direct	or of finance and budget						<u> </u>		00,107			23,372
						 						
						\vdash						
							<u> </u>					
						t						
						\vdash						
						-						
1b	Sub-Total						>	_			<u> </u>	
c	Total from continuation sheets to Pa	rt VII, Section A		•	•		▶ [
d	Total (add lines 1b and 1c)						 		1,197,246	1,594,240		575,341
2	Total number of individuals (including \$100,000 of reportable compensation				ed a	bove	e) who	rec	eived more than			
	The state of the s											
											Yes	No
3	Did the organization list any former o on line 1a? <i>If</i> "Yes," complete Schedule			e, key	/ em	nplo •	yee,o •	rhig • •	ghest compensate	ı	3	No
4	For any individual listed on line 1a, is									om the		
	organization and related organizations	greater than \$1	• •		res	s, c	ompie •	te 50	eneaule) for such		4 Yes	
5	Did any person listed on line 1a recei	ve or accrue com	pensat	ion f	rom	any	unrel	atec	d organization or i		1 103	+
	services rendered to the organization								_	ŀ	5	No
											•	
	ection B. Independent Contrac							44		#100 000 -	<u> </u>	
1	Complete this table for your five higher compensation from the organization F	•										r
	Name and	(A) business address							Doscripti	(B) on of services		C)
UNIV	ERSITY OF ILLINOIS , PO BOX 20787 SPRINGFI								Subcontractor	on or services	Compe	189,610
	n Consulting Par , 161 N CLARK STREET SUITE		0601						Subcontractor			117,948
	Total number of independent contracto \$100,000 of compensation from the or		not lım	ıted t	o th	ose	liste	dabo	ove) who received	more than		

	Check if Schedule O contains a respons		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections
1.						512,513, or 514
원 1a	Federated campaigns 1a					
mor b	Membership dues 1b					
A .	Fundraising events 1c					
Other Similar Amounts	Related organizations 1d	4.726.626				
Sim	Government grants (contributions) 1e	4,736,636	ļ			
e f	All other contributions, gifts, grants, and similar amounts not included above	4,009,625				
	Noncash contributions included in lines 1a-1f \$		İ			
and P			8,746,261			
		Business Code				
2a b c d						
Ь						
C C						
d						
e f	All other program service revenue					
		_				
' g 3	Total. Add lines 2a-2f		0			
	and other similar amounts)		437,839			437,83
4	Income from investment of tax-exempt bond pro	. F	0			
5	Royalties	(II) Personal	0			
6a	- 250 722	(II) I CISOIIII				
ь	Less rental 376,848 expenses					
С	Rental income -18,125	0				
d	or (loss) Net rental income or (loss)		-18,125	-18,125		
	(ı) Securities	(II) O ther				
7a	Gross amount from sales of 3,411,001 assets other than inventory					
ь	Less cost or other basis and 2,034,647					
	sales expenses Gain or (loss) 1,376,354					
d d	Net gain or (loss)		1,376,354			1,376,35
8a						
	See Part IV, line 18					
С	Less direct expenses b Net income or (loss) from fundraising ev	ents -	0			
	Gross income from gaming activities See Part IV, line 19	r P				
	a lace direct expenses					
С	Less direct expenses b Net income or (loss) from gaming activity	ties	o			
	Gross sales of inventory, less returns and allowances					
	Less cost of goods sold b					
b	Less cost of goods sold b Net income or (loss) from sales of inven	tory 🛌	0			
		Business Code				
11a						<u> </u>
b						
С						
d	All other revenue					
e	Total. Add lines 11a-11d	▶	0			
12	Total revenue. See Instructions	🗚	10,542,329	-18,125		1,814,1

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 (D) (B) Do not include amounts reported on lines 6b, (A) Program service Management and Fundraising 7b. 8b. 9b. and 10b of Part VIII. Total expenses expenses general expenses expenses Grants and other assistance to governments and organizations in the United States See Part IV, line 21 Grants and other assistance to individuals in the United States See Part IV, line 22 0 Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16 0 0 Benefits paid to or for members Compensation of current officers, directors, trustees, and 247,586 66,221 178,889 2,476 key employees . Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) . . . Other salaries and wages 7,719,292 5,713,411 1,993,720 12,161 Pension plan accruals and contributions (include section 401(k) 0 and 403(b) employer contributions) 0 Other employee benefits 0 10 11 Fees for services (non-employees) 0 Management 0 Legal 35,375 Accounting 35,375 Lobbying 0 0 Professional fundraising services See Part IV, line 17 Investment management fees 146,395 146,395 Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on 1,294,917 891,552 403,365 Schedule O) Advertising and promotion . . 0 12 13 Office expenses 117,136 77,792 39,344 207,259 135,592 71,667 14 Information technology . . . 15 0 Royalties . 237,022 136,701 100,321 16 Occupancy **17** 209,208 190,710 18,498 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 0 0 19 Conferences, conventions, and meetings . 20 100,342 65,102 35,240 Payments to affiliates 21 0 158,243 22 Depreciation, depletion, and amortization . 102,668 55,575 23 18,172 11,790 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) 32,901 a MISCELLANEOUS 138,923 106,022 PROFESSIONAL DEVELOPMENT 22,144 15,369 6,775 C **BUSINESS MEALS** 82,282 28,547 53,735 d e All other expenses Total functional expenses. Add lines 1 through 24e 7,541,477 25 10,734,296 3.178.182 14,637 26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ► | if following SOP 98-2 (ASC 958-720)

