

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

Form 990

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

2022

Department of the Treasury Internal Revenue Service

Do not enter social security numbers on this form as it may be made public. Go to www.irs.gov/Form990 for instructions and the latest information.

Open to Public Inspection

A For the 2022 calendar year, or tax year beginning JUL 1, 2022 and ending JUN 30, 2023

Form header section containing organization name (THE CHILDREN'S AID SOCIETY), address (117 W 124TH STREET, NEW YORK, NY 10027), principal officer (PHOEBE BOYER), and identification numbers.

Part I Summary

Summary table with columns for Revenue, Expenses, and Net Assets or Fund Balances. Rows include mission statement, governance metrics, revenue breakdown, expense breakdown, and net assets.

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.

Signature block section with fields for officer signature (Michael Greenberg), preparer signature (Scott Thompson), and firm information (Grant Thornton LLP).

May the IRS discuss this return with the preparer shown above? See instructions [X] Yes [] No

Application for Automatic Extension of Time To File an Exempt Organization Return

Department of the Treasury
Internal Revenue Service

▶ **File a separate application for each return.**
▶ **Go to www.irs.gov/Form8868 for the latest information.**

Electronic filing (e-file). You can electronically file Form 8868 to request a 6-month automatic extension of time to file any of the forms listed below with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, for which an extension request must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits.

Automatic 6-Month Extension of Time. Only submit original (no copies needed).

All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

Type or print	Name of exempt organization or other filer, see instructions. THE CHILDREN'S AID SOCIETY	Taxpayer identification number (TIN) 13-5562191
File by the due date for filing your return. See instructions.	Number, street, and room or suite no. If a P.O. box, see instructions. 117 W 124TH STREET	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. NEW YORK, NY 10027	

Enter the Return Code for the return that this application is for (file a separate application for each return) 0 1

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

MICHAEL GREENBERG

- The books are in the care of ▶ 117 W 124TH STREET - NEW YORK, NY 10027

Telephone No. ▶ 212-949-4800

Fax No. ▶ _____

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

1 I request an automatic 6-month extension of time until MAY 15, 2024 , to file the exempt organization return for the organization named above. The extension is for the organization's return for:

- ▶ calendar year _____ or
- ▶ tax year beginning JUL 1, 2022 , and ending JUN 30, 2023 .

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

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

Caution: If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-TE and Form 8879-TE for payment instructions.

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response or note to any line in this Part III [X]

1 Briefly describe the organization's mission: CHILDREN'S AID HELPS 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. (CONTINUED ON SCHEDULE O)

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 [X] 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 [X] 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 \$ 60,917,000. including grants of \$ 1,494,760.) (Revenue \$ 61,916,438.) THE CHILD WELFARE AND FAMILY SERVICES ("CWFS") DIVISION PROMOTES CHILD AND FAMILY STABILITY THROUGH A RANGE OF PROGRAMS. WE FIND HIGH-QUALITY, LOVING HOMES FOR CHILDREN PLACED IN FOSTER CARE AND SUPPORT PARENTS SEEKING TO REUNIFY WITH THEIR CHILDREN. HOME-BASED SERVICES ARE PROVIDED FOR CHILDREN AT RISK OF FOSTER CARE PLACEMENT. OUR FAMILY WELLNESS PROGRAM OFFERS COMPREHENSIVE SERVICES TO FAMILIES IMPACTED BY DOMESTIC VIOLENCE. (CONTINUED ON SCHEDULE O)

4b (Code:) (Expenses \$ 39,249,000. including grants of \$ 2,395,733.) (Revenue \$ 26,629,961.) THE YOUTH DIVISION FOCUSES ON AGES 5 TO ADOLESCENCE/YOUNG ADULT AND PROMOTES PHYSICAL, SOCIAL, AND EMOTIONAL WELL-BEING AS KEY FACTORS FOR HIGH SCHOOL GRADUATION AND COLLEGE SUCCESS. YOUTH 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. (CONTINUED ON SCHEDULE O)

4c (Code:) (Expenses \$ 21,140,000. including grants of \$ 207,384.) (Revenue \$ 20,631,041.) THE HEALTH AND WELLNESS DIVISION PROVIDES HIGH-QUALITY SERVICES THAT REDUCE HEALTH DISPARITIES AMONG CHILDREN AND FAMILIES LIVING IN POVERTY, INCLUDING 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 PROVIDE CARE COORDINATION AND EDUCATE CHILDREN AND FAMILIES ABOUT THE BENEFITS OF HEALTHY LIVING THROUGH DIET, NUTRITION, AND EXERCISE. (CONTINUED ON SCHEDULE O)

4d Other program services (Describe on Schedule O.) (Expenses \$ 17,098,000. including grants of \$ 208,222.) (Revenue \$ 14,365,559.)

4e Total program service expenses 138,404,000.

Part IV Checklist of Required Schedules

Table with 3 columns: Question ID, Yes, No. Rows include questions 1 through 21 regarding organizational requirements and reporting.

Part IV Checklist of Required Schedules (continued)

Table with 3 columns: Question ID, Question Text, Yes, No. Rows 22-38 covering various organizational requirements.

Part V Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response or note to any line in this Part V

Table with 3 columns: Question ID, Question Text, Yes, No. Rows 1a-1c regarding Form 1096, Forms W-2G, and backup withholding rules.

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

Table with columns for question number, question text, and Yes/No response boxes. Includes questions 2a through 17 regarding employee reporting, tax shelter transactions, and various organizational activities.

Part VI Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions.

Check if Schedule O contains a response or note to any line in this Part VI [X]

Section A. Governing Body and Management

Table with 3 columns: Question, Yes, No. Rows include: 1a Enter the number of voting members... 26; 1b Enter the number of voting members included on line 1a... 26; 2 Did any officer, director, trustee, or key employee have a family relationship...; 3 Did the organization delegate control over management duties...; 4 Did the organization make any significant changes to its governing documents...; 5 Did the organization become aware during the year of a significant diversion of the organization's assets...; 6 Did the organization have members or stockholders...; 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...; 7b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body...; 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body? b Each committee with authority to act on behalf of the governing body?; 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 on Schedule O.

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

Table with 3 columns: Question, Yes, No. Rows include: 10a Did the organization have local chapters, branches, or affiliates?; 10b 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?; 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?; 11b Describe on Schedule O the process, if any, used by the organization to review this Form 990.; 12a Did the organization have a written conflict of interest policy? If "No," go to line 13; 12b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?; 12c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done; 13 Did the organization have a written whistleblower policy?; 14 Did the organization have a written document retention and destruction policy?; 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? a The organization's CEO, Executive Director, or top management official; b Other officers or key employees of the organization; 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?; 16b 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?

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed AZ, CA, CT, FL, MD, MA, NJ, NY, OH, PA, VA
18 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. [X] Own website [] Another's website [X] Upon request [] Other (explain on Schedule O)
19 Describe on 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.
20 State the name, address, and telephone number of the person who possesses the organization's books and records
MICHAEL GREENBERG - 212-949-4800
117 W 124TH STREET, NEW YORK, NY 10027

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

Check if Schedule O contains a response or note to any line in this Part VII

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's **current** key employees, if any. See the 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, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.
 - List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
 - List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.
- See the instructions for the order in which to list the persons above.

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below 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/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) PHOEBE BOYER PRESIDENT/CEO	40.00 0.00			X				507,859.	0.	34,484.
(2) MICHAEL GREENBERG CHIEF FINANCIAL OFFICER	40.00 0.00			X				294,967.	0.	22,986.
(3) SANDRA ESCAMILLA EXECUTIVE VICE PRESIDENT	40.00 0.00				X			274,107.	0.	31,063.
(4) CAROLINE GALLAGHER CHIEF DEVELOPMENT OFFICER	40.00 0.00					X		269,755.	0.	35,346.
(5) GEORGIA BOOTHE EXECUTIVE VICE PRESIDENT	40.00 0.00				X			274,367.	0.	15,181.
(6) DANIEL SHACKNAI (THRU 10/2022) CHIEF OPERATING OFFICER	40.00 0.00			X				234,815.	0.	27,149.
(7) VICKI KRITSOVAS MEDICAL DIRECTOR	40.00 0.00					X		235,964.	0.	23,883.
(8) COURTENAYE JACKSON-CHASE GENERAL COUNSEL	40.00 0.00					X		238,537.	0.	18,258.
(9) ROBYN DIETZ DIRECTOR TALENT MANAGEMENT	40.00 0.00					X		221,887.	0.	34,026.
(10) ALI TAN (THRU 01/2023) CHIEF OF STAFF	40.00 0.00					X		214,251.	0.	33,704.
(11) JILL S. OLSON CHAIR	5.00 0.00	X		X				0.	0.	0.
(12) GREGORY E. KERR, MD VICE CHAIR	5.00 0.00	X		X				0.	0.	0.
(13) BETH LEVENTHAL VICE CHAIR	5.00 0.00	X		X				0.	0.	0.
(14) EREN ROSENFELD SECRETARY	5.00 0.00	X		X				0.	0.	0.
(15) ELLEN JEWETT TRUSTEE/TREASURER (AS OF 6/15/2023)	5.00 0.00	X		X				0.	0.	0.
(16) RUSSELL DIAMOND TREASURER (THRU 6/15/2023)/TRUSTEE	5.00 0.00	X		X				0.	0.	0.
(17) PETER WALLACE ASST. TREASURER	5.00 0.00	X		X				0.	0.	0.

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below 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/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(18) ALAN E. KATZ TRUSTEE	5.00 0.00	X						0.	0.	0.
(19) ANDREA WAHLQUIST BROWN TRUSTEE	5.00 0.00	X						0.	0.	0.
(20) ASHISH BHUTANI TRUSTEE	5.00 0.00	X						0.	0.	0.
(21) BRAD SILVER TRUSTEE	5.00 0.00	X						0.	0.	0.
(22) CARLENE BROOKS-ODEN TRUSTEE (THRU 9/2022)	5.00 0.00	X						0.	0.	0.
(23) CHRISTOPHER R. LAWRENCE TRUSTEE	5.00 0.00	X						0.	0.	0.
(24) JANINE E. LUKE TRUSTEE (THRU 6/15/2023)	5.00 0.00	X						0.	0.	0.
(25) JAY S. NYDICK TRUSTEE	5.00 0.00	X						0.	0.	0.
(26) JOSE TAVAREZ TRUSTEE (AS OF 12/2022)	5.00 0.00	X						0.	0.	0.
1b Subtotal								2,766,509.	0.	276,080.
c Total from continuation sheets to Part VII, Section A								0.	0.	0.
d Total (add lines 1b and 1c)								2,766,509.	0.	276,080.

