Form **990**

Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

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

▶ 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.

OMB No. 1545-0047

2017

Open to Public Inspection

A For the 2017 calendar year, or tax year beginning 07/01, 2017, and ending 06/30, 20 18

B Check if applicable:
- ☐ Address change
- ☐ Name change
- ☐ Initial return
- ☐ Final return/ terminated
- ☐ Amended return
- ☐ Application pending

C Name of organization: THE CHILDREN'S AID SOCIETY

Doing business as:

Number and street (or P.O. box if mail is not delivered to street address): 711 THIRD AVENUE

Room/suite:

City or town, state or province, country, and ZIP or foreign postal code: NEW YORK, NY 10017

D Employer identification number: 13-5562191

E Telephone number: (212) 949-4800

G Gross receipts $ 378,720,435.

F Name and address of principal officer: PHOEBE BOYER
711 THIRD AVENUE NEW YORK, NY 10017

H(a) Is this a group return for subordinates? ☐ Yes ☒ No

H(b) Are all subordinates included? ☐ Yes ☐ No

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

H(c) Group exemption number ▶

I Tax-exempt status: ☒ 501(c)(3) ☐ 501(c) ( ) ◀ (insert no.) ☐ 4947(a)(1) or ☐ 527

J Website: ▶ WWW.CHILDRENSAIDNYC.ORG

K Form of organization: ☒ Corporation ☐ Trust ☐ Association ☐ Other ▶

L Year of formation: 1855 M State of legal domicile: NY

Part I Summary

1 Briefly describe the organization's mission or most significant activities: CHILDREN'S AID HELPS CHILDREN IN POVERTY TO SUCCEED AND THRIVE. WE DO THIS BY PROVIDING COMPREHENSIVE SUPPORT TO CHILDREN AND THEIR FAMILIES IN TARGETED, NYC NEIGHBORHOODS.

2 Check this box ▶ ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets.

Activities & Governance	3 Number of voting members of the governing body (Part VI, line 1a)	3	23.
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	23.
	5 Total number of individuals employed in calendar year 2017 (Part V, line 2a)	5	2,626.
	6 Total number of volunteers (estimate if necessary)	6	750.
	7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	504,032.
	b Net unrelated business taxable income from Form 990-T, line 34	7b	307,606.

		Prior Year	Current Year
Revenue	8 Contributions and grants (Part VIII, line 1h)	23,080,291.	23,200,340.
	9 Program service revenue (Part VIII, line 2g)	83,382,167.	92,042,000.
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	26,665,287.	13,528,000.
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	1,279,303.	1,902,223.
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	134,407,048.	130,672,563.
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	3,068,554.	2,393,057.
	14 Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	88,171,254.	91,376,625.
	16a Professional fundraising fees (Part IX, column (A), line 11e)	45,000.	115,500.
	b Total fundraising expenses (Part IX, column (D), line 25) ▶ 2,797,128.		
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	39,404,011.	43,535,381.
	18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	130,688,819.	137,420,563.
	19 Revenue less expenses. Subtract line 18 from line 12	3,718,229.	-6,748,000.

		Beginning of Current Year	End of Year
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	420,269,400.	424,446,000.
	21 Total liabilities (Part X, line 26)	127,995,300.	118,558,000.
	22 Net assets or fund balances. Subtract line 21 from line 20	292,274,100.	305,888,000.

Part II Signature Block

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

Sign Here

▶ Signature of officer — Date: 5-13-2019

▶ SARAH GILLMAN CFO
Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name	Preparer's signature	Date	Check ☐ if self-employed	PTIN
SCOTT THOMPSETT	Scott Thompsett	05/13/19		P00741490

Firm's name ▶ GRANT THORNTON LLP — Firm's EIN ▶ 36-6055558

Firm's address ▶ 757 THIRD AVENUE, 4TH FLOOR NEW YORK, NY 10017-2013 — Phone no. 212-599-0100

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

For Paperwork Reduction Act Notice, see the separate instructions. Form **990** (2017)

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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 SUPPORT 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 ☒ No
If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? . . . . . ☐ Yes ☒ No
If "Yes," describe these changes on Schedule O.