Part X Balance Sheet

	T X	Check if Schedule O contains a response to any question in thi	s Part	×			· · · · · · · · · · · · · · · · · · ·
					(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing			1,065,900	1	9,567
	2	Savings and temporary cash investments			1,405,193	2	3,360,600
	3	Pledges and grants receivable, net			0	3	0
	4	Accounts receivable, net			3,610,987	4	3,076,331
	5	Loans and other receivables from current and former officers, cemployees, and highest compensated employees. Complete Paschedule L	art II d	f	0	5	0
ts	6	Loans and other receivables from other disqualified persons (a $4958(f)(1)$), persons described in section $4958(c)(3)(B)$, and and sponsoring organizations of section $501(c)(9)$ voluntary e organizations (see instructions) Complete Part II of Schedule	contrib mploye	uting employers			0
Assets	,	Notes and lane recovable not			0	ЬŤН	
Ą	7	Notes and loans receivable, net			0		
	8	Inventories for sale or use				L •	
	9	Prepaid expenses and deferred charges		 I	301,422	9	684,477
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a	5,828,008			
	b	·	10b	3,176,497	, ,		2,651,511
	11	Investments—publicly traded securities			0		0
	12	Investments—other securities See Part IV, line 11			30,401,334	12	28,902,789
	13	Investments—program-related See Part IV, line 11		•	0	13	0
	14	Intangible assets		•	0	14	0
	15	Other assets See Part IV, line 11			0	15	0
	16	Total assets. Add lines 1 through 15 (must equal line 34) .			39,605,183	16	38,685,275
	17	Accounts payable and accrued expenses			703,937	17	629,502
	18	Grants payable			0	18	0
	19	Deferred revenue			1,752,523	19	2,249,437
	20	Tax-exempt bond liabilities			3,750,000	20	3,550,000
ر. م	21	Escrow or custodial account liability Complete Part IV of Sch			0	21	0
<u>a</u>	22	Loans and other payables to current and former officers, direct key employees, highest compensated employees, and disquali		ıstees,			
Liabilit		persons Complete Part II of Schedule L			О	22	0
	23	Secured mortgages and notes payable to unrelated third partie	s.		0	23	0
	24	Unsecured notes and loans payable to unrelated third parties			0	24	0
	25	Other liabilities (including federal income tax, payables to rela and other liabilities not included on lines 17-24) Complete Pa					
		D			1,706,321	25	575,135
	26	Total liabilities. Add lines 17 through 25		•	7,912,781	26	7,004,074
s e		Organizations that follow SFAS 117 (ASC 958), check here ► lines 27 through 29, and lines 33 and 34.	▽ and	complete			
an	27	Unrestricted net assets			26,692,402	27	26,681,201
- - -	28	Temporarily restricted net assets			0	28	0
⊒	29	Permanently restricted net assets			5,000,000	29	5,000,000
r Fund Balances		Organizations that do not follow SFAS 117 (ASC 958), check h complete lines 30 through 34.	ere ►	┌─ and			
ō	30	Capital stock or trust principal, or current funds	_			30	
Assets or	31	Paid-in or capital surplus, or land, building or equipment fund				31	
55	32	Retained earnings, endowment, accumulated income, or other f				32	
¥	33	Total net assets or fund balances			31,692,402	33	31,681,201
Met					· · ·	\vdash	
	34	Total liabilities and net assets/fund balances	• •		39,605,183	34	38,685,275

Pai	rt XI Reconcilliation of Net Assets				
	Check if Schedule O contains a response to any question in this Part XI		• •	• •	<u>.</u>
1	Total revenue (must equal Part VIII, column (A), line 12)			101	= 4 2 2 2 0
2	Total expenses (must equal Part IX, column (A), line 25)	1			542,329
_		2		10,7	734,296
3	Revenue less expenses Subtract line 2 from line 1	3		- 1	191,967
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		31,6	592,402
5	Net unrealized gains (losses) on investments	5			-585
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			181,351
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10			581,201
Par	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII				. Г
				Yes	No
1	Accounting method used to prepare the Form 990				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or revie a separate basis, consolidated basis, or both	wed on			
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a sepa basis, consolidated basis, or both	arate			
	▼ Separate basis				
С	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversigh audit, review, or compilation of its financial statements and selection of an independent accountant?	nt of the	2c	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	n			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in th Single Audit Act and OMB Circular A-133?	e	За	Yes	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the i audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	required	3b	Yes	

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As Filed Data -

DLN: 93493128012324

Employer identification number

OMB No 1545-0047

SCHEDULE A

(Form 990 or 990EZ)

Name of the organization

CHAPIN HALL CENTER FOR CHILDREN

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

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

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

Open to Public Inspection

									36-21670		
	rt I			blic Charity Sta		•		•		nstruction	ns.
	rganı		•	te foundation becaus	•			•	•		
1			-	on of churches, or a				ection 170	(b)(1)(A)(i).		
2	Г	A scho	ol described	in section 170(b)(1	l)(A)(ii). (At	tach Sched	ule E)				
3	Γ	A hosp	ıtal or a coo	perative hospital se	rvice organiz	zatıon descr	ıbed ın sectio	n 170(b)(1	.)(A)(iii).		
4	Γ	A medi	cal researcl	h organization opera	ted ın conjun	ction with a	hospital des	cribed in se	ection 170(b)(1)(A)(iii).	. Enter the
	_			ty, and state							
5	ı		•	erated for the benefi	-	or universi	ty owned or o	perated by	a government	tal unit des	scribed in
		sect ion	170(b)(1)(A)(iv). (Complete P	art II)						
6	Г	A feder	al, state, or	local government o	government	al unit desc	rıbed ın sect i	ion 170(b)(1)(A)(v).		
7	굣			at normally receives			support from	a governm	ental unit or f	rom the ge	neral public
8	Г			n 170(b)(1)(A)(vi). described in sectio r			mplete Part II	[)			
9	Г		-	at normally receives			-	-	butions, mem	bership fe	es, and gross
		_		ities related to its e					· <u>·</u> ·		· =
		•		oss investment inco	· ·	=					
				ganızatıon after June						•	
10	Г	•	,	, ganızed and operateo	•			•	•		
11	_	_		ganized and operated						o carry ou	t the nurnoses of
	'			ly supported organiz							
				bes the type of supp							
		a	Type I	b	☐ Type II	I - Function	nally integrate	ed d	Type III - No	on-functio	nally integrated
е	Γ	,	_	ox, I certify that the	_				, ,		•
				on managers and ot	her than one	or more pub	olicly support	ed organiza	ations describ	ed in secti	on 509(a)(1) or
f			1509(a)(2)	received a written de	etermination	from the IR	S that it is a	Tyne I Tyl	ne II or Tyne	III sunno	rting organization
•			this box	received a written a	ccciiiiiacioii	nom the in	S that it is a	1 ypc 1, 1 y	oc 11, or 1 ypc	тт зарро	
g		Since A	ugust 17, 2	2006, has the organ	ızatıon accep	ted any gift	or contributi	on from any	y of the		·
			ng persons?								
				rectly or indirectly o	•		-	persons de	escribed in (ii)		Yes No
				governing body of th		_	n?				lg(i)
				er of a person descr							.g(ii)
		• •		lled entity of a perso						11	g(iii)
h		Provide	the followi	ng information about	the supporte	ed organizat	tion(s)				
(i) Nan	ne of	(ii) EIN	(iii) Type of	(iv) Is t	the	(v) Did you	ı notıfy	(vi) Is	the	(vii) A mount of
•	uppo	rted		organization	organizati		the organi		organizat		monetary
OI	ganiz	ation						•	col (i) org		support
		lines 1-9 above your governing support? in the U.S.? or IRC section document?							S?		
				or IRC section (see	aocume	nt/					
				instructions))		T				T	_
				,,	Yes	No	Yes	No	Yes	No	
							1				
			I	I	I	I	1	1	I	1	ı