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 116

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

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
COHEN & GRESSER LLP 800 THIRD AVE, NEW YORK, NY 10022	LEGAL SERVICES	1,482,471.
AGILITY, 7979 E. TUFTS AVENUE, SUITE 700, DENVER, CO 80237	INVESTMENT MANAGEMENT	1,229,859.
ARROW SECURITY 300 WEST MAIN STREET, SMITHTOWN, NY 11787	SECURITY SERVICES	702,189.
KERI TOURS, INC., 545 FIFTH AVENUE, SUITE 609, NEW YORK, NY 10017	TRANSPORTATION	474,859.
ENTERPRISE HOLDINGS, INC. P.O. BOX 840173, KANSA CITY, MO 64184	TRANSPORTATION	472,925.

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 38

SEE PART VII, SECTION A CONTINUATION SHEETS

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(27) KELLY TULLIER TRUSTEE (AS OF 6/15/2023)	5.00 0.00	X						0.	0.	0.
(28) LAUREN RAZOOK ROTH TRUSTEE	5.00 0.00	X						0.	0.	0.
(29) LINDA KAO TRUSTEE	5.00 0.00	X						0.	0.	0.
(30) MADELEINE SCHACHTER TRUSTEE	5.00 0.00	X						0.	0.	0.
(31) MARISOL TEPETITLA TRUSTEE	5.00 0.00	X						0.	0.	0.
(32) MICHAEL GOSS TRUSTEE	5.00 0.00	X						0.	0.	0.
(33) RAJA FLORES TRUSTEE	5.00 0.00	X						0.	0.	0.
(34) RICK MCNABB TRUSTEE	5.00 0.00	X						0.	0.	0.
(35) SEBASTIAN GUTH TRUSTEE	5.00 0.00	X						0.	0.	0.
(36) SUZANNE WALTMAN TRUSTEE	5.00 0.00	X						0.	0.	0.
(37) TOM REYNOLDS TRUSTEE	5.00 0.00	X						0.	0.	0.
(38) YASMEEN MOCK TRUSTEE	5.00 0.00	X						0.	0.	0.
(39) MARTIN BAICKER (AS OF 05/2023) CHIEF OPERATING OFFICER	40.00 0.00			X				0.	0.	0.
Total to Part VII, Section A, line 1c										

232201
04-01-22

Part VIII Statement of Revenue

Check if Schedule O contains a response or note to any line in this Part VIII

			(A)	(B)	(C)	(D)	
			Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512 - 514	
Contributions, Gifts, Grants and Other Similar Amounts	1 a Federated campaigns	1a					
	b Membership dues	1b					
	c Fundraising events	1c	2,236,999.				
	d Related organizations	1d					
	e Government grants (contributions)	1e					
	f All other contributions, gifts, grants, and similar amounts not included above ...	1f	20,910,371.				
	g Noncash contributions included in lines 1a-1f	1g	\$ 913,126.				
	h Total. Add lines 1a-1f		23,147,370.				
Program Service Revenue	2 a GOV'T FEES & CONTRACTS	Business Code					
		611710	107,667,000.	107,667,000.			
	b PROGRAM FEES	611710	15,382,000.	15,382,000.			
	c HEALTH AND WELLNESS CLINICS	624100	494,000.	494,000.			
	d _____						
	e _____						
	f All other program service revenue						
g Total. Add lines 2a-2f		123,543,000.					
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)		3,596,800.		165,815.	3,430,985.	
	4 Income from investment of tax-exempt bond proceeds						
	5 Royalties						
	6 a Gross rents	6a	(i) Real	2,690,000.			
			(ii) Personal				
	b Less: rental expenses ...	6b	0.				
	c Rental income or (loss)	6c	2,690,000.				
	d Net rental income or (loss)		2,690,000.			2,690,000.	
	7 a Gross amount from sales of assets other than inventory	7a	(i) Securities	33,029,000.	15,200,000.		
			(ii) Other				
	b Less: cost or other basis and sales expenses	7b	29,682,000.	836,000.			
	c Gain or (loss)	7c	3,347,000.	14,364,000.			
	d Net gain or (loss)		17,711,000.			17,711,000.	
8 a Gross income from fundraising events (not including \$ 2,236,999. of contributions reported on line 1c). See Part IV, line 18	8a		189,630.				
			648,586.				
b Less: direct expenses	8b						
c Net income or (loss) from fundraising events			-458,956.		-458,956.		
9 a Gross income from gaming activities. See Part IV, line 19	9a						
b Less: direct expenses	9b						
c Net income or (loss) from gaming activities							
10 a Gross sales of inventory, less returns and allowances	10a						
b Less: cost of goods sold	10b						
c Net income or (loss) from sales of inventory							
Miscellaneous Revenue	11 a CHARTER SCHOOL ADMIN SVCS	Business Code					
		900099	2,699,000.			2,699,000.	
	b MISCELLANEOUS INCOME	900099	299,200.			299,200.	
	c _____						
	d All other revenue						
e Total. Add lines 11a-11d		2,998,200.					
12 Total revenue. See instructions		173,227,414.	123,543,000.	165,815.	26,371,229.		

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 or note to any line in this Part IX

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 ...	568,750.	568,750.		
2 Grants and other assistance to domestic individuals. See Part IV, line 22	3,737,350.	3,737,350.		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	1,605,702.	595,345.	1,010,357.	
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	85,669,558.	72,983,425.	10,804,302.	1,881,831.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	4,332,815.	3,544,799.	679,189.	108,827.
9 Other employee benefits	8,868,219.	7,344,668.	1,304,084.	219,467.
10 Payroll taxes	7,549,830.	6,361,052.	1,026,105.	162,673.
11 Fees for services (nonemployees):				
a Management	6,859,481.	5,081,729.	1,604,736.	173,016.
b Legal	1,766,103.	737,130.	1,028,973.	
c Accounting	323,144.	51,975.	271,169.	
d Lobbying	146,343.		146,343.	
e Professional fundraising services. See Part IV, line 17				
f Investment management fees	1,698,000.		1,698,000.	
g Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Sch O.)	529,297.	369,364.	86,499.	73,434.
12 Advertising and promotion	556,085.	144,425.	279,474.	132,186.
13 Office expenses	3,880,273.	3,553,247.	264,565.	62,461.
14 Information technology	2,875,291.	1,372,924.	1,411,889.	90,478.
15 Royalties				
16 Occupancy	7,238,198.	6,620,624.	600,109.	17,465.
17 Travel	1,530,432.	1,479,074.	49,218.	2,140.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials ...				
19 Conferences, conventions, and meetings	1,061,127.	702,342.	355,200.	3,585.
20 Interest	2,993,621.	2,078,350.	835,133.	80,138.
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	4,559,489.	2,683,471.	1,770,026.	105,992.
23 Insurance	1,501,900.	1,291,912.	182,705.	27,283.
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on 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	15,602,641.	15,597,855.	4,786.	
b FOOD	1,320,083.	1,286,650.	27,409.	6,024.
c MEMBERSHIP DUES	172,699.	136,449.	36,250.	
d REPAIRS AND MAINTENANCE	88,983.	81,090.	7,893.	
e All other expenses				
25 Total functional expenses. Add lines 1 through 24e	167,035,414.	138,404,000.	25,484,414.	3,147,000.
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 <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

Check if Schedule O contains a response or note to any line in this Part X

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing	1,956,000.	1	2,247,000.
	2 Savings and temporary cash investments	15,705,000.	2	14,050,000.
	3 Pledges and grants receivable, net	5,064,000.	3	4,707,000.
	4 Accounts receivable, net	36,609,000.	4	38,368,000.
	5 Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	3,710,000.	9	3,256,000.
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 145,563,000.		
	b Less: accumulated depreciation	10b 34,746,000.		
	11 Investments - publicly traded securities	112,469,000.	10c	110,817,000.
	12 Investments - other securities. See Part IV, line 11	111,052,000.	11	130,225,000.
	13 Investments - program-related. See Part IV, line 11	196,671,000.	12	197,975,000.
	14 Intangible assets		13	
	15 Other assets. See Part IV, line 11	29,774,000.	14	
16 Total assets. Add lines 1 through 15 (must equal line 33)	513,010,000.	15	29,354,000.	
		16	530,999,000.	
Liabilities	17 Accounts payable and accrued expenses	16,355,000.	17	14,482,000.
	18 Grants payable		18	
	19 Deferred revenue	7,300,000.	19	4,435,000.
	20 Tax-exempt bond liabilities	73,577,000.	20	72,325,000.
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D	58,018,000.	25	46,469,000.
	26 Total liabilities. Add lines 17 through 25	155,250,000.	26	137,711,000.
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 27, 28, 32, and 33.			
	27 Net assets without donor restrictions	340,503,000.	27	374,249,000.
	28 Net assets with donor restrictions	17,257,000.	28	19,039,000.
	Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 29 through 33.			
	29 Capital stock or trust principal, or current funds		29	
	30 Paid-in or capital surplus, or land, building, or equipment fund		30	
	31 Retained earnings, endowment, accumulated income, or other funds		31	
	32 Total net assets or fund balances	357,760,000.	32	393,288,000.
33 Total liabilities and net assets/fund balances	513,010,000.	33	530,999,000.	

Part XI Reconciliation of Net Assets

Check if Schedule O contains a response or note to any line in this Part XI

1	Total revenue (must equal Part VIII, column (A), line 12)	1	173,227,414.
2	Total expenses (must equal Part IX, column (A), line 25)	2	167,035,414.
3	Revenue less expenses. Subtract line 2 from line 1	3	6,192,000.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	357,760,000.
5	Net unrealized gains (losses) on investments	5	19,197,000.
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 on Schedule O)	9	10,139,000.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	393,288,000.

Part XII Financial Statements and Reporting

Check if Schedule O contains a response or note to any line in this Part XII

- 1** Accounting method used to prepare the Form 990: Cash Accrual Other _____
If the organization changed its method of accounting from a prior year or checked "Other," explain on 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:
 Separate basis Consolidated basis Both consolidated and separate basis
- b** 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:
 Separate basis Consolidated basis Both consolidated and separate basis
- c** If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? _____
If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.
- 3a** As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Uniform Guidance, 2 C.F.R. Part 200, Subpart F? _____
- b** If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits _____

	Yes	No
2a		X
2b	X	
2c	X	
3a	X	
3b	X	

Form **990** (2022)

SCHEDULE A (Form 990)

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.

Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2022

Open to Public Inspection

Table with 2 columns: Name of the organization (THE CHILDREN'S AID SOCIETY) and 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 12, 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).
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).
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).
6 [] A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).
7 [X] 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).
8 [] A community trust described in section 170(b)(1)(A)(vi).
9 [] An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture.
10 [] 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...
11 [] An organization organized and operated exclusively to test for public safety.
12 [] 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...
a [] Type I. A supporting organization operated, supervised, or controlled by its supported organization(s)...
b [] Type II. A supporting organization supervised or controlled in connection with its supported organization(s)...
c [] Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s)...
d [] Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated...
e [] Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.

f Enter the number of supported organizations []
g Provide the following information about the supported organization(s).

Table with 6 columns: (i) Name of supported organization, (ii) EIN, (iii) Type of organization, (iv) Is the organization listed in your governing document?, (v) Amount of monetary support, (vi) Amount of other support. Includes a Total row at the bottom.

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) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	18,150,000.	25,300,000.	20,480,125.	24,309,144.	23,147,370.	111,386,639.
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3	18,150,000.	25,300,000.	20,480,125.	24,309,144.	23,147,370.	111,386,639.
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)						1,038,783.
6 Public support. Subtract line 5 from line 4.						110,347,856.

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
7 Amounts from line 4	18,150,000.	25,300,000.	20,480,125.	24,309,144.	23,147,370.	111,386,639.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	5,082,633.	3,845,168.	4,992,656.	4,980,273.	6,120,985.	25,021,715.
9 Net income from unrelated business activities, whether or not the business is regularly carried on	246,601.	196,532.	48,344.	175,227.	165,815.	832,519.
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	1,799,000.	4,149,000.	2,173,875.	2,873,356.	3,187,830.	14,183,061.
11 Total support. Add lines 7 through 10						151,423,934.
12 Gross receipts from related activities, etc. (see instructions)					12	527,927,300.
13 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here						<input type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2022 (line 6, column (f), divided by line 11, column (f))	14	72.87 %
15 Public support percentage from 2021 Schedule A, Part II, line 14	15	74.32 %
16a 33 1/3% support test - 2022. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		<input checked="" type="checkbox"/>
b 33 1/3% support test - 2021. 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		<input type="checkbox"/>
17a 10% -facts-and-circumstances test - 2022. 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 VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
b 10% -facts-and-circumstances test - 2021. 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 VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions		<input type="checkbox"/>

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 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) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge ...						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources ...						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included on 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 VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						

14 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here**

Section C. Computation of Public Support Percentage

15 Public support percentage for 2022 (line 8, column (f), divided by line 13, column (f))	15	%
16 Public support percentage from 2021 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2022 (line 10c, column (f), divided by line 13, column (f))	17	%
18 Investment income percentage from 2021 Schedule A, Part III, line 17	18	%

19a 33 1/3% support tests - 2022. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

b 33 1/3% support tests - 2021. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

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

Part IV Supporting Organizations

(Complete only if you checked a box on line 12 of Part I. If you checked box 12a, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete Sections A, D, and E. If you checked box 12d, Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

	Yes	No
1 Are all of the organization's supported organizations listed by name in the organization's governing documents? <i>If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.</i>		
2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>		
3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer lines 3b and 3c below.</i>		
b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>		
c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>		
4a Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.</i>		
b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.</i>		
c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? <i>If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.</i>		
5a Did the organization add, substitute, or remove any supported organizations during the tax year? <i>If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).</i>		
b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
c Substitutions only. Was the substitution the result of an event beyond the organization's control?		
6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? <i>If "Yes," provide detail in Part VI.</i>		
7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? <i>If "Yes," complete Part I of Schedule L (Form 990).</i>		
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? <i>If "Yes," complete Part I of Schedule L (Form 990).</i>		
9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? <i>If "Yes," provide detail in Part VI.</i>		
b Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If "Yes," provide detail in Part VI.</i>		
c Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? <i>If "Yes," provide detail in Part VI.</i>		
10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? <i>If "Yes," answer line 10b below.</i>		
b Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)</i>		

Part IV Supporting Organizations (continued)

Table with 3 columns: Question, Yes, No. Row 11: Has the organization accepted a gift or contribution from any of the following persons? Sub-rows 11a, 11b, 11c.

Section B. Type I Supporting Organizations

Table with 3 columns: Question, Yes, No. Row 1: Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? Row 2: Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization?

Section C. Type II Supporting Organizations

Table with 3 columns: Question, Yes, No. Row 1: Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)?

Section D. All Type III Supporting Organizations

Table with 3 columns: Question, Yes, No. Row 1: Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided? Row 2: Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? Row 3: By reason of the relationship described on line 2, above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year?

Section E. Type III Functionally Integrated Supporting Organizations

Table with 3 columns: Question, Yes, No. Row 1: Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions). Sub-rows a, b, c. Row 2: Activities Test. Answer lines 2a and 2b below. Sub-rows a, b. Row 3: Parent of Supported Organizations. Answer lines 3a and 3b below. Sub-rows a, b.

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (*explain in Part VI*). **See instructions.**
 All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1	
2	Recoveries of prior-year distributions	2	
3	Other gross income (see instructions)	3	
4	Add lines 1 through 3.	4	
5	Depreciation and depletion	5	
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6	
7	Other expenses (see instructions)	7	
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8	

Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):		
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	Total (add lines 1a, 1b, and 1c)	1d	
e	Discount claimed for blockage or other factors (<i>explain in detail in Part VI</i>):		
2	Acquisition indebtedness applicable to non-exempt-use assets	2	
3	Subtract line 2 from line 1d.	3	
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).	4	
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6	Multiply line 5 by 0.035.	6	
7	Recoveries of prior-year distributions	7	
8	Minimum Asset Amount (add line 7 to line 6)	8	

Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1	
2	Enter 0.85 of line 1.	2	
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3	
4	Enter greater of line 2 or line 3.	4	
5	Income tax imposed in prior year	5	
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6	
7	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)

Section D - Distributions		Current Year
1	Amounts paid to supported organizations to accomplish exempt purposes	1
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	2
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	3
4	Amounts paid to acquire exempt-use assets	4
5	Qualified set-aside amounts (prior IRS approval required - <i>provide details in Part VI</i>)	5
6	Other distributions (<i>describe in Part VI</i>). See instructions.	6
7	Total annual distributions. Add lines 1 through 6.	7
8	Distributions to attentive supported organizations to which the organization is responsive (<i>provide details in Part VI</i>). See instructions.	8
9	Distributable amount for 2022 from Section C, line 6	9
10	Line 8 amount divided by line 9 amount	10

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2022	(iii) Distributable Amount for 2022
1 Distributable amount for 2022 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2022 (reasonable cause required - <i>explain in Part VI</i>). See instructions.			
3 Excess distributions carryover, if any, to 2022			
a From 2017			
b From 2018			
c From 2019			
d From 2020			
e From 2021			
f Total of lines 3a through 3e			
g Applied to underdistributions of prior years			
h Applied to 2022 distributable amount			
i Carryover from 2017 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4 Distributions for 2022 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2022 distributable amount			
c Remainder. Subtract lines 4a and 4b from line 4.			
5 Remaining underdistributions for years prior to 2022, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, <i>explain in Part VI</i> . See instructions.			
6 Remaining underdistributions for 2022. Subtract lines 3h and 4b from line 1. For result greater than zero, <i>explain in Part VI</i> . See instructions.			
7 Excess distributions carryover to 2023. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2018			
b Excess from 2019			
c Excess from 2020			
d Excess from 2021			
e Excess from 2022			

Schedule A (Form 990) 2022

Part VI **Supplemental Information.** Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information.
(See instructions.)

SCHEDULE A, PART II, LINE 10, EXPLANATION FOR OTHER INCOME:

GROSS INCOME FROM FUNDRAISING

2018 AMOUNT: \$ 181,000.

2019 AMOUNT: \$ 110,000.

2020 AMOUNT: \$ 4,875.

2021 AMOUNT: \$ 296,856.

2022 AMOUNT: \$ 189,630.

MANAGEMENT FEE

2018 AMOUNT: \$ 1,618,000.

2019 AMOUNT: \$ 2,064,000.

2020 AMOUNT: \$ 2,013,000.

2021 AMOUNT: \$ 2,349,000.

2022 AMOUNT: \$ 2,699,000.

FORGIVENESS OF LOAN INCOME

2018 AMOUNT: \$ 0.

2019 AMOUNT: \$ 1,889,000.

2020 AMOUNT: \$ 0.

2021 AMOUNT: \$ 0.

2022 AMOUNT: \$ 0.

MISCELLANEOUS INCOME

2018 AMOUNT: \$ 0.

2019 AMOUNT: \$ 86,000.

2020 AMOUNT: \$ 156,000.

2021 AMOUNT: \$ 227,500.

Part VI

Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information.
(See instructions.)

2022 AMOUNT: \$ 299,200.

Multiple horizontal lines for supplemental information.

Schedule B
(Form 990)

Department of the Treasury
Internal Revenue Service

Schedule of Contributors

Attach to Form 990 or Form 990-PF.
Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2022

Name of the organization

THE CHILDREN'S AID SOCIETY

Employer identification number

13-5562191

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

501(c)(3) (enter number) organization

4947(a)(1) nonexempt charitable trust **not** treated as a private foundation

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

4947(a)(1) nonexempt charitable trust treated as a private foundation

501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.

Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of **(1)** \$5,000; or **(2)** 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year \$ _____

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990).