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses $ 42,476,763. including grants of $ 1,187,525.) (Revenue $ 45,228,340.)
CHILD WELFARE AND FAMILY SERVICES
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 $ 23,488,062. including grants of $ 644,154.) (Revenue $ 13,502,927.)
SCHOOL AGE
THE SCHOOL AGE DIVISION FOCUSES ON AGES 5 - 13 (KINDERGARTEN THROUGH 8TH GRADE), AND PROMOTES PHYSICAL, SOCIAL AND EMOTIONAL WELL-BEING AS KEY FACTORS FOR HIGH SCHOOL GRADUATION AND COLLEGE SUCCESS. SCHOOL AGE PROGRAMS OPERATE IN CHILDREN'S AID LOCATIONS AND IN FULL-SERVICE COMMUNITY SCHOOL PARTNERSHIPS, AND ENGAGE CHILDREN, FAMILIES, SCHOOLS AND COMMUNITIES THROUGH AN INTEGRATED FOCUS ON ACADEMICS, SERVICES, SUPPORTS, AND OPPORTUNITIES.
(CONTINUED ON SCHEDULE O)

4c (Code:) (Expenses $ 17,203,599. including grants of $ 51,782.) (Revenue $ 14,325,146.)
EARLY CHILDHOOD
THE EARLY CHILDHOOD DIVISION PREPARES YOUNG CHILDREN (AGES 0-5) 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.

4d Other program services (Describe in Schedule O.) ATTACHMENT 1
(Expenses $ 25,844,117. including grants of $ 550,547.) (Revenue $ 18,985,587.)

4e Total program service expenses ▶ 109,012,541.

Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? *If "Yes," complete Schedule A*	1	X	
2	Is the organization required to complete *Schedule B, Schedule of Contributors* (see instructions)?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? *If "Yes," complete Schedule C, Part I*	3		X
4	**Section 501(c)(3) organizations.** Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? *If "Yes," complete Schedule C, Part II*	4	X	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? *If "Yes," complete Schedule C, Part III*	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? *If "Yes," complete Schedule D, Part I*	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? *If "Yes," complete Schedule D, Part II*	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? *If "Yes," complete Schedule D, Part III*	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? *If "Yes," complete Schedule D, Part IV*	9		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? *If "Yes," complete Schedule D, Part V*	10	X	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.			
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? *If "Yes," complete Schedule D, Part VI*	11a	X	
b	Did the organization report an amount for investments-other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part VII*	11b	X	
c	Did the organization report an amount for investments-program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part VIII*	11c		X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part IX*	11d		X
e	Did the organization report an amount for other liabilities in Part X, line 25? *If "Yes," complete Schedule D, Part X*	11e	X	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? *If "Yes," complete Schedule D, Part X*	11f	X	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? *If "Yes," complete Schedule D, Parts XI and XII*	12a		X
b	Was the organization included in consolidated, independent audited financial statements for the tax year? *If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional*	12b	X	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? *If "Yes," complete Schedule E*	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than $10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at $100,000 or more? *If "Yes," complete Schedule F, Parts I and IV*	14b	X	
15	Did the organization report on Part IX, column (A), line 3, more than $5,000 of grants or other assistance to or for any foreign organization? *If "Yes," complete Schedule F, Parts II and IV*	15		X
16	Did the organization report on Part IX, column (A), line 3, more than $5,000 of aggregate grants or other assistance to or for foreign individuals? *If "Yes," complete Schedule F, Parts III and IV*	16		X
17	Did the organization report a total of more than $15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? *If "Yes," complete Schedule G, Part I* (see instructions)	17	X	
18	Did the organization report more than $15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? *If "Yes," complete Schedule G, Part II*	18	X	
19	Did the organization report more than $15,000 of gross income from gaming activities on Part VIII, line 9a? *If "Yes," complete Schedule G, Part III*	19		X