instructions

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 (a) 2008 **(b)** 2009 (c) 2010 (d) 2011 (e) 2012 (f) Total in) 🟲 1 Gifts, grants, contributions, and membership fees received (Do not 8,703,271 9,417,146 11,093,760 11,836,099 8,746,261 49,796,537 include any "unusual grants ") Tax revenues levied for the organization's benefit and either 0 paid to or expended on its behalf 3 The value of services or facilities furnished by a governmental unit to the organization without charge 8,703,271 9,417,146 11,093,760 11,836,099 8,746,261 49,796,537 Total. Add lines 1 through 3 The portion of total contributions by each person (other than a governmental unit or publicly 0 supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) Public support. Subtract line 5 49,796,537 from line 4 Section B. Total Support Calendar year (or fiscal year **(e)** 2012 (a) 2008 **(b)** 2009 (c) 2010 (d) 2011 (f) Total beginning in) 🟲 8,703,271 11,093,760 11,836,099 Amounts from line 4 9,417,146 8,746,261 49,796,537 Gross income from interest, dividends, payments received on securities loans, rents, royalties 485,884 610,214 616,965 735,267 796,562 3,244,892 and income from similar sources Net income from unrelated business activities, whether or not the business is regularly carried on 10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) 11 Total support (Add lines 7 53,041,429 through 10) 12 Gross receipts from related activities, etc (see instructions) 12 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check 13 Section C. Computation of Public Support Percentage 14 Public support percentage for 2012 (line 6, column (f) divided by line 11, column (f)) 14 93 882 % Public support percentage for 2011 Schedule A, Part II, line 14 15 93 851 % 16a 33 1/3% support test—2012. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box ►V and stop here. The organization qualifies as a publicly supported organization b 33 1/3% support test—2011. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 17a 10%-facts-and-circumstances test - 2012. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization b 10%-facts-and-circumstances test - 2011. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see

Schedule A (Form 990 or 990-EZ) 2012 Page 3 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 (a) 2008 **(b)** 2009 (c) 2010 (d) 2011 (e) 2012 (f) Total in) 🟲 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants") 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						
3	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5						
	Amounts included on lines 1, 2,						
<i>7</i> a	and 3 received from disqualified						
	persons						
b	Amounts included on lines 2 and 3						
_	received from other than						
	disqualified persons that exceed						
	the greater of \$5,000 or 1% of the						
	amount on line 13 for the year						
С	Add lines 7a and 7b						
8	Public support (Subtract line 7c						
	from line 6)						
_Se	ction B. Total Support						
Cale	ndar year (or fiscal year beginning	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
	in) ►	(u) 2000	(6) 2003	(6) 2010	(4) 2011	(6) 2012	(1) 10tai
9	A mounts from line 6						
10a	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar						
	sources						
Ь	Unrelated business taxable income (less section 511 taxes)						
	from businesses acquired after						
	June 30, 1975						
c	Add lines 10a and 10b						
11	Net income from unrelated						
	business activities not included						
	in line 10b, whether or not the						
	business is regularly carried on						
12	Other income Do not include						
	gain or loss from the sale of						
	capital assets (Explain in Part						
	IV)						
13	Total support. (Add lines 9, 10c,						
	11, and 12)			Librari Corretto con	6.01	E04(-)(2)	
14	First five years. If the Form 990 is for	or the organization	on's first, second	i, thira, fourth, or	ππη tax year as a	1 501(c)(3) org	anization, ►
	check this box and stop here	a Cunnaut Da					<u> </u>
	ction C. Computation of Public			1.2		T I	
15	Public support percentage for 2012			13, column (T))		15	
16	Public support percentage from 2011	L Schedule A, Pa	art III, line 15			16	
Se	ction D. Computation of Inve	stment Inco	me Percenta	ge			
17	Investment income percentage for 20				nn (f))	17	
					. , ,		
18	Investment income percentage from					18	
19a	33 1/3% support tests—2012. If the o						ıd lıne 17 ıs not ▶□

33 1/3% support tests—2011. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18

is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Schedule A (Form 990 or 990-EZ) 2012

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DLN: 93493128012324

OMB No 1545-0047

SCHEDULE D

(Form 990)

Department of the Treasury

Supplemental Financial Statements

► 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

Open to Public

emai	Revenue Service F Attach to Fol	rm 990. F See separate instructions.		Inspection
	me of the organization PIN HALL CENTER FOR CHILDREN			oloyer identification number
Pa	organizations Maintaining Donor Ad			
		(a) Donor advised funds		(b) Funds and other accounts
	Total number at end of year			
	Aggregate contributions to (during year)			
	Aggregate grants from (during year)			
	Aggregate value at end of year			
	Did the organization inform all donors and donor advis funds are the organization's property, subject to the o	<u> </u>	nor adv	ısed ┌ Yes ┌ No
	Did the organization inform all grantees, donors, and cused only for charitable purposes and not for the bene conferring impermissible private benefit?			
1	t III Conservation Easements. Complete	f the organization answered "Yes" t	to Forr	n 990, Part IV, line 7.
	Purpose(s) of conservation easements held by the org Preservation of land for public use (e.g., recreation Protection of natural habitat Preservation of open space Complete lines 2a through 2d if the organization held	n or education)	certifie	d historic structure
	easement on the last day of the tax year	a qualified conservation contribution in		n or a conscivation
				Held at the End of the Year
	Total number of conservation easements		2a	
	Total acreage restricted by conservation easements		2b	
	Number of conservation easements on a certified hist	coric structure included in (a)	2c	
	Number of conservation easements included in (c) ac historic structure listed in the National Register	quired after 8/17/06, and not on a	2d	
	Number of conservation easements modified, transfer	red, released, extinguished, or terminate	ed by th	he organization during
	the tax year 🗠			
	Number of states where property subject to conservat	tion easement is located ►		
	Does the organization have a written policy regarding enforcement of the conservation easements it holds?	the periodic monitoring, inspection, han	dling of	f violations, and Yes No
	Staff and volunteer hours devoted to monitoring, insper	ecting, and enforcing conservation easer	ments (during the year
	A mount of expenses incurred in monitoring, inspecting	g, and enforcing conservation easement	s durın	g the year
	Does each conservation easement reported on line 2(and section 170(h)(4)(B)(II)?	(d) above satisfy the requirements of sec	ction 1	70(h)(4)(B)(ı)
	In Part XIII, describe how the organization reports co balance sheet, and include, if applicable, the text of th the organization's accounting for conservation easem	ne footnote to the organization's financia		
ľ	Complete if the organization answered "	ns of Art, Historical Treasures, Yes" to Form 990, Part IV, line 8.	or Ot	her Similar Assets.
	If the organization elected, as permitted under SFAS works of art, historical treasures, or other similar assesservice, provide, in Part XIII, the text of the footnote	ets held for public exhibition, education,	or rese	earch in furtherance of public
	If the organization elected, as permitted under SFAS works of art, historical treasures, or other similar assesservice, provide the following amounts relating to the	ets held for public exhibition, education,		
	(i) Revenues included in Form 990, Part VIII, line 1			► \$
	(ii) Assets included in Form 990, Part X			► \$
	If the organization received or held works of art, histo following amounts required to be reported under SFAS			
	Revenues included in Form 990, Part VIII, line 1			▶ \$
	Assets included in Form 990, Part X			-
	· · · · · · · · · · · · · · · · · · ·			т