Name of organization THE CHILDREN'S AID SOCIETY	Employer identification number 13-5562191
--	--

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	<hr/> <hr/> <hr/>	\$ 3,277,852.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2	<hr/> <hr/> <hr/>	\$ 2,783,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
3	<hr/> <hr/> <hr/>	\$ 2,000,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
4	<hr/> <hr/> <hr/>	\$ 1,077,800.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
5	<hr/> <hr/> <hr/>	\$ 765,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
6	<hr/> <hr/> <hr/>	\$ 689,958.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization THE CHILDREN'S AID SOCIETY	Employer identification number 13-5562191
--	--

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7	<hr/> <hr/> <hr/>	\$ 657,336.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
8	<hr/> <hr/> <hr/>	\$ 540,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	<hr/> <hr/> <hr/>	\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	<hr/> <hr/> <hr/>	\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	<hr/> <hr/> <hr/>	\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	<hr/> <hr/> <hr/>	\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	<hr/> <hr/> <hr/>	\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization THE CHILDREN'S AID SOCIETY	Employer identification number 13-5562191
--	--

Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
	_____	\$ _____	_____
	_____	\$ _____	_____
	_____	\$ _____	_____
	_____	\$ _____	_____
	_____	\$ _____	_____
	_____	\$ _____	_____
	_____	\$ _____	_____
	_____	\$ _____	_____

Name of organization THE CHILDREN'S AID SOCIETY	Employer identification number 13-5562191
--	--

Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info. once.) \$ _____
Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	

SCHEDULE C
(Form 990)

Political Campaign and Lobbying Activities

OMB No. 1545-0047

2022

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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.
Go to www.irs.gov/Form990 for instructions and the latest information.

If the organization answered "Yes," on 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," on 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," on Form 990, Part IV, line 5 (Proxy Tax) (See separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (See separate instructions), then

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

Name of organization THE CHILDREN'S AID SOCIETY	Employer identification number 13-5562191
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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 campaign activity expenditures \$ _____
- 3 Volunteer hours for political campaign activities _____

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-.

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Schedule C (Form 990) 2022

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.

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals												
1a	Total lobbying expenditures to influence public opinion (grassroots lobbying)														
b	Total lobbying expenditures to influence a legislative body (direct lobbying)														
c	Total lobbying expenditures (add lines 1a and 1b)														
d	Other exempt purpose expenditures														
e	Total exempt purpose expenditures (add lines 1c and 1d)														
f	Lobbying nontaxable amount. Enter the amount from the following table in both columns.														
<table border="1" style="width: 100%;"> <thead> <tr> <th style="text-align: left;">If the amount on line 1e, column (a) or (b) is:</th> <th style="text-align: left;">The lobbying nontaxable amount is:</th> </tr> </thead> <tbody> <tr> <td>Not over \$500,000</td> <td>20% of the amount on line 1e.</td> </tr> <tr> <td>Over \$500,000 but not over \$1,000,000</td> <td>\$100,000 plus 15% of the excess over \$500,000.</td> </tr> <tr> <td>Over \$1,000,000 but not over \$1,500,000</td> <td>\$175,000 plus 10% of the excess over \$1,000,000.</td> </tr> <tr> <td>Over \$1,500,000 but not over \$17,000,000</td> <td>\$225,000 plus 5% of the excess over \$1,500,000.</td> </tr> <tr> <td>Over \$17,000,000</td> <td>\$1,000,000.</td> </tr> </tbody> </table>		If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	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.		
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:														
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.														
g	Grassroots nontaxable amount (enter 25% of line 1f)														
h	Subtract line 1g from line 1a. If zero or less, enter -0-														
i	Subtract line 1f from line 1c. If zero or less, enter -0-														
j	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?														

Yes 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 separate instructions for lines 2a through 2f.)

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) Total
2a Lobbying nontaxable amount					
b Lobbying ceiling amount (150% of line 2a, column(e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
f Grassroots lobbying expenditures					

Schedule C (Form 990) 2022

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 on 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?	X		
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? ..	X		
c Media advertisements?		X	
d Mailings to members, legislators, or the public?		X	
e Publications, or published or broadcast statements?		X	
f Grants to other organizations for lobbying purposes?		X	
g Direct contact with legislators, their staffs, government officials, or a legislative body?	X		50,443.
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		X	
i Other activities?	X		95,900.
j Total. Add lines 1c through 1i			146,343.
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		X	
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 campaign activity 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).	
a Current year	2a
b Carryover from last year	2b
c Total	2c
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditures next year?	4
5 Taxable amount of lobbying and political expenditures. See instructions	5

Part IV Supplemental Information

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, lines 1 and 2 (See instructions); and Part II-B, line 1. Also, complete this part for any additional information.

PART II-B, LINE 1, LOBBYING ACTIVITIES:

THE CHILDREN'S AID SOCIETY UTILIZES AN OUTSIDE CONSULTANT TO UNDERTAKE

LOBBYING ACTIVITIES ON ITS BEHALF; SPECIFICALLY TO ENGAGE IN BUDGET AND

LEGISLATIVE ADVOCACY THAT ALIGN WITH OUR PRIORITIES TO HELP SUPPORT OUR

CHILDREN AND FAMILIES. AMOUNTS PAID TO THIRD PARTY EXTERNAL LOBBYING

CONSULTANTS, INCLUDED IN SCHEDULE C, PART II-B, LINE 1(I), AMOUNTS TO

Part IV Supplemental Information *(continued)*

\$95,900. THE REMAINING COSTS IDENTIFIED IN SCHEDULE C REPRESENT

INTERNAL SALARY COSTS ALLOCATED TO LOBBYING INITIATIVES.

Multiple horizontal lines for supplemental information.

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2022

Open to Public Inspection

Name of the organization THE CHILDREN'S AID SOCIETY Employer identification number 13-5562191

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

Table with 3 columns: Question, (a) Donor advised funds, (b) Funds and other accounts. Rows include total number at end of year, aggregate value of contributions, grants, and end of year, and two yes/no questions about donor property and grant fund usage.

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

Table with 3 columns: Question, (a) Donor advised funds, (b) Funds and other accounts. Rows include purpose of easements, lines 2a-2d for total number, acreage, and structure counts, and questions about monitoring, expenses, and reporting requirements.

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

Table with 3 columns: Question, (a) Donor advised funds, (b) Funds and other accounts. Rows include questions about reporting art and historical treasures and amounts for revenue and assets.

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule D (Form 990) 2022

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

- 3 Using the organization's acquisition, accession, and other records, check any of the following that make significant use of its collection items (check all that apply):
- a Public exhibition
 - b Scholarly research
 - c Preservation for future generations
 - d Loan or exchange program
 - e Other _____
- 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.
- 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

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

- 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No
- b If "Yes," explain the arrangement in Part XIII and complete the following table:
- | | Amount |
|---------------------------------|--------|
| c Beginning balance | 1c |
| d Additions during the year | 1d |
| e Distributions during the year | 1e |
| f Ending balance | 1f |
- 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No
- b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII

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

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	8,702,000.	9,908,000.	7,854,000.	8,199,000.	8,145,000.
b Contributions		2,000.	63,000.		
c Net investment earnings, gains, and losses	553,000.	-857,000.	2,293,000.	23,000.	191,000.
d Grants or scholarships					
e Other expenditures for facilities and programs	349,000.	351,000.	302,000.	368,000.	137,000.
f Administrative expenses					
g End of year balance	8,906,000.	8,702,000.	9,908,000.	7,854,000.	8,199,000.

- 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
- a Board designated or quasi-endowment .0000 %
 - b Permanent endowment 77.2100 %
 - c Term endowment 22.7900 %
- The percentages on lines 2a, 2b, and 2c should equal 100%.
- 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:
- | | Yes | No |
|---|-----|----|
| (i) Unrelated organizations | | X |
| (ii) Related organizations | | X |
| b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? <input type="checkbox"/> | 3b | |
- 4 Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		5,605,000.		5,605,000.
b Buildings		122,437,000.	24,544,424.	97,892,576.
c Leasehold improvements		4,932,000.	4,097,918.	834,082.
d Equipment		7,815,000.	5,441,417.	2,373,583.
e Other		4,774,000.	662,241.	4,111,759.
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				110,817,000.

Part VII Investments - Other Securities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. 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) EQUITIES AND COMMINGLED FUNDS	91,232,000.	END-OF-YEAR MARKET VALUE
(B) PRIVATE CAPITAL	44,682,000.	END-OF-YEAR MARKET VALUE
(C) HEDGE FUNDS	39,915,000.	END-OF-YEAR MARKET VALUE
(D) EMERGING MARKETS EQUITY FUND	12,300,000.	END-OF-YEAR MARKET VALUE
(E) OTHER ALTERNATIVE INVESTMENTS	4,966,000.	END-OF-YEAR MARKET VALUE
(F) LIMITED PARTNERSHIP INTERESTS	4,880,000.	END-OF-YEAR MARKET VALUE
(G)		
(H)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)	197,975,000.	

Part VIII Investments - Program Related.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

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

Part IX Other Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1) OPERATING RIGHT-OF-USE ASSETS	26,405,000.
(2) SPLIT-INTEREST AGREEMENT INVESTMENTS	1,549,000.
(3) FACILITIES ACQUISITION ESCROW	1,400,000.
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)	29,354,000.

Part X Other Liabilities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) OPERATING LEASE LIABILITIES	26,405,000.
(3) ACCRUED PENSION AND POST-RETIREMENT OBLIGATIONS	15,476,000.
(4) OTHER LIABILITIES	3,321,000.
(5) SPLIT-INTEREST OBLIGATIONS	1,267,000.
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)	46,469,000.

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII ...

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

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

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 (losses) 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.

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

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.

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.

PART V, LINE 4:

CHILDREN'S AID RECOGNIZES THAT NEW YORK STATE ADOPTED AS LAW THE NEW YORK

PRUDENT MANAGEMENT OF INSTITUTIONAL FUNDS ACT ("NYPMIFA"). NYPMIFA CREATED

A REBUTTABLE PRESUMPTION OF IMPRUDENCE IF AN ORGANIZATION APPROPRIATES

MORE THAN 7% OF A DONOR-RESTRICTED 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 TO BE WITHOUT

DONOR RESTRICTIONS ARE REFLECTED AS NET ASSETS WITH DONOR RESTRICTIONS

UNTIL APPROPRIATED.

THE CHILDREN'S AID'S BOARD HAS INTERPRETED NYPMIFA AS ALLOWING CHILDREN'S

AID TO APPROPRIATE FOR EXPENDITURE OR ACCUMULATE SO MUCH OF AN ENDOWMENT

Part XIII Supplemental Information (continued)

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.

FOR DONOR-RESTRICTED ENDOWMENT FUNDS AND OTHER UNRESTRICTED RESERVES, THE
BOARD OF TRUSTEES OF CHILDREN'S AID HAS ESTABLISHED INVESTMENT POLICIES.
ENDOWMENT INVESTMENTS CONSIST OF A BROAD RANGE OF SECURITIES TO PROVIDE A
BALANCE THAT WILL ENHANCE TOTAL RETURN WHILE AVOIDING UNDUE RISK THROUGH
EXCESSIVE CONCENTRATION IN ANY SINGLE ASSET CLASS OR INDIVIDUAL SECURITY.
ASSET ALLOCATION IS DETERMINED BY THE INVESTMENT COMMITTEE OF THE BOARD
AND REVIEWED REGULARLY.