Part IV Checklist of Required Schedules *(continued)*

			Yes	No
20a	Did the organization operate one or more hospital facilities? *If "Yes," complete Schedule H*	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than $5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? *If "Yes," complete Schedule I, Parts I and II*	21	X	
22	Did the organization report more than $5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? *If "Yes," complete Schedule I, Parts I and III*	22	X	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? *If "Yes," complete Schedule J*	23	X	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than $100,000 as of the last day of the year, that was issued after December 31, 2002? *If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a*	24a	X	
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		X
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		X
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		X
25a	**Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.** Did the organization engage in an excess benefit transaction with a disqualified person during the year? *If "Yes," complete Schedule L, Part I*	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? *If "Yes," complete Schedule L, Part I*	25b		X
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? *If "Yes," complete Schedule L, Part II*	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? *If "Yes," complete Schedule L, Part III*	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
a	A current or former officer, director, trustee, or key employee? *If "Yes," complete Schedule L, Part IV*	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? *If "Yes," complete Schedule L, Part IV*	28b		X
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? *If "Yes," complete Schedule L, Part IV*	28c		X
29	Did the organization receive more than $25,000 in non-cash contributions? *If "Yes," complete Schedule M*	29	X	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? *If "Yes," complete Schedule M*	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? *If "Yes," complete Schedule N, Part I*	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? *If "Yes," complete Schedule N, Part II*	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? *If "Yes," complete Schedule R, Part I*	33	X	
34	Was the organization related to any tax-exempt or taxable entity? *If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1*	34	X	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? *If "Yes," complete Schedule R, Part V, line 2*	35b		
36	**Section 501(c)(3) organizations.** Did the organization make any transfers to an exempt non-charitable related organization? *If "Yes," complete Schedule R, Part V, line 2*	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? *If "Yes," complete Schedule R, Part VI*	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? **Note.** All Form 990 filers are required to complete Schedule O.	38	X	

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 . . . . . ☐

				Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a	382		
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	0.		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?			1c	X	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return. .	2a	2,626		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?			2b	X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to *e-file* (see instructions)					
3a	Did the organization have unrelated business gross income of $1,000 or more during the year?			3a	X	
b	If "Yes," has it filed a Form 990-T for this year? *If "No" to line 3b, provide an explanation in Schedule O*			3b	X	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?			4a		X
b	If "Yes," enter the name of the foreign country: ▶ _____					
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).					
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?			5b		X
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?			5c		
6a	Does the organization have annual gross receipts that are normally greater than $100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?			6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?			6b		
7	**Organizations that may receive deductible contributions under section 170(c).**					
a	Did the organization receive a payment in excess of $75 made partly as a contribution and partly for goods and services provided to the payor?			7a	X	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b	X	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?			7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d				
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?			7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?			7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?			7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? . .			7h		
8	**Sponsoring organizations maintaining donor advised funds.** Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?			8		
9	**Sponsoring organizations maintaining donor advised funds.**					
a	Did the sponsoring organization make any taxable distributions under section 4966?			9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?			9b		
10	**Section 501(c)(7) organizations.** Enter:					
a	Initiation fees and capital contributions included on Part VIII, line 12	10a				
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b				
11	**Section 501(c)(12) organizations.** Enter:					
a	Gross income from members or shareholders	11a				
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b				
12a	**Section 4947(a)(1) non-exempt charitable trusts.** Is the organization filing Form 990 in lieu of Form 1041?			12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b				
13	**Section 501(c)(29) qualified nonprofit health insurance issuers.**					
a	Is the organization licensed to issue qualified health plans in more than one state?			13a		
	Note. See the instructions for additional information the organization must report on Schedule O.					
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b				
c	Enter the amount of reserves on hand	13c				
14a	Did the organization receive any payments for indoor tanning services during the tax year?			14a		X
b	If "Yes," has it filed a Form 720 to report these payments? *If "No," provide an explanation in Schedule O*			14b		

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

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

Section A. Governing Body and Management

			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year . . . . . If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.	1a 23		
b	Enter the number of voting members included in line 1a, above, who are independent	1b 23		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person? . .	3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6	Did the organization have members or stockholders?	6	X	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a	X	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
a	The governing body?	8a	X	
b	Each committee with authority to act on behalf of the governing body?	8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? *If "Yes," provide the names and addresses in Schedule O*	9		X

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

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

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed ▶ ATTACHMENT 2

18 Section 6104 requires an organization to make its Forms 1023 (or 1024 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 in Schedule O)*

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

20 State the name, address, and telephone number of the person who possesses the organization's books and records: ▶ SARAH GILLMAN 711 THIRD AVENUE NEW YORK, NY 10017 212-949-4800

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 instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than $100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than $100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than $10,000 of reportable compensation from the organization and any related organizations.