Par	Organizations Maintaining Co	llections of Art	, His	<u>tori</u>	cal Tre	asures, or (<u>Othe</u>	r Similar As	sets (continued)
3	Using the organization's acquisition, access collection items (check all that apply)	ion, and other recor	ds, ch	eck	any of the	e following that	are a	significant use	of its	
а	Public exhibition		d	Γ	Loan or	exchange prog	grams	•		
b	Scholarly research		e	Γ	Other					
c	Preservation for future generations									
4	Provide a description of the organization's c Part XIII	ollections and expla	ın how	the [,]	/ further t	the organizatio	n's ex	kempt purpose	ın	
5	During the year, did the organization solicit								_	_
	assets to be sold to raise funds rather than								┌ Yes	☐ No
Par	Escrow and Custodial Arrang Part IV, line 9, or reported an ar						eu r	es to form s	990,	
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?						sets		┌ Yes	┌ No
b	If "Yes," explain the arrangement in Part XI	II and complete the	follow	/ıng t	able	ı				
								An	nount	
С	Beginning balance						1c			
d	Additions during the year						1d			
e	Distributions during the year						1e			
f	Ending balance						1f		_	
2a	Did the organization include an amount on Fe	orm 990, Part X, line	e 21?						│ Yes	Г No
ь	If "Yes," explain the arrangement in Part XII									Г
Pa	rt V Endowment Funds. Complete									
1.	Beginning of year balance	(a)Current year 13,796,095	(b)P	rior y	ear b 319,721	(c)Two years bac 12,088,52	_	Three years back 11,050,394	(e)Four	years back 12,703,271
1a h	Contributions	13,7 30,033		15,.	0		0	11,030,334		0
b c	Net investment earnings, gains, and losses	0					+	-		
		535,097			519,867	1,274,72	-	1,078,009		-1,620,636
d	Grants or scholarships	0			0		0	0		0
е	Other expenditures for facilities and programs	О			О		0	О		0
f	Administrative expenses	43,351			43,493	43,53	34	39,875		32,241
g	End of year balance	14,287,841		13,	796,095	13,319,72	1	12,088,528		11,050,394
2	Provide the estimated percentage of the cur	rent year end baland	ce (line	e 1 a	column	(a)) held as	_			
а	Board designated or quasi-endowment	65 000 %				(//				
Ь	Permanent endowment ► 35 000 %									
c) %								
	The percentages in lines 2a, 2b, and 2c sho									
За	Are there endowment funds not in the posse		atıon t	:hat a	re held a	ınd admınıstere	ed for	the		
	organization by	_							Yes	No
	(i) unrelated organizations			•				3a(No
	(ii) related organizations						•	3a(_	No
ь 4	Describe in Part XIII the intended uses of the	•						31	<u> </u>	
	t VI Land, Buildings, and Equipme									
	Description of property		<u> </u>	(a)	Cost or ot s (investme	her (b)Cost or		(c) Accumulated depreciation	(d) E	Book value
1a	Land									
b	Buildings		•			5,59	8,040	3,095,47	72	2,502,568
c	Leasehold improvements									
	Equipment		_			2.7	9,968	81,02	25	148,943
d			-				-,	01,01		
e	Other							01/01		

Part VIII Investments—Other Securities. See	Form 990, Part X, line 12.	
(a) Description of security or category	(b)Book value	(c) Method of valuation
(including name of security)		Cost or end-of-year market value
(1)Financial derivatives		
(2)Closely-held equity interests		
(3)Other	20,002,700	-
(A) INVESTMENT PORTFOLIO (TRIP)	28,902,789	F
	+	
		
	28,902,789	
Part VIII Investments—Program Related. Se		
(a) Description of investment type	(b) Book value	(c) Method of valuation
	+	Cost or end-of-year market value
	+	
	+	
Total. (Column (b) must equal Form 990, Part X, col (B) line 13)	F	
Part IX Other Assets. See Form 990, Part X, I		
(a) Descr	iption	(b) Book value
Total. (Column (b) must equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part	X, line 25.	
Part X Other Liabilities. See Form 990, Part		
Part X Other Liabilities. See Form 990, Part (a) Description of liability	X, line 25.	
Part X Other Liabilities. See Form 990, Part (a) Description of liability Federal income taxes	X, line 25. (b) Book value 0	
Part X Other Liabilities. See Form 990, Part (a) Description of liability Federal income taxes DUE TO UNIVERSITY OF CHICAGO	X, line 25. (b) Book value 0 123,005	
Part X Other Liabilities. See Form 990, Part (a) Description of liability Federal income taxes DUE TO UNIVERSITY OF CHICAGO	X, line 25. (b) Book value 0	
Part X Other Liabilities. See Form 990, Part (a) Description of liability Federal income taxes DUE TO UNIVERSITY OF CHICAGO	X, line 25. (b) Book value 0 123,005	
Part X Other Liabilities. See Form 990, Part (a) Description of liability Federal income taxes DUE TO UNIVERSITY OF CHICAGO	X, line 25. (b) Book value 0 123,005	
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Part X Other Liabilities. See Form 990, Part (a) Description of liability Federal income taxes DUE TO UNIVERSITY OF CHICAGO	X, line 25. (b) Book value 0 123,005	.
Part X Other Liabilities. See Form 990, Part (a) Description of liability Federal income taxes DUE TO UNIVERSITY OF CHICAGO	X, line 25. (b) Book value 0 123,005	, , , , , ,
Part X Other Liabilities. See Form 990, Part (a) Description of liability Federal income taxes DUE TO UNIVERSITY OF CHICAGO	X, line 25. (b) Book value 0 123,005	
Part X Other Liabilities. See Form 990, Part (a) Description of liability Federal income taxes DUE TO UNIVERSITY OF CHICAGO	X, line 25. (b) Book value 0 123,005	
	X, line 25. (b) Book value 0 123,005	
Part X Other Liabilities. See Form 990, Part (a) Description of liability Federal income taxes DUE TO UNIVERSITY OF CHICAGO	X, line 25. (b) Book value 0 123,005	. •
Part X Other Liabilities. See Form 990, Part (a) Description of liability Federal income taxes DUE TO UNIVERSITY OF CHICAGO	X, line 25. (b) Book value 0 123,005	
Part X Other Liabilities. See Form 990, Part (a) Description of liability Federal income taxes DUE TO UNIVERSITY OF CHICAGO	X, line 25. (b) Book value 0 123,005	
Part X Other Liabilities. See Form 990, Part (a) Description of liability Federal income taxes DUE TO UNIVERSITY OF CHICAGO	X, line 25. (b) Book value 0 123,005	
Part X Other Liabilities. See Form 990, Part (a) Description of liability Federal income taxes DUE TO UNIVERSITY OF CHICAGO	X, line 25. (b) Book value 0 123,005 452,130	