PART IX, OPERATING RIGHT-OF-USE ASSETS, LINE 1, AND PART X, OPERATING

LEASE LIABILITIES, LINE 1(2):

THE FINANCIAL ACCOUNTING STANDARDS BOARD ("FASB") IMPLEMENTED A NEW LEASE
ACCOUNTING STANDARD THAT BECAME EFFECTIVE FOR THE CHILDREN'S AID SOCIETY
IN THE YEAR ENDING JUNE 30, 2022. THIS ACCOUNTING STANDARD WAS EFFECTUATED
TO IMPROVE THE TRANSPARENCY SURROUNDING KEY INFORMATION PERTAINING TO AN
EXEMPT ORGANIZATION'S LEASING ARRANGEMENTS (AND TO ENSURE THAT ALL
ORGANIZATIONS WERE RECORDING THE TRANSACTIONS UNIFORMLY ON THEIR BALANCE
SHEETS).

PART X, LINE 2:

THE AGENCY FOLLOWS GUIDANCE THAT CLARIFIES THE ACCOUNTING FOR UNCERTAINTY
IN TAX POSITIONS TAKEN OR EXPECTED TO BE TAKEN IN A TAX RETURN, INCLUDING
ISSUES RELATING TO FINANCIAL STATEMENT RECOGNITION AND MEASUREMENT. THIS
GUIDANCE PROVIDES THAT THE TAX EFFECTS FROM AN UNCERTAIN TAX POSITION CAN
ONLY BE RECOGNIZED IN THE FINANCIAL STATEMENTS IF THE POSITION IS

Part XIII Supplemental Information (continued)

"MORE-LIKELY-THAN-NOT" TO BE SUSTAINED IF THE POSITION WERE TO BE CHALLENGED BY A TAXING AUTHORITY. THE ASSESSMENT OF THE TAX POSITION IS BASED SOLELY ON THE TECHNICAL MERITS OF THE POSITION, WITHOUT REGARD TO THE LIKELIHOOD THAT THE TAX POSITION MAY BE CHALLENGED.

THE AGENCY IS EXEMPT FROM FEDERAL INCOME TAX UNDER INTERNAL REVENUE SERVICE CODE SECTION 501(C)(3), THOUGH IT IS SUBJECT TO TAX ON INCOME UNRELATED TO ITS EXEMPT PURPOSE, UNLESS THAT INCOME IS OTHERWISE EXCLUDED BY THE CODE. THE AGENCY HAS PROCESSES PRESENTLY IN PLACE TO ENSURE THE MAINTENANCE OF ITS TAX EXEMPT STATUS; TO IDENTIFY AND REPORT UNRELATED INCOME; TO DETERMINE ITS FILING AND TAX OBLIGATIONS IN JURISDICTIONS FOR WHICH IT HAS NEXUS; AND, TO IDENTIFY AND EVALUATE OTHER MATTERS THAT MAY BE CONSIDERED TAX POSITIONS. THE AGENCY HAS DETERMINED THAT THERE ARE NO MATERIAL UNCERTAIN TAX POSITIONS THAT REQUIRE RECOGNITION OR DISCLOSURE IN ITS CONSOLIDATED FINANCIAL STATEMENTS FOR THE YEARS ENDED JUNE 30, 2023 AND 2022.

**SCHEDULE F
(Form 990)**

Department of the Treasury
Internal Revenue Service

Statement of Activities Outside the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16.

Attach to Form 990.

Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2022

Open to Public
Inspection

Name of the organization THE CHILDREN'S AID SOCIETY	Employer identification number 13-5562191
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Part I General Information on Activities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 14b.

1 For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes No

2 For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States.

3 Activities per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.)

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in the region	(d) Activities conducted in the region (by type) (such as, fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in the region	(f) Total expenditures for and investments in the region
CENTRAL AMERICA AND THE CARIBBEAN	0	0	INVESTMENTS		80,689,903.
3 a Subtotal	0	0			80,689,903.
b Total from continuation sheets to Part I	0	0			0.
c Totals (add lines 3a and 3b)	0	0			80,689,903.

Part II Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)

- 2** Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as a tax exempt 501(c)(3) organization by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter ▶ _____
- 3** Enter total number of other organizations or entities ▶ _____

Part III **Grants and Other Assistance to Individuals Outside the United States.** Complete if the organization answered "Yes" on Form 990, Part IV, line 16.

Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of noncash assistance	(g) Description of noncash assistance	(h) Method of valuation (book, FMV, appraisal, other)

Part IV Foreign Forms

- 1 Was the organization a U.S. transferor of property to a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)* Yes No

- 2 Did the organization have an interest in a foreign trust during the tax year? *If "Yes," the organization may be required to separately file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; don't file with Form 990)* Yes No

- 3 Did the organization have an ownership interest in a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect to Certain Foreign Corporations (see Instructions for Form 5471)* Yes No

- 4 Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? *If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)* Yes No

- 5 Did the organization have an ownership interest in a foreign partnership during the tax year? *If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships (see Instructions for Form 8865)* Yes No

- 6 Did the organization have any operations in or related to any boycotting countries during the tax year? *If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713; don't file with Form 990)* Yes No

Part V Supplemental Information

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information. See instructions.

SCHEDULE F, PART IV:

THE CHILDREN'S AID SOCIETY INVESTS DIRECTLY IN VARIOUS ALTERNATIVE INVESTMENTS THAT MAY BE ORGANIZED AS EITHER FOREIGN CORPORATIONS OR FOREIGN PARTNERSHIPS; IT LIKewise INVESTS IN DOMESTIC LIMITED PARTNERSHIPS THAT MAY, IN TURN, INVEST IN FOREIGN CORPORATIONS OR PARTNERSHIPS. NEVERTHELESS, CAS'S INVESTMENT ACTIVITIES MAY NOT REACH THE THRESHOLDS REQUIRED FOR THE FILING OF FORMS 926, 5471, 8621, OR 8865. TO THE EXTENT THAT CAS IS REQUIRED TO COMPLETE ONE (OR MORE) OF THESE FOREIGN FORMS, THEY ARE FILED WITH THE FORM 990-T FILING.

Part II Fundraising Events. Complete if the organization answered "Yes" on 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	(b) Event #2	(c) Other events	(d) Total events (add col. (a) through col. (c))
		GALA (event type)	GOLF CLASSIC (event type)	NONE (total number)	
Revenue	1 Gross receipts	2,073,856.	352,773.		2,426,629.
	2 Less: Contributions	1,995,826.	241,173.		2,236,999.
	3 Gross income (line 1 minus line 2)	78,030.	111,600.		189,630.
Direct Expenses	4 Cash prizes	0.	0.		
	5 Noncash prizes	6,071.	6,845.		12,916.
	6 Rent/facility costs	50,000.	105,926.		155,926.
	7 Food and beverages	200,814.	30,753.		231,567.
	8 Entertainment	20,690.	0.		20,690.
	9 Other direct expenses	202,065.	25,422.		227,487.
	10 Direct expense summary. Add lines 4 through 9 in column (d)				648,586.
11 Net income summary. Subtract line 10 from line 3, column (d)				-458,956.	

Part III Gaming. Complete if the organization answered "Yes" on 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			
Direct Expenses	2 Cash prizes				
	3 Noncash 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. Subtract line 7 from line 1, column (d)					

9 Enter the state(s) in which the organization conducts gaming activities: _____

a Is the organization licensed to conduct 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: _____

11 Does the organization conduct gaming activities with nonmembers? Yes No

12 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 conducted 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 to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year \$ _____

Part IV Supplemental Information. 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 provide any additional information. See instructions.

Part IV Supplemental Information *(continued)*

Horizontal lines for supplemental information entry.

**SCHEDULE I
(Form 990)**

Department of the Treasury
Internal Revenue Service

**Grants and Other Assistance to Organizations,
Governments, and Individuals in the United States**
Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.
Attach to Form 990.
Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2022

**Open to Public
Inspection**

Name of the organization **THE CHILDREN'S AID SOCIETY** Employer identification number **13-5562191**

Part I General Information on Grants and Assistance

- 1** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? **Yes** **No**
- 2** Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on 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.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
BOYS AND GIRLS CLUB OF MOSHOLU 3450 DEKALB AVENUE BRONX, NY 10467	20-8017249	501(C)(3)	9,000.	0.			GENERAL SUPPORT
CHILDREN'S AID COLLEGE PREP CHARTER SCHOOL - 117 W 124TH STREET, 4TH FLOOR - NEW YORK, NY 10027	90-0763840	501(C)(3)	500,000.	0.			GENERAL SUPPORT
KIPPS BAY BOYS & GIRLS CLUB INC 1930 RANDALL AVENUE BRONX, NY 10473	13-1623850	501(C)(3)	9,900.	0.			GENERAL SUPPORT
NEW VISION FOR PUBLIC SCHOOLS 205 EAST 42ND STREET, 4TH FLOOR NEW YORK, NY 10017	13-3538961	501(C)(3)	15,000.	0.			GENERAL SUPPORT
NEW YORK EDGE 58-12 QUEENS BOULEVARD, SUITE 1 WOODSIDE, NY 11377	11-3112635	501(C)(3)	10,000.	0.			GENERAL SUPPORT

- 2** Enter total number of section 501(c)(3) and government organizations listed in the line 1 table **5.**
- 3** Enter total number of other organizations listed in the line 1 table

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

Schedule I (Form 990) 2022

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on 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 noncash assistance
SPECIFIC ASSISTANCE	493	940,623.	0.		
SCHOLARSHIPS	79	180,387.	0.		
PER DIEM PARTICIPATION STIPENDS	1869	959,903.	0.		
CHILDREN'S RECREATIONAL ACTIVITIES	270	1,656,437.	0.		

Part IV Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

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)**

Department of the Treasury
Internal Revenue Service

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest
Compensated Employees
Complete if the organization answered "Yes" on Form 990, Part IV, line 23.
Attach to Form 990.
Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2022

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 on 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 (such as maid, chauffeur, chef) |

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

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

3 Indicate which, if any, of the following the 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 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 on 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?
- b** Participate in or receive payment from a supplemental nonqualified retirement plan?
- c** Participate in or receive payment from an equity-based compensation arrangement?
- If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.

Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.

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

- a** The organization?
- b** Any related organization?
- If "Yes" on line 5a or 5b, describe in Part III.

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

- a** The organization?
- b** Any related organization?
- If "Yes" on line 6a or 6b, describe in Part III.

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

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

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

	Yes	No
1b		
2		
4a		X
4b		X
4c		X
5a		X
5b		X
6a		X
6b		X
7		X
8		X
9		

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

Schedule J (Form 990) 2022

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 on 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 aren't 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 and/or 1099-NEC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1) PHOEBE BOYER PRESIDENT/CEO	(i)	487,359.	0.	20,500.	14,368.	20,116.	542,343.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) MICHAEL GREENBERG CHIEF FINANCIAL OFFICER	(i)	274,467.	0.	20,500.	14,997.	7,989.	317,953.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(3) SANDRA ESCAMILLA EXECUTIVE VICE PRESIDENT	(i)	274,107.	0.	0.	8,331.	22,732.	305,170.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(4) CAROLINE GALLAGHER CHIEF DEVELOPMENT OFFICER	(i)	269,755.	0.	0.	12,223.	23,123.	305,101.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(5) GEORGIA BOOTHE EXECUTIVE VICE PRESIDENT	(i)	274,367.	0.	0.	12,809.	2,372.	289,548.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(6) DANIEL SHACKNAI (THRU 10/2022) CHIEF OPERATING OFFICER	(i)	234,815.	0.	0.	11,040.	16,109.	261,964.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(7) VICKI KRITSOVAS MEDICAL DIRECTOR	(i)	235,964.	0.	0.	2,353.	21,530.	259,847.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(8) COURTENAYE JACKSON-CHASE GENERAL COUNSEL	(i)	238,537.	0.	0.	9,440.	8,818.	256,795.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(9) ROBYN DIETZ DIRECTOR TALENT MANAGEMENT	(i)	221,887.	0.	0.	11,407.	22,619.	255,913.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(10) ALI TAN (THRU 01/2023) CHIEF OF STAFF	(i)	214,251.	0.	0.	10,973.	22,731.	247,955.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

Supplemental Information on Tax-Exempt Bonds
Complete if the organization answered "Yes" on Form 990, Part IV, line 24a. Provide descriptions,
explanations, and any additional information in Part VI.
Attach to Form 990. Go to www.irs.gov/Form990 for instructions and the latest information.

Name of the organization **THE CHILDREN'S AID SOCIETY** Employer identification number **13-5562191**

Part I Bond Issues											
(a) Issuer name	(b) Issuer EIN	(c) CUSIP #	(d) Date issued	(e) Issue price	(f) Description of purpose	(g) Defeased		(h) On behalf of issuer		(i) Pooled financing	
						Yes	No	Yes	No	Yes	No
A BUILD NYC RESOURCE CORPORATION	45-4040561	12008EKC9	07/23/15	40,696,638.	TO FINANCE 1232 SOUTHERN BLVD		X		X		X
B BUILD NYC RESOURCE CORPORATION	45-4040561	12008EQN9	08/01/19	38,684,456.	TO FINANCE 117 W 124TH STREET		X		X		X
C											
D											

Part II Proceeds										
	A		B		C		D			
1 Amount of bonds retired	4,165,000.		265,000.							
2 Amount of bonds legally defeased										
3 Total proceeds of issue	40,696,638.		38,684,456.							
4 Gross proceeds in reserve funds	93,663.									
5 Capitalized interest from proceeds	3,817,291.		447,300.							
6 Proceeds in refunding escrows										
7 Issuance costs from proceeds	667,249.		734,456.							
8 Credit enhancement from proceeds										
9 Working capital expenditures from proceeds										
10 Capital expenditures from proceeds	36,118,435.		37,950,000.							
11 Other spent proceeds										
12 Other unspent proceeds										
13 Year of substantial completion	2018		2020							
	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
14 Were the bonds issued as part of a refunding issue of tax-exempt bonds (or, if issued prior to 2018, a current refunding issue)?		X		X						
15 Were the bonds issued as part of a refunding issue of taxable bonds (or, if issued prior to 2018, an advance refunding issue)?		X		X						
16 Has the final allocation of proceeds been made?	X		X							
17 Does the organization maintain adequate books and records to support the final allocation of proceeds?	X		X							

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

Part III Private Business Use

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
1 Was the organization a partner in a partnership, or a member of an LLC, which owned property financed by tax-exempt bonds?		X		X				
2 Are there any lease arrangements that may result in private business use of bond-financed property?		X		X				
3a Are there any management or service contracts that may result in private business use of bond-financed property?		X		X				
b If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts relating to the financed property?								
c Are there any research agreements that may result in private business use of bond-financed property?		X		X				
d If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside counsel to review any research agreements relating to the financed property? ...								
4 Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government		%		%		%		%
5 Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 501(c)(3) organization, or a state or local government		%		%		%		%
6 Total of lines 4 and 5		%		%		%		%
7 Does the bond issue meet the private security or payment test?		X		X				
8a Has there been a sale or disposition of any of the bond-financed property to a non-governmental person other than a 501(c)(3) organization since the bonds were issued?		X		X				
b If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed of		%		%		%		%
c If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections 1.141-12 and 1.145-2?								
9 Has the organization established written procedures to ensure that all nonqualified bonds of the issue are remediated in accordance with the requirements under Regulations sections 1.141-12 and 1.145-2?	X		X					

Part IV Arbitrage

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
1 Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate?		X		X				
2 If "No" to line 1, did the following apply?								
a Rebate not due yet?		X		X				
b Exception to rebate?		X		X				
c No rebate due?	X		X					
If "Yes" to line 2c, provide in Part VI the date the rebate computation was performed								
3 Is the bond issue a variable rate issue?		X		X				

Part IV Arbitrage (continued)	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
4a Has the organization or the governmental issuer entered into a qualified hedge with respect to the bond issue?		X		X				
b Name of provider								
c Term of hedge								
d Was the hedge superintegrated?								
e Was the hedge terminated?								
5a Were gross proceeds invested in a guaranteed investment contract (GIC)?		X		X				
b Name of provider								
c Term of GIC								
d Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?								
6 Were any gross proceeds invested beyond an available temporary period?		X		X				
7 Has the organization established written procedures to monitor the requirements of section 148?	X		X					

Part V Procedures To Undertake Corrective Action	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
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 isn't available under applicable regulations?	X		X					

Part VI Supplemental Information. Provide additional information for responses to questions on Schedule K. See instructions.

SCHEDULE K, PART IV, LINE 2C FOR BOND A
 THE CHILDREN'S AID SOCIETY COMMISSIONED AN ARBITRAGE REBATE CALCULATION ON ITS SERIES 2015 BUILD NYC RESOURCE CORPORATION TAX-EXEMPT REVENUE BOND IN JULY OF 2020. THE REBATE REPORT CONFIRMED THAT THE BOND ISSUANCE HAS NO EXCESS EARNINGS AND THAT NO ARBITRAGE REBATE IS DUE ON THE SERIES 2015 BOND.

SCHEDULE K, PART IV, LINE 2C FOR BOND B
 THE CHILDREN'S AID SOCIETY COMMISSIONED AN ARBITRAGE REBATE CALCULATION ON ITS SERIES 2019 BUILD NYC RESOURCE CORPORATION TAX-EXEMPT REVENUE BOND IN DECEMBER OF 2021. THE REBATE REPORT CONFIRMED THAT THE BOND ISSUANCE HAS NO EXCESS EARNINGS AND THAT NO ARBITRAGE REBATE IS DUE ON THE SERIES 2019 BOND.

**SCHEDULE M
(Form 990)**

Noncash Contributions

OMB No. 1545-0047

2022

**Open to Public
Inspection**

Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.
Attach to Form 990.

Go to www.irs.gov/Form990 for instructions and the latest information.

Department of the Treasury
Internal Revenue Service

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	15	502,304.	MARKET VALUE
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	X	6,940	410,822.	MARKET VALUE
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 V, Donee Acknowledgement **29**

	Yes	No
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least 3 years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period?		X
b If "Yes," describe the arrangement in Part II.		
31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?	X	
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?	X	
b If "Yes," describe in Part II.		
33 If the organization didn't 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. 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.

SCHEDULE M, LINE 32B:

CHILDREN'S AID 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 CHILDREN'S AID'S PUBLIC

WEBSITE. BNY MELLON, UNDER THE INSTRUCTION OF CHILDREN'S AID, WILL SELL

THE SHARES UPON RECEIVING THE STOCK TRANSFER. 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)**

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on
Form 990 or 990-EZ or to provide any additional information.
Attach to Form 990 or Form 990-EZ.
Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2022

Open to Public
Inspection

Name of the organization

THE CHILDREN'S AID SOCIETY

Employer identification number

13-5562191

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

CONTINUATION OF ORGANIZATION'S MISSION:

WE BELIEVE ALL CHILDREN HAVE LIMITLESS POTENTIAL. BUT FOR THOSE GROWING

UP SURROUNDED BY POVERTY, FAMILY INSTABILITY, AND PHYSICAL OR EMOTIONAL

STRESS, LIFE IS TOO OFTEN ABOUT SURVIVAL, NOT POSSIBILITY. IT'S

UNACCEPTABLE THAT IN NEW YORK, A CITY OF HISTORIC OPPORTUNITY, SO MANY

OF OUR CHILDREN FACE SERIOUS BARRIERS TO REALIZING THEIR OWN PROMISE.

CHILDREN'S AID IS A PROFESSIONAL POWERHOUSE OF SOLUTIONS FOR YOUNG

PEOPLE. WE ARE TEACHERS AND SOCIAL WORKERS, COACHES AND HEALTH CARE

PROVIDERS. WE KNOW WHAT IT TAKES TO ENSURE CHILDREN GROW UP STRONG AND

HEALTHY, AND READY TO THRIVE IN SCHOOL AND LIFE: EXCELLENT EDUCATION

AND HEALTH CARE, SOCIAL-EMOTIONAL SUPPORT, AND STRONG, STABLE FAMILIES.

FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS:

CHILD WELFARE AND FAMILY SERVICES (CONTINUED)

CWFS IS THE HOME FOR OUR PREVENTIVE PROGRAMS, FOSTER CARE SERVICES, AND

HOMEMAKER SERVICES, IN ADDITION TO OUR DOMESTIC VIOLENCE PREVENTION

PROGRAMS, SERVICES FOR DISCONNECTED YOUTH, AND OUR OFFICE OF CLIENT

ADVOCACY. THE OFFICE OF CLIENT ADVOCACY HELPS STABILIZE LOW-INCOME

FAMILIES THROUGH LEGAL ADVOCACY AND EMERGENCY MATERIAL ASSISTANCE. THE

NEXT GENERATION CENTER SUPPORTS TEENS AND YOUNG ADULTS, PARTICULARLY

THOSE AGING OUT OF FOSTER CARE, IN THEIR TRANSITION TO ADULTHOOD.

EXAMPLES OF OUR SUCCESS INCLUDE THAT 99% OF 708 FAMILIES WHO RECEIVED

ONE OF OUR FAMILY CRISIS INTERVENTIONS AVOIDED FOSTER CARE PLACEMENTS

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

Schedule O (Form 990) 2022

232211 10-28-22

Name of the organization THE CHILDREN'S AID SOCIETY	Employer identification number 13-5562191
--	--

IN FISCAL YEAR 2023. FURTHER, 207 CHILDREN WERE PERMANENTLY REUNIFIED WITH THEIR BIRTH PARENTS OR MOVED INTO PERMANENT FOSTER, KINSHIP FOSTER, AND ADOPTIVE HOMES. WE SERVED 879 CHILDREN AND YOUTH IN OUR FOSTER CARE PROGRAM, 2,405 IN OUR PREVENTATIVE PROGRAM AND 169 IN OUR HOMEMAKER PROGRAM.

FORM 990, PART III, LINE 4B, PROGRAM SERVICE ACCOMPLISHMENTS:

YOUTH (CONTINUED)

CORE SERVICES INCLUDE OUT-OF-SCHOOL TIME PROGRAMS IN CHILDREN'S AID COMMUNITY CENTERS AND SCHOOLS, SUMMER CAMPS, ATHLETIC PROGRAMMING, AND THROUGH THE NATIONAL CENTER FOR COMMUNITY SCHOOLS, WHICH PROVIDES TECHNICAL ASSISTANCE TO DEVELOP THE COMMUNITY SCHOOL MODEL NATIONALLY AND INTERNATIONALLY. WE PROVIDED 19,900 EXTENDED LEARNING SERVICES TO 3,995 CHILDREN AND YOUTH IN THE PAST FISCAL YEAR.

OUR OLDER YOUTH SERVICES INCLUDE THE CARRERA-ADOLESCENT PREGNANCY PREVENTION PROGRAM, WHICH MEETS THE TOP-TIER EVIDENCE OF EFFECTIVENESS STANDARDS BY THE COALITION FOR EVIDENCE-BASED POLICY. SERVICES ALSO INCLUDE THE COLLEGE AND CAREER ACCESS AND SUCCESS PROGRAM PROVIDING ASSISTANCE TO HELP YOUNG PEOPLE MAKE POST-SECONDARY PATHWAYS (COLLEGE AND/OR CAREER) ATTAINABLE, THE HOPE LEADERSHIP ACADEMY, WHICH PROVIDES WRAP-AROUND SUPPORTS AND DEVELOPS LEADERSHIP THROUGH A PEER EDUCATION MODEL, AND TEEN EMPLOYMENT SERVICES, SUCH AS SUMMER YOUTH EMPLOYMENT PROGRAM AND CORPORATE INTERNSHIPS. 3,409 YOUTH RECEIVED JOB TRAINING AND INTERNSHIP EXPERIENCES IN THE YEAR. WE PROVIDE OUR SCHOLARS WITH COLLEGE PREPARATION AND POST-SECONDARY SUPPORT. PARENTS AND CAREGIVERS ARE ENGAGED EVERY STEP OF THE WAY BECAUSE WE KNOW THEY ARE KEY TO A STUDENT'S SUCCESS. 93% OF THE 670 YOUTH IN OUR TARGETED PROGRAMS WHO

Name of the organization THE CHILDREN'S AID SOCIETY	Employer identification number 13-5562191
--	--

APPLIED TO COLLEGE WERE ACCEPTED TO AT LEAST ONE SCHOOL. WE PROVIDED

1,540 YOUTH WITH 4,325 COLLEGE AND CAREER PREPARATION SERVICES.

WE SUPPORT YOUTH THROUGH PROGRAMS AT 20 COMMUNITY SCHOOLS, FIVE

COMMUNITY CENTERS, OUR WAGON ROAD RESPITE CAMP IN CHAPPAQUA, NEW YORK

AND A RANGE OF COLLEGE AND CAREER SERVICES FOR YOUTH AGED 18 TO 22. THE

YOUTH DIVISION ALSO PROVIDES MANAGEMENT AND TECHNICAL SUPPORT TO THE

CHILDREN'S AID COLLEGE PREP CHARTER SCHOOL, A K-8 CHARTER SCHOOL WITH

APPROXIMATELY 600 ENROLLED SCHOLARS.

FORM 990, PART III, LINE 4C, PROGRAM SERVICE ACCOMPLISHMENTS:

HEALTH AND WELLNESS (CONTINUED)

WHEN MEDICAL CARE IS CONVENIENT AND ACCESSIBLE, MORE CHILDREN LIVE

HEALTHIER LIVES. CHILDREN'S AID PROVIDES MEDICAL, REPRODUCTIVE, MENTAL

HEALTH, DENTAL, AND HEALTH EDUCATION SERVICES IN SIX SCHOOL-BASED AND

TWO COMMUNITY-BASED HEALTH CENTERS. OUR SCHOOL-BASED CLINICS TREATED

3,464 PATIENTS ACROSS 19,694 VISITS AND OUR COMMUNITY CENTER CLINICS

TREATED 3,480 PATIENTS ACROSS 31,944 VISITS IN THE PAST FISCAL YEAR.

HEALTH SERVICES ARE TAILORED TO MEET THE SPECIAL NEEDS OF CHILDREN AND

ADOLESCENTS, AND THE DIVISION SPECIALIZES IN PROVIDING HEALTH CARE TO

CHILDREN IN FOSTER CARE.

AN EXAMPLE OF THE DIVISION'S SPECIFIC IMPACT IS THAT 93% OF 625

CHILDREN AGES 3-7 RECEIVING MEDICAL CARE IN OUR COMMUNITY HEALTH

CENTERS HAD A WELL-CHILD VISIT. BEHAVIORAL AND MENTAL HEALTH GREW

SUBSTANTIALLY IN 2023 WITH 1,282 PATIENTS RECEIVING 24,243 BEHAVIORAL

HEALTH VISITS. WE SAW 2,146 PATIENTS FOR 4,209 DENTAL ENCOUNTERS. OUR

FOOD AND NUTRITION PROGRAMS SERVED 2,243 CHILDREN AND 2,595 ADULTS.

Name of the organization THE CHILDREN'S AID SOCIETY	Employer identification number 13-5562191
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FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:

EARLY CHILDHOOD

THE EARLY CHILDHOOD DIVISION PREPARES YOUNG CHILDREN (AGES 0 TO 5) FOR SCHOOL SUCCESS BY WORKING WITH FAMILIES TO ADVANCE CHILDREN'S PHYSICAL, SOCIAL, EMOTIONAL, AND COGNITIVE DEVELOPMENT AND TO INSTILL IN THEM A LIFELONG LOVE OF LEARNING. CORE SERVICES INCLUDE HOME-BASED AND CENTER-BASED PROGRAMS THAT FEATURE RESEARCH-BASED CURRICULA, LOW CHILD-TO-TEACHER RATIOS, AND STRONG PARENT ENGAGEMENT.

OUR EARLY CHILDHOOD DIVISION HAS 10 EARLY CHILDHOOD SITES SERVING 710 CHILDREN. 72% OF THEM RECEIVED FOOD SUPPORT, ALL RECEIVED A FLU SHOT, AND 94% RECEIVED VISION SCREENINGS. AN EXAMPLE OF OUR IMPACT IS THAT 83% OF CHILDREN IN OUR EARLY CHILDHOOD PROGRAM MET OR EXCEEDED THE COGNITION SCHOOL READINESS GOAL BY THE END OF THE SCHOOL YEAR. 96% MET OR EXCEEDED THE MOTOR SKILLS AND PHYSICAL SCHOOL READINESS GOAL. EXPENSES \$ 14,568,000. INCL GRANTS OF \$ 57,118. REVENUE \$ 13,840,505.

COLLECTIVE IMPACT & THE NATIONAL CENTER FOR COMMUNITY SCHOOLS THE 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. SERVICES ARE TARGETED TO INDIVIDUAL SCHOOLS, SCHOOL BOARD AND DISTRICT ADMINISTRATORS, FUNDERS, EDUCATION REFORM LEADERS, COMMUNITY ORGANIZATIONS, AND OTHERS THROUGH FACILITATED PLANNING, CONSULTATION, WORKSHOPS AND ONGOING SUPPORT.

SINCE 1994, THE NATIONAL CENTER HAS PROVIDED TECHNICAL ASSISTANCE TO

Name of the organization THE CHILDREN'S AID SOCIETY	Employer identification number 13-5562191
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MANY OF THE NATIONAL AND INTERNATIONAL COMMUNITY SCHOOL INITIATIVES.
 VIA CUSTOMIZED TRAINING, CONSULTATION, FACILITATION, PUBLICATIONS, AND
 ADVOCACY, WE HELP BUILD THE CAPACITY OF SCHOOLS, DISTRICTS, COMMUNITY
 PARTNERS, AND GOVERNMENT AGENCIES TO ORGANIZE THEIR HUMAN AND FINANCIAL
 RESOURCES AROUND STUDENT SUCCESS.
 EXPENSES \$ 2,530,000. INCLUDING GRANTS OF \$ 151,104. REVENUE \$ 525,054.

FORM 990, PART VI, SECTION A, LINE 1A:

THE EXECUTIVE COMMITTEE'S PRINCIPAL ROLE IS TO ACT FOR THE BOARD WHEN THE
 BOARD ITSELF IS UNABLE TO ACT. THIS COMMITTEE SHALL ALSO NOMINATE THE CHAIR
 OF THE GOVERNANCE & NOMINATING COMMITTEE AND MAKE RECOMMENDATIONS TO THE
 BOARD AS TO EXECUTIVE COMPENSATION OF THE PRESIDENT AND CHIEF EXECUTIVE
 OFFICER.