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

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) IRIS ABRONS	5.00									
CHAIR	0.	X		X				0.	0.	0.
(2) RICHARD EDELMAN	5.00									
VICE CHAIR	0.	X		X				0.	0.	0.
(3) AMY ENGEL SCHARF	5.00									
SECRETARY	0.	X		X				0.	0.	0.
(4) RUSSELL DIAMOND	5.00									
TREASURER	0.	X		X				0.	0.	0.
(5) SUSAN S. BROWN	5.00									
TRUSTEE (THRU 5/1/2018)	0.	X						0.	0.	0.
(6) ELLY CHRISTOPHERSEN	5.00									
TRUSTEE	0.	X						0.	0.	0.
(7) JAN S. CORREA	5.00									
TRUSTEE	0.	X						0.	0.	0.
(8) DEBRA FRIEDMAN	5.00									
TRUSTEE (THRU 6/21/2018)	0.	X						0.	0.	0.
(9) RUSSELL W. HORWITZ	5.00									
TRUSTEE	0.	X						0.	0.	0.
(10) ALAN E. KATZ	5.00									
TRUSTEE	0.	X						0.	0.	0.
(11) LANE H. KATZ	5.00									
TRUSTEE (THROUGH 06/30/18)	0.	X						0.	0.	0.
(12) GREGORY KERR, MD	5.00									
TRUSTEE	0.	X						0.	0.	0.
(13) CHRISTOPHER R. LAWRENCE	5.00									
TRUSTEE	0.	X						0.	0.	0.
(14) BETH LEVENTHAL	5.00									
TRUSTEE	0.	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 dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(15) ARI LIBARIKIAN	5.00									
TRUSTEE	0.	X						0.	0.	0.
(16) JANINE E. LUKE	5.00									
TRUSTEE	0.	X						0.	0.	0.
(17) RICK MCNABB	5.00									
TRUSTEE	0.	X						0.	0.	0.
(18) VANESSA MELENDEZ	5.00									
TRUSTEE	0.	X						0.	0.	0.
(19) CHARLES PENNER	5.00									
TRUSTEE	0.	X						0.	0.	0.
(20) EREN ROSENFELD	5.00									
TRUSTEE	0.	X						0.	0.	0.
(21) LAUREN RAZOOK ROTH	5.00									
TRUSTEE	0.	X						0.	0.	0.
(22) TIMOTHY F. RYAN	5.00									
TRUSTEE (THRU 6/21/2018)	0.	X						0.	0.	0.
(23) PETER WALLACE	5.00									
TRUSTEE	0.	X						0.	0.	0.
(24) ANDREA K. WAHLQUIST	5.00									
TRUSTEE	0.	X						0.	0.	0.
(25) SHEILA BAIRD	5.00									
ASSISTANT TREASURER	0.	X		X				0.	0.	0.
1b Sub-total ▶								0.	0.	0.
c Total from continuation sheets to Part VII, Section A ▶								3,478,921.	0.	408,224.
d Total (add lines 1b and 1c) ▶								3,478,921.	0.	408,224.

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 ▶ 77

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

2 Total number of independent contractors (including but not limited to those listed above) who received more than $100,000 in compensation from the organization ▶ 11