10,734,296

	1.0 D (1.01.11.000) 1011		i age i
Par	Reconciliation of Revenue per Audited Financial Statements With Revenue	oer R	eturn
1	Total revenue, gains, and other support per audited financial statements	1	10,953,548
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains on investments		
b	Donated services and use of facilities		
c	Recoveries of prior year grants		
d	Other (Describe in Part XIII)		
e	Add lines 2a through 2d	2e	180,766
3	Subtract line 2e from line 1	3	10,772,782
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a 146,395		
b	Other (Describe in Part XIII)	1	
c	Add lines 4a and 4b	4c	-230,453
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5	10,542,329
Part	XII Reconciliation of Expenses per Audited Financial Statements With Expenses	s per	Return
1	Total expenses and losses per audited financial statements	1	10,964,749
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities		
b	Prior year adjustments		
C	Other losses		
d	Other (Describe in Part XIII)		
e	Add lines 2a through 2d	2e	376,848
3	Subtract line 2e from line 1	3	10,587,901
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a 146,395		
b	Other (Describe in Part XIII)		
c	Add lines 4a and 4b	4c	146,395

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

Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18) . . .

Identifier	Return Reference	Explanation
PART V, LINE 4 PART X, line 2, fin 48	Recall Reference	THE ORGANIZATION PLANS TO USE THE ENDOWMENT TO FINANCE RESEARCH OPERATIONS AND TO PURSUE STRATEGIC OPPORTUNITIES AT CHAPIN HALL CHAPIN HALL'S INVESTMENTS, WHICH INCLUDE THE PERMANENTLY RESTRICTED ENDOWMENT, THE BOARD RESEARCH ENDOWMENT AND OTHER BOARD DESIGNATED FUNDS (QUASI-ENDOWMENT), ARE INTENDED TO PROVIDE INCOME AND APPRECIATION OVER TIME, AT A RATE THAT EXCEEDS THE ANNUAL 5% PAY-OUT FROM FUNDS AND MANAGEMENT FEES OVER TIME IT IS EXPECTED THAT THE FUNDS WILL GROW TO MATCH BOTH INFLATIONARY NEEDS AND STRATEGIC OPPORTUNITIES CHAPIN HALL FOLLOWS ASC 740-10-25, "ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES," UNDER ASC 740-10-25, AN ORGANIZATION MUST RECOGNIZE THE TAX BENEFIT ASSOCIATED WITH TAX POSITIONS TAKEN FOR TAX RETURN PURPOSES WHEN IT IS MORE-LIKELY-THANNOT THAT THE POSITION WILL BE SUSTAINED CHAPIN HALL DOES NOT BELIEVE THAT THERE ARE ANY UNRECOGNIZED TAX BENEFITS THAT SHOULD BE RECORDED NO INTEREST OR PENALTIES ARE RECORDED OR INCLUDED IN THE STATEMENT OF ACTIVITIES FOR
		THE YEARS ENDED JUNE 30, 2013 AND 2012 TAX YEARS GOING BACK TO 2009 REMAIN OPEN TO EXAMINATION BY TAXING AUTHORITIES
PART XI, LINE 2d		CHANGE IN FAIR VALUE OF INTEREST RATE SWAP \$181,351
part xı, line 4b		rental expenses -\$376,848
part xII, line 2d		rental expenses \$376,848

DLN: 93493128012324

OMB No 1545-0047

Schedule J (Form 990)

Department of the Treasury Internal Revenue Service

2

7

ın Part III

section 53 4958-6(c)?

For certain Officers, Directors, Trustees, Key Employees, and Highest **Compensated Employees** ► Complete if the organization answered "Yes" to Form 990,

Compensation Information

Part IV, question 23.

► Attach to Form 990. ► See separate instructions.

Open to Public Inspection

Name of the organization	Employer identification number
CHAPIN HALL CENTER FOR CHILDREN	
	26 2167012

36-2167012 **Questions Regarding Compensation** Yes No Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items First-class or charter travel Housing allowance or residence for personal use Travel for companions Payments for business use of personal residence Tax idemnification and gross-up payments Health or social club dues or initiation fees Discretionary spending account Personal services (e.g., maid, chauffeur, chef) 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 1b 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? 2 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 Compensation committee Written employment contract Independent compensation consultant Compensation survey or study Form 990 of other organizations Approval by the board or compensation committee 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 Receive a severance payment or change-of-control payment? 4a Νo 4b Νo Participate in, or receive payment from, a supplemental nonqualified retirement plan? Participate in, or receive payment from, an equity-based compensation arrangement? 4c Νo 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. 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 The organization? 5a Νo 5b Any related organization? Νo If "Yes." to line 5a or 5b, describe in Part III 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 The organization? Νo 6b Any related organization? Νo If "Yes," to line 6a or 6b, describe in Part III 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 Νo Were any amounts reported in Form 990, Part VII, paid or accured pursuant to a contract that was

subject to the initial contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe

If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations

8

Νo

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)(1)-(111) 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	(D) Nontaxable	(E) Total of	(F) Compensation	
	(i) Base compensation	(ii) Bonus & ıncentıve compensatıon	(iii) Other reportable compensation	other deferred compensation	benefits	columns (B)(ı)-(D)	reported as deferred in prior Form 990	
See Additional Data Table								

Schedule J (Form 990) 2012

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

Identifier Return Reference Explanation

Schedule J (Form 990) 2012

Software ID: **Software Version:**

EIN: 36-2167012

Name: CHAPIN HALL CENTER FOR CHILDREN

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

Form 990, Schedule J, Part II - Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees										
(A) Name		(B) Breakdown of	f W-2 and/or 1099-MIS	SC compensation	(C) Deferred	(D) Nontaxable	(E) Total of columns	(F) Compensation reported in prior Form		
		(i) Base Compensation	(ii) Bonus & incentive compensation	(iii) O ther compensation	compensation	benefits	(B)(ı)-(D)	990 or Form 990-EZ		
Susan Levine	(I) (II)		0 9,832	0	0 16,466	0 36,364	0 254,332	0		
Colm O 'Muircheartaigh	(I) (II)		0 778	0 8 8,874	0 20,000	0 50,802	0 2 323,864	0		
A da Skyles	(ı) (ıı)		0	0	13,182 0	1,103 0	178,139 0	0		
Robert George	(ı) (ıı)		0	0	17,909 0	24,498 0	257,337 0	0		
Deborah Daro Tuggle	(ı) (ıı)		0	0	14,428 0	23,742	208,313	0		
Friedhelm Wulczyn	(I) (II)		0	0	17,279 0	11,721 0	239,245	0		
Neil Guterman	(I) (II)		0 30,520	0 2,834	0 20,000	0 70,286	0 424,501	0		
David B Fithian	(ı) (ıı)		0 20,983	0 16,348	0 20,000	0 7,241	0 . 369,546	0		
John Hansen	(ı) (ıı)		0 1,800	0 3,624	0 20,000	0 57,623	0 8 442,501	0		
Matt Stagner	(ı) (ıı)		0	0	20,000	26,729 0	299,127	0 0		
Cheryl Smithgall	(I) (II)		0	0	10,010	24,391	. 151,970			

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -Schedule K

(Form 990)

Department of the Treasury

illinois educational facilities

Internal Revenue Service Name of the organization DLN: 93493128012324

2012

OMB No 1545-0047

Supplemental Information on Tax Exempt Bonds

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information in Part VI. ► See separate instructions.