THE EXECUTIVE COMMITTEE SHALL CONSIST OF ALL OFFICERS OF THE BOARD, THE
 CHAIR OF THE GOVERNANCE & NOMINATING COMMITTEE, AND THREE (3) TO FIVE (5)
 OTHER TRUSTEES ("AT LARGE MEMBERS"). THE EXECUTIVE COMMITTEE SHALL BE
 CHAIRED BY THE CHAIR OF THE BOARD.

THE EXECUTIVE COMMITTEE SHALL HAVE AND MAY EXERCISE ALL OF THE POWERS OF
 THE BOARD BETWEEN REGULAR OR SPECIAL MEETINGS OF THE BOARD; EXCEPT THAT THE
 EXECUTIVE COMMITTEE SHALL NOT HAVE THE POWER TO:

- I. APPOINT OR ENTER INTO A CONTRACTUAL AGREEMENT REGARDING A NEWLY
 APPOINTED PRESIDENT AND CHIEF EXECUTIVE OFFICER WITHOUT APPROVAL BY A
 MAJORITY OF THE BOARD;
- II. FILL ANY VACANCIES ON THE BOARD OR ANY COMMITTEE;
- III. AMEND, REPEAL OR ADOPT BYLAWS;
- IV. AMEND OR REPEAL ANY RESOLUTION OF THE BOARD OF TRUSTEES WHICH IS NOT BY

Name of the organization THE CHILDREN'S AID SOCIETY	Employer identification number 13-5562191
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ITS TERMS SO AMENDABLE OR REPEALABLE;

V. MAKE DECISIONS REGARDING THE PURCHASE, LEASING OR OTHER DISPOSITION OF REAL ESTATE, IF SUCH PURCHASE, LEASE OR DISPOSITION INVOLVES ALL OR SUBSTANTIALLY ALL OF THE CORPORATION'S ASSETS;

VI. MAKE DECISIONS REGARDING THE FIXING OF COMPENSATION, IF ANY, OF TRUSTEES;

VII. ELECT OR REMOVE OFFICERS OR TRUSTEES;

VIII. APPROVE A MERGER, ACQUISITION, OR PLAN OF DISSOLUTION; OR

IX. APPROVE AMENDMENTS TO THE CERTIFICATE OF INCORPORATION.

IN ADDITION, THE EXECUTIVE COMMITTEE SHALL (OR SHALL APPOINT AN APPROPRIATELY COMPOSED WORKING GROUP OF NON-INTERESTED TRUSTEES TO) BE RESPONSIBLE FOR: RATIFYING THE COMPENSATION OF THE CHIEF FINANCIAL OFFICER UPON THE RECOMMENDATION OF THE PRESIDENT AND CEO; RECOMMENDING POLICIES AND PROCEDURES FOR DETERMINING EXECUTIVE COMPENSATION FOR THE PRESIDENT AND CHIEF EXECUTIVE OFFICER AND FOR SUCCESSION PLANNING; RETAINING COMPENSATION CONSULTANTS; CONDUCTING DUE DILIGENCE REGARDING EXECUTIVE COMPENSATION FOR THE PRESIDENT AND CHIEF EXECUTIVE OFFICER; AND ANNUALLY MAKING RECOMMENDATIONS AS TO EXECUTIVE COMPENSATION FOR THE PRESIDENT AND CHIEF EXECUTIVE OFFICER TO THE BOARD. THE PRESIDENT AND CHIEF EXECUTIVE OFFICER MAY NOT BE PRESENT AT NOR PARTICIPATE IN DELIBERATIONS OR VOTES REGARDING HIS OR HER COMPENSATION.

FORM 990, PART VI, SECTION A, LINE 8A:

THE DISCUSSIONS AND ACTIONS THAT OCCUR DURING BOARD AND BOARD COMMITTEE MEETINGS ARE DOCUMENTED CONTEMPORANEOUSLY AND THE OFFICIAL MINUTES OF THOSE MEETINGS ARE APPROVED AT THE NEXT REGULAR BOARD OR BOARD COMMITTEE MEETING WHERE QUORUM IS PRESENT.

Name of the organization THE CHILDREN'S AID SOCIETY	Employer identification number 13-5562191
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FORM 990, PART VI, SECTION B, LINE 11B:

THE FORM 990 WAS PREPARED BY A NATIONALLY RECOGNIZED ACCOUNTING FIRM IN CONJUNCTION WITH THE ORGANIZATION'S MANAGEMENT. A COPY OF THE DRAFT FORM 990 WAS PRESENTED TO THE AUDIT AND RISK MANAGEMENT COMMITTEE FOR DISCUSSION AND COMMENT. ONCE APPROVED A COPY IS THEN CIRCULATED TO THE FULL BOARD. EACH BOARD MEMBER IS PROVIDED OPPORTUNITY TO COMMENT ON THE INFORMATION CONTAINED IN THE FORM 990 PRIOR TO ITS FILING WITH THE INTERNAL REVENUE SERVICE.

FORM 990, PART VI, SECTION B, LINE 12C:

THE CHILDREN'S AID 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 CHILDREN'S AID 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 AUDIT AND RISK MANAGEMENT COMMITTEE OF THE BOARD OF TRUSTEES. THE AUDIT AND RISK MANAGEMENT COMMITTEE DETERMINES WHETHER A CONFLICT OF INTEREST EXISTS AND EVALUATES CONFLICT OF INTEREST TRANSACTIONS. THE AUDIT AND RISK MANAGEMENT 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. THE CHILDREN'S AID PRACTICE IS TO DIRECT ANY TRUSTEES TO RECUSE FROM REVIEWING, ADVISING ON OR VOTING ON ANY MATTERS IN WHICH THEY MIGHT HAVE SUCH AN INTEREST.

FORM 990, PART VI, SECTION B, LINE 15:

Name of the organization THE CHILDREN'S AID SOCIETY	Employer identification number 13-5562191
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THE EXECUTIVE COMMITTEE OF THE BOARD OF TRUSTEES REVIEWS ON A PERIODIC BASIS THE RECOMMENDATIONS OF THE EXECUTIVE COMPENSATION WORKING GROUP FOR THE REMUNERATION OF THE CHILDREN'S AID PRESIDENT AND CEO. THE REVIEW IS BASED ON CEO COMPENSATION AND BENEFITS BENCHMARKING DATA FROM SCHEDULE J, PART II OF THE IRS 990 OF CHILDREN'S AID AND PEER ORGANIZATIONS.

ORGANIZATIONS USED FOR THE BENCHMARKING ANALYSIS ARE FUNCTIONALLY COMPARABLE NONPROFITS, LOCATED IN NEW YORK CITY OR THE GREATER NYC METRO AREA, WITH SIMILAR BUDGET SIZE, AND IN A SIMILAR OR THE SAME SUB-SECTOR.

THE EXECUTIVE COMMITTEE PRESENTS ITS RECOMMENDATION ON THE CEO COMPENSATION PACKAGE FOR APPROVAL BY THE BOARD OF TRUSTEES AT THE DECEMBER BOARD MEETING. THE EXECUTIVE COMMITTEE RATIFIES THE REMUNERATION OF THE CHIEF FINANCIAL OFFICER BASED ON CFO COMPENSATION AND BENEFITS BENCHMARKING DATA FROM THE IRS 990S OF PEER ORGANIZATIONS. EVERY FEW YEARS, AN OUTSIDE ADVISOR CONDUCTS A COMPENSATION BENCHMARKING STUDY FOR THE CEO AND SENIOR LEADERSHIP. THE LAST COMPENSATION SURVEY WAS CONDUCTED IN NOVEMBER OF 2021.

FORM 990, PART VI, SECTION C, LINE 19:

CHILDREN'S AID SOCIETY MAKES ITS FORM 990, ANNUAL FINANCIAL STATEMENTS, ANNUAL REPORT AND MISSION STATEMENT AVAILABLE ON ITS WEBSITE AT WWW.CHILDRENSAIDNYC.ORG. THE SOCIETY'S ORGANIZING DOCUMENTS AND CONFLICT OF INTEREST POLICY ARE AVAILABLE UPON REQUEST AND AT MANAGEMENT'S DISCRETION.

FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:

PENSION-RELATED ACTIVITY	10,194,000.
CHANGE IN VALUE OF SPLIT-INTEREST AGREEMENTS	-55,000.
TOTAL TO FORM 990, PART XI, LINE 9	10,139,000.

FORM 990, PART XII, LINE 2C:

Name of the organization THE CHILDREN'S AID SOCIETY	Employer identification number 13-5562191
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THE ORGANIZATION HAS AN AUDIT AND RISK MANAGEMENT COMMITTEE THAT
 ASSUMES RESPONSIBILITY FOR OVERSIGHT OF THE AUDIT OF ITS FINANCIAL
 STATEMENTS AND THE SELECTION OF AN INDEPENDENT ACCOUNTANT.

**SCHEDULE R
(Form 990)**

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships
Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.
Attach to Form 990.

Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2022

Open to Public Inspection

Name of the organization **THE CHILDREN'S AID SOCIETY** Employer identification number **13-5562191**

Part I Identification of Disregarded Entities. Complete if the organization answered "Yes" on 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
910 EAST 172ND STREET LLC - 27-1491886 117 W 124TH STREET NEW YORK, NY 10027	REAL ESTATE	NEW YORK	1,392,000.	9,370,000.	CHILDREN'S AID SOCIETY
1218 SOUTHERN BLVD LLC - 46-5337940 117 W 124TH STREET NEW YORK, NY 10027	REAL ESTATE	NEW YORK	0.	1,750,000.	CHILDREN'S AID SOCIETY
1232 SOUTHERN BLVD LLC - 46-5333550 117 W 124TH STREET NEW YORK, NY 10027	REAL ESTATE	NEW YORK	2,136,000.	43,412,000.	CHILDREN'S AID SOCIETY

Part II Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on 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

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

Schedule R (Form 990) 2022

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

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

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?	
								Yes	No

Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on 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
1a		
1b		
1c		
1d		
1e		
1f		
1g		
1h		
1i		
1j		
1k		
1l		
1m		
1n		
1o		
1p		
1q		
1r		
1s		

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 related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				

Part VI Unrelated Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on 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 sections 512-514)	(e) <small>Are all partners sec. 501(c)(3) orgs.?</small>		(f) Share of total income	(g) Share of end-of-year assets	(h) <small>Dispropor- tionate allocations?</small>		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) <small>General or managing partner?</small>		(k) Percentage ownership
				Yes	No			Yes	No		Yes	No	