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 dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(26) LINDA KAO	5.00									
TRUSTEE	0.	X						0.	0.	0.
(27) PHOEBE BOYER	40.00									
PRESIDENT/CEO	0.			X				433,391.	0.	52,232.
(28) DANIEL LEHMAN	40.00									
CHIEF OPERATING OFFICER	0.			X				257,405.	0.	21,089.
(29) SARAH GILLMAN	40.00									
CHIEF FINANCIAL OFFICER	0.			X				235,889.	0.	22,250.
(30) VALERIE RUSSO	40.00									
VP FOR STRATEGY AND EXCELLENCE	0.				X			153,771.	0.	29,115.
(31) DREMA BROWN	40.00									
VP FOR SCHOOL AGE PROGRAMS	10.00				X			188,301.	0.	28,582.
(32) GEORGIA BOOTHE	40.00									
VP CHILD WELFARE & FAMILY SVCS	0.				X			192,653.	0.	7,102.
(33) ALETHEA PRATT	40.00									
CHIEF INFORMATION OFFICER	0.				X			194,082.	0.	14,941.
(34) JAMES SWEENY	40.00									
ASSISTANT VP REAL ESTATE	0.				X			194,010.	0.	26,792.
(35) MORIA CAPPIO	40.00									
VP EARLY CHILDHOOD PROGRAM	0.				X			177,128.	0.	12,471.
(36) MIRIAM MARTINEZ	40.00									
CHIEF PROGRAM OFFICER	0.				X			251,661.	0.	10,084.
1b Sub-total ▶										
c Total from continuation sheets to Part VII, Section A ▶										
d Total (add lines 1b and 1c) ▶										

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 ▶ 77

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

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

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 dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(37) SANDRA ESCAMILLA	40.00									
VP ADOLESCENCE	0.				X			177,272.	0.	22,316.
(38) JANE QUINN	40.00									
VP FOR COMMUNITY SERVICES	0.					X		251,183.	0.	44,042.
(39) LISA HANDWERKER, M.D.	40.00									
CHIEF MEDICAL OFFICER	0.					X		206,180.	0.	49,756.
(40) ROBYN DIETZ	40.00									
DIRECTOR TALENT MANAGEMENT/HR	0.					X		194,371.	0.	27,935.
(41) COURTENAYE JACKSON-CHASE	40.00									
GENERAL COUNSEL	0.					X		213,124.	0.	24,469.
(42) ANTHONY RAMOS	40.00									
DIR. MARKETING & COMMUNICATION	0.					X		158,500.	0.	15,048.
1b Sub-total ▶										
c Total from continuation sheets to Part VII, Section A ▶										
d Total (add lines 1b and 1c) ▶										

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 ▶ 77

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

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

Part VIII Statement of Revenue

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

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Contributions, Gifts, Grants and Other Similar Amounts	1a	Federated campaigns	1a 1,756.				
	b	Membership dues	1b				
	c	Fundraising events	1c 1,776,356.				
	d	Related organizations	1d				
	e	Government grants (contributions)	1e				
	f	All other contributions, gifts, grants, and similar amounts not included above	1f 21,422,228.				
	g	Noncash contributions included in lines 1a-1f: $ 4,812,721.					
	h	Total. Add lines 1a-1f		23,200,340.			
Program Service Revenue			Business Code				
	2a	GOV'T FEES & CONTRACTS		86,567,000.	86,567,000.		
	b	PROGRAM FEES		5,475,000.	5,475,000.		
	c						
	d						
	e						
	f	All other program service revenue					
	g	Total. Add lines 2a-2f		92,042,000.			
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts)		4,805,000.		-20,158.	4,825,158.
	4	Income from investment of tax-exempt bond proceeds		0.			
	5	Royalties		0.			
			(i) Real / (ii) Personal				
	6a	Gross rents	1,168,000.				
	b	Less: rental expenses					
	c	Rental income or (loss)	1,168,000.				
	d	Net rental income or (loss)		1,168,000.		524,190.	643,810.
			(i) Securities / (ii) Other				
	7a	Gross amount from sales of assets other than inventory	256,260,000.				
	b	Less: cost or other basis and sales expenses	247,537,000.				
	c	Gain or (loss)	8,723,000.				
	d	Net gain or (loss)		8,723,000.			8,723,000.
	8a	Gross income from fundraising events (not including $ 1,776,356. of contributions reported on line 1c). See Part IV, line 18	a 288,095.				
	b	Less: direct expenses	b 510,872.				
	c	Net income or (loss) from fundraising events		-222,777.			-222,777.
	9a	Gross income from gaming activities. See Part IV, line 19	a				
	b	Less: direct expenses	b				
	c	Net income or (loss) from gaming activities		0.			
	10a	Gross sales of inventory, less returns and allowances	a				
	b	Less: cost of goods sold	b				
	c	Net income or (loss) from sales of inventory		0.			
		Miscellaneous Revenue	Business Code				
	11a	MANAGEMENT FEE		957,000.			957,000.
	b						
	c						
	d	All other revenue					
	e	Total. Add lines 11a-11d		957,000.			
	12	Total revenue. See instructions.		130,672,563.	92,042,000.	504,032.	14,926,191.