► Attach to Form 990.

Open to Public **Inspection**

Employer identification number

CHAPIN HALL CENTER FOR CHILDREN 36-2167012 **Bond Issues** (h) On (i) Pool (g) Defeased behalf of (e) Issue price financing (a) Issuer name (b) Issuer EIN (c) CUSIP # (d) Date issued (f) Description of purpose ıssuer Yes No Yes No Yes No

A	authority	52-1297563	4520014v9	05-15-2003	5,250,000	refund 1994 bonds, interes	: an	an X		Х		X
P	art III Proceeds						•		•			
			Α	В		С			D			
1	A mount of bonds retired			0								
2	A mount of bonds legally defea	ised				0						
3	Total proceeds of issue				5,235,							
4	Gross proceeds in reserve fun	ıds										
5	Capitalized interest from proceeds					0						
6	Proceeds in refunding escrows	5,100,512										
7	7 Issuance costs from proceeds				105	nnn						

4	Gross proceeds in reserve funds		0						
5	Capitalized interest from proceeds		0						
6	Proceeds in refunding escrows		5,100,512						
7	Issuance costs from proceeds		105,000						
8	Credit enhancement from proceeds		0						
9	Working capital expenditures from proceeds		30,225						
10	Capital expenditures from proceeds		0						
11	O ther spent proceeds		0						
12	O ther unspent proceeds	0							
13	Year of substantial completion	19	85						
		Yes	No	Yes	No	Yes	No	Yes	No
4.4	Were the honde issued as part of a current refunding issue?	l 🗸						1	

		Yes	No	Yes	No	Yes	No	Yes	No
14	Were the bonds issued as part of a current refunding issue?	Х							
15	Were the bonds issued as part of an advance refunding issue?		Х						
16	Has the final allocation of proceeds been made?	Х							
17	Does the organization maintain adequate books and records to support the final allocation of proceeds?	Х							
Par	Part IIII Private Business Use								•

Par	Part IIII Private Business Use											
			A		В	,	С	D				
		Yes	No	Yes	No	Yes	No	Yes	No			
1	Was the organization a partner in a partnership, or a member of an LLC, which owned property financed by tax-exempt bonds?		×									
2	Are there any lease arrangements that may result in private business use of bond-financed property?		Х									
For F	Paperwork Reduction Act Notice, see the Instructions for Form 990.	C	at No 501	93E		Schedule K (Form 990) 2012						

Sche	dule K (Form 990) 2012									Page 2
Par	Private Business Use (Continued)		_							
				Α		В		<u>C</u>		D
3a	Are there any management or service contracts that may result in private	husiness use	Yes	No	Yes	No	Yes	No	Yes	No
J a	of bond-financed property?			X						
b	If "Yes" to line 3a, does the organization routinely engage bond counsel or counsel to review any management or service contracts relating to the fina property?									
С	Are there any research agreements that may result in private business us financed property?	e of bond-		х						
d	If "Yes" to line 3c, does the organization routinely engage bond counsel or counsel to review any research agreements relating to the financed proper									
4	Enter the percentage of financed property used in a private business use be other than a section $501(c)(3)$ organization or a state or local government			0%		%		%		%
5	Enter the percentage of financed property used in a private business use a unrelated trade or business activity carried on by your organization, another (c)(3) organization, or a state or local government			%		%		%		%
6	Total of lines 4 and 5			%		%		%		%
7	Does the bond issue meet the private security or payment test?			Х						
8a	Has there been a sale or disposition of any of the bond financed property to nongovernmental person other than a 501(c)(3) organization since the bor issued?			х						
b	If "Yes" to line 8a, enter the percentage of bond-financed property sold or	disposed of		%		%		%		%
С	If "Yes" to line 8a, was any remedial action taken pursuant to Regulations 1 141-12 and 1 145-2?	sections		х						
9	Has the organization established written procedures to ensure that all none bonds of the issue are remediated in accordance with the requirements und		x							
D	Regulations sections 1 141-12 and 1 145-2?									
Par	t IV Arbitrage	Α			В		С			
		Yes	No	Yes	No.			No	Yes	No
1	Has the issuer filed Form 8038-T?	X								
2	If "No" to line 1, did the following apply?			<u> </u>			<u> </u>	I		
а	Rebate not due yet?									
b	Exception to rebate?									
С	No rebate due?									
	If you checked "No rebate due" in line 2c, provide in Part VI the date the rebate computation was performed			•	1	•	•	•		
3	Is the bond issue a variable rate issue?	Х								
4a	Has the organization or the governmental issuer entered into a qualified hedge with respect to the bond issue?		Х							
b	Name of provider	0								
С	Term of hedge									
d	Was the hedge superintegrated?									
e	Was a hedge terminated?									
		•		•						

Part IV Arbitrage (Continued)

Identifier

Return Reference

		A		В		0		ן ט	
		Yes	No	Yes	No	Yes	No	Yes	No
5a	Were gross proceeds invested in a guaranteed investment contract (GIC)?		Х						
b	Name of provider	0							
С	Term of GIC								
d	Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?								
6	Were any gross proceeds invested beyond an available temporary period?		х						
7	Has the organization established written procedures to monitor the requirements of section 148?	х							
Pa	rt V Procedures To Undertake Corrective Action								
		A		В		С		D	
		Yes	No	Yes	No	Yes	No	Yes	No
1	Has the organization established written procedures to ensure that violations of federal tax requirements are timely identified and corrected through the voluntary closing agreement program if self-remediation is not available under applicable regulations?	Х							
P	art VI Supplemental Information. Complete this part to p	rovide additior	ial informati	on for respor	ses to quest	tions on Sche	edule K (see	instructions)).

Schedule K (Form 990) 2012

Explanation

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SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

As Filed Data -

DLN: 93493128012324

OMB No 1545-0047

Open to Public Inspection

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.

Identifier	Return Reference	Explanation
Part III,		THE AIM OF CHAPIN HALL'S MULTIDISCIPLINARY RESEARCH IS TO LEARN MORE ABOUT THE STATE OF OUR
Line 1		YOUNG PEOPLE AND THEIR FAMILIES AND THE DEGREE TO WHICH THE POLICIES AND PROGRAMS DESIGNED TO
		SUPPORT THEM ARE SUCCEEDING WHILE OUR RESEARCH CONCERNS THE WELL-BEING OF ALL CHILDREN AND
		YOUTH, WE PARTICULARLY FOCUS ON WHAT IS HAPPENING TO THE MOST VULNERABLE SO THAT
		POLICY MAKERS AND PRACTITIONERS CAN CREATE INSTITUTIONS AND PROGRAMS THAT WILL HELP THEM
		DEVELOP INTO HEALTHY, EDUCATED, PRODUCTIVE ADULTS THE CONCEPT OF CHAPIN HALL HAS BEEN
		REPLICATED IN ANY OTHER LOCATIONS WITHIN AND OUTSIDE OF THE UNITED STATES, OFTEN WITH THE HELP OF
		CHAPIN HALL RESEARCH FELLOWS CHAPIN HALL SERVES AS A FULCRUM FOR INTERCHANGE AMONG THE
		COMMUNITIES OF PUBLIC POLICY AND CHILD-FAMILY RESEARCH, BOTH NATIONALLY AND INTERNATIONALLY

Identifier	Return Reference	Explanation
Part III, Line 4A		THE AIM OF CHAPIN HALL'S MULTIDISCIPLINARY RESEARCH IS TO LEARN MORE ABOUT THE STATE OF OUR YOUNG PEOPLE AND THEIR FAMILIES AND THE DEGREE TO WHICH THE POLICIES AND PROGRAMS DESIGNED TO SUPPORT THEM ARE SUCCEEDING WHILE OUR RESEARCH CONCERNS THE WELL-BEING OF ALL CHILDREN AND YOUTH, WE PARTICULARLY FOCUS ON WHAT IS HAPPENING TO THE MOST VULNERABLE SO THAT POLICY MAKERS AND PRACTITIONERS CAN CREATE INSTITUTIONS AND PROGRAMS THAT WILL HELP THEM DEVELOP INTO HEALTHY, EDUCATED, PRODUCTIVE ADULTS THE CONCEPT OF CHAPIN HALL HAS BEEN REPLICATED IN MANY OTHER LOCATIONS WITHIN AND OUTSIDE THE UNITED STATES, OFTEN WITH THE HELP OF CHAPIN HALL RESEARCH FELLOWS CHAPIN HALL SERVES AS A FULCRUM FOR INTERCHANGE AMONG THE COMMUNITIES OF PUBLIC POLICY AND CHILD-FAMILY RESEARCH, BOTH NATIONALLY AND INTERNATIONALLY

ldentifier	Return Reference	Explanation
PART VI, SECTION A, LINE 3		Chapin Hall center for children entered into an agreement under which the University of Chicago would provide administrative support chapin hall has no official employees all who are compensated at chapin hall are employees of the university the university of chicago is responsible for issuing 1099's and W-2's the six directors namely susan levine, colmo'muircheartaigh, david fithian, gina samuels, neil guterman and john hansen at chapin hall are also university employees PART VI, SECTION A, LINE 4 in October 2012, the University of Chicago and Chapin Hall signed a new affiliation agreement to make adjustments to Chapin Hall's governance, the status of its employees, and other administrative and operational relationships with the University to create a new affiliation between the two institutes that, over the long term, will encourage continued robust academic collaboration and intellectual exchange, and enhance the linkage between the University and Chapin Hall, while providing for greater operational separation. While most changes were to take place on July 1, 2013, changes to the Board of Directors took place in October 2012. This included the appointment of a new 11 member Board of Directors, with a majority (six) appointed by the University of Chicago.

ldentifier	Return Reference	Explanation
PART VI, SECTION a, LINE 11		The organization's Form 990 undergoes a number of internal and external reviews before it is filed with the IRS. The return is prepared by the organization's public accounting firm, BDO USA, Ilp and is reviewed by the organization's Director of Finance and Budget. A final draft of the Form 990 is provided to each member of the organization's Board of Directors for review and comment before it is filed with the IRS.

ldentifier	Return Reference	Explanation
PART VI, SECTION B, LINE 12c		ANNUALLY, THE OFFICERS AND DIRECTORS OF THE CORPORATION MUST COMPLETE A CONFLICT OF INTEREST STATEMENT THAT IS REVIEWED AND MONITORED BY THE ASSOCIATE DIRECTOR ADDITIONALLY, EACH OFFICER AND DIRECTOR ACKNOWLEDGES THAT SHOULD A POSSIBLE CONFLICT ARISE, IT IS HIS OR HER OBLIGATION TO CALL IT TO THE ATTENTION OF THE CHAIR OF THE BOARD OF DIRECTORS OR THE EXECUTIVE DIRECTOR OF CHAPIN HALL, AS APPROPRIATE, AND TO ABSTAIN FROM ANY PARTICIPATION IN THE MATTER ANNUALLY, THE PRINCIPAL INVESTIGATORS ARE REQUIRED TO COMPLETE THE UNIVERSITY OF CHICAGO CONFLICT OF INTEREST ASSURANCE AND, WHEN APPROPRIATE, DISCLOSURE OF THE INFORMATION REGARDING OUTSIDE PROFESSIONAL AND COMMERCIAL INTERESTS/CONFLICT OF INTEREST STATEMENT THIS IS MONITORED BY THE UNIVERSITY OF CHICAGO UNIVERSITY RESEARCH ADMINISTRATION Chapin Hall principal investigators sign conflict of interest forms with the University of Chicago annually Chapin Hall board members signed conflict of interest forms in May of 2012 which would obligate them to report any potential conflicts in the year going forward to the Chair of the Board of the Executive Director and to abstain from participation in the matter. In October of 2012, a new 11 member Board of Directors was formed Eight of the members carried over from the previous board and had signed Chapin Hall conflict of interest forms the previous May. The three new board members were from the University community may have signed conflict of interest forms with the University of Chicago but not specifically as Chapin Hall board members. No Chapin Hall conflict of interest forms were signed by board members in May of 2013 but board members will be required to sign new conflict of interest forms at the March 2014 board meeting and then return to an annual cycle

ldentifier	Return Reference	Explanation
PART VI, SECTION b, LINE 15		ON AN ANNUAL BASIS THE COMPENSATION COMMITTEE OF THE CHAPIN HALL BOARD OF DIRECTORS MEETS TO REVIEW THE CURRENT COMPENSATION OF THE EXECUTIVE DIRECTOR, SENIOR ADMINISTRATIVE STAFF AND SENIOR RESEARCH STAFF, AND TO MAKE RECOMMENDATIONS FOR ANNUAL SALARY INCREASES DATA THAT IS CONSIDERED IN SALARY DECISIONS INCLUDES INTERNAL COMPARABILITY DATA, EXTERNAL MARKET DATA, AND ECONOMIC INDICATORS SUCH AS THE FISCAL HEALTH OF THE ORGANIZATION AND THE CONSUMER PRICE INDEX RECOMMENDATIONS FOR SALARY INCREASES ARE THEN FORWARDED TO THE EXECUTIVE COMMITTEE OF THE BOARD OF DIRECTORS FOR REVIEW AND APPROVAL

ldentifier	Return Reference	Explanation
part vı, section c, line 19		THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND FINANCIAL STATEMENTS AVAILABLE to the public UPON REQUEST

ldentifier	Return Reference	Explanation
PART XI, LINE 9		OTHER CHANGES IN NET ASSETS OR FUND BALANCES CHANGE IN FAIR VALUE OF INTEREST RATE SWAP \$181,351

DLN: 93493128012324

OMB No 1545-0047

Open to Public Inspection

SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37. ► Attach to Form 990. ► See separate instructions.

Department of the Treasury Internal Revenue Service

Name of the organization **Employer identification number** CHAPIN HALL CENTER FOR CHILDREN 36-2167012

Part I Identification of Disregarded Entities (Complete if the organization answered "Yes" to Form 990, Part IV, line 33.)

(a) Name, address, and EIN (ıf applıcable) of dısregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
(1) UChicago Argonne LLC 5801 S Ellis Avenue Chicago, IL 60637 68-0628477	Manage Lab	IL			Univ of Chic
(2) Univ of Chicago Foundation LTD 5T FL Alder Caster 10 Noble London UK 98-0525557	Fundraising	UK			Univ of Chic
(3) Theory and Computing Sciences 5801 S Ellis Avenue Chicago, IL 60637 51-6596577	Rsch Building	IL			Univ of Chic
(4) UChicago Trading 5801 S Ellis Avenue Chicago, IL 60637 30-0517735	Investing	IL			Univ of Chic
(5) Maroon Investments LLC 5801 S Ellis Avenue Chicago, IL 60637	Holding Co	IL			Univ of Chic
(6) UChicago Impact LLC 1307 E 60th Street Chicago, IL 60637 61-1682394	Education	IL			Univ of Chic

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	Section (13) co	g) n 512(b) ontrolled tity?
						Yes	No
See Additional Data Table							

Part III Identification of Related Or because it had one or more re	r ganizations Taxable lated organizations trea [:]	as a Partn e ted as a part	ership tnership	(Com durın	plete ig the	if the ore tax yea	ganı r.)	zation ar	swered "Y	es" to	Form	า 990,	Part :	LV, lı	ne 34	4	
(a) Name, address, and EIN o related organization	Name, address, and EIN of		(c) Legal domicile (state or foreign country)	enti	ct olling	(e) Predominant income(related, unrelated, excluded from tax under sections 512-		(f) Share of total income	(g) Share of end-of-yea assets	(h) Disproprtionate r allocations?		(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)		managing partner?			
						514)				Yes	No			Yes	No		
Part IV Identification of Related Or line 34 because it had one or r										swere	d "Ye	s" to F	orm	990,	Part	IV,	
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Lega domic (state or f countr	il ile oreign			(d) controlling entity	(C co	(e) e of entity orp, S corp, r trust)	(f) Share of tota income	((g) re of en of-year assets		(h) Percent owners	age		(i) ection 5: (b)(13) controlled entity?	d d
(1) UChic (Beijing) Consulting Co LTD China	Consulting	СН			univ o	f chic											No No
Unit 1-10 Culture PI of Remmin Uni Beijing CH																	
(2) UChicago Center in India Private Limited	Consulting	IN			univ o	f chic										1	No
2/11B Jangpura A New Dehli IN																	

	Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule					Yes	No
1 D	During the tax year, did the orgranization engage in any of the following transactions with one or more related orga	ganızatıons lıs	ted in Parts II-IV?				
a	Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity				1a	Yes	
b	Gift, grant, or capital contribution to related organization(s)				1b		
c	Gift, grant, or capital contribution from related organization(s)				1c		
d	Loans or loan guarantees to or for related organization(s)				1d		
е	Loans or loan guarantees by related organization(s)				1e		
f	Dividends from related organization(s)				1f		
g	Sale of assets to related organization(s)				1 g		
h	Purchase of assets from related organization(s)				1h		
i	Exchange of assets with related organization(s)				1 i		
j	Lease of facilities, equipment, or other assets to related organization(s)				1j	Yes	
k	Lease of facilities, equipment, or other assets from related organization(s)				1k	Yes	
I	Performance of services or membership or fundraising solicitations for related organization(s)				11		
m	n Performance of services or membership or fundraising solicitations by related organization(s)				1m		
n	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)				1n		
0	Sharing of paid employees with related organization(s)				10	Yes	
р	Reimbursement paid to related organization(s) for expenses				1p	Yes	
q	Reimbursement paid by related organization(s) for expenses				1q	Yes	
r	O ther transfer of cash or property to related organization(s)				1r		
s	Other transfer of cash or property from related organization(s)				1s	Yes	
2	If the answer to any of the above is "Yes," see the instructions for information on who must complete this line,	, , ,	· ·				
	Name of other organization Tran	(b) Insaction De (a-s)	(c) Amount involved	(d) Method of determining amo	unt ir	nvolved	

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

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													
(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under section 512- 514)	org	(e) all partners section 501(c)(3) anizations?	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproprtiona allocations?		(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
			514)	Yes	No			Yes	No		Yes	No	
												1	

Software ID: Software Version:

Return Reference

EIN: 36-2167012

Name: CHAPIN HALL CENTER FOR CHILDREN

Explanation

Schedule R (Form 990) 2012

Identifier

Page **5**

Part VII Supplemental Information

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

Form 990, Schedule R, Part I - Identification of Disregarded Entities										
(a) Name, address, and EIN 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					
UChicago Argonne LLC 5801 S Ellis Avenue Chicago, IL 60637 68-0628477	Manage Lab	IL			Univ of Chic					
Univ of Chicago Foundation LTD 5T FL Alder Caster 10 Noble London UK 98-0525557	Fundraising	UK			Univ of Chic					
Theory and Computing Sciences 5801 S Ellis Avenue Chicago, IL 60637 51-6596577	Rsch Building	IL			Univ of Chic					
UChicago Trading 5801 S Ellis Avenue Chicago, IL 60637 30-0517735	Investing	IL			Univ of Chic					
Maroon Investments LLC 5801 S Ellis Avenue Chicago, IL 60637	Holding Co	IL			Univ of Chic					
UChicago Impact LLC 1307 E 60th Street Chicago, IL 60637 61-1682394	Education	IL			Univ of Chic					