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	225,046.	225,046.		
2 Grants and other assistance to domestic individuals. See Part IV, line 22	2,168,011.	2,168,011.		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16	0.			
4 Benefits paid to or for members	0.			
5 Compensation of current officers, directors, trustees, and key employees	3,676,629.	1,050,644.	2,400,675.	225,310.
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0.			
7 Other salaries and wages	63,996,658.	54,789,195.	7,750,547.	1,456,916.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	8,012,089.	6,065,773.	1,700,158.	246,158.
9 Other employee benefits	10,016,624.	8,314,038.	1,447,934.	254,652.
10 Payroll taxes	5,674,625.	4,700,521.	832,476.	141,628.
11 Fees for services (non-employees):				
a Management	0.			
b Legal	1,085,436.	695,101.	384,298.	6,037.
c Accounting	262,871.		262,871.	
d Lobbying	109,392.		109,392.	
e Professional fundraising services. See Part IV, line 17	115,500.			115,500.
f Investment management fees	3,718,000.		3,718,000.	
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)	4,159,913.	2,906,655.	1,211,439.	41,819.
12 Advertising and promotion	0.			
13 Office expenses	4,235,086.	3,621,197.	474,776.	139,113.
14 Information technology	1,614,087.	727,239.	780,936.	105,912.
15 Royalties	0.			
16 Occupancy	7,593,953.	4,981,068.	2,612,168.	717.
17 Travel	1,328,310.	1,198,712.	122,631.	6,967.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials	0.			
19 Conferences, conventions, and meetings	810,697.	680,570.	124,567.	5,560.
20 Interest	1,744,725.	1,744,725.		
21 Payments to affiliates	0.			
22 Depreciation, depletion, and amortization	3,027,444.	1,704,218.	1,321,260.	1,966.
23 Insurance	1,219,375.	1,029,746.	162,052.	27,577.
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a FOSTER BOARDING HOME	10,340,476.	10,339,013.	1,463.	
b FOOD	1,223,604.	1,096,967.	105,341.	21,296.
c REPAIRS AND MAINTENANCE	215,528.	181,763.	33,765.	
d MEMBERSHIP DUES	323,102.	284,563.	38,539.	
e All other expenses	523,382.	507,776.	15,606.	
25 **Total functional expenses.** Add lines 1 through 24e	137,420,563.	109,012,541.	25,610,894.	2,797,128.
26 **Joint costs.** Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ▶ ☐ if following SOP 98-2 (ASC 958-720)	0.			

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	3,902,100.	1	3,466,500.
	2	Savings and temporary cash investments	19,515,700.	2	16,334,500.
	3	Pledges and grants receivable, net	1,537,400.	3	1,460,000.
	4	Accounts receivable, net	18,103,400.	4	26,140,000.
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L	0.	5	0.
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L	0.	6	0.
	7	Notes and loans receivable, net	0.	7	0.
	8	Inventories for sale or use	0.	8	0.
	9	Prepaid expenses and deferred charges	1,662,100.	9	2,036,000.
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D — 10a: 94,658,000.			
	b	Less: accumulated depreciation — 10b: 27,654,000.	59,759,200.	10c	67,004,000.
	11	Investments - publicly traded securities	148,239,400.	11	204,859,000.
	12	Investments - other securities. See Part IV, line 11	154,239,900.	12	94,395,000.
	13	Investments - program-related. See Part IV, line 11	0.	13	0.
	14	Intangible assets	0.	14	0.
	15	Other assets. See Part IV, line 11	13,310,200.	15	8,751,000.
	16	**Total assets.** Add lines 1 through 15 (must equal line 34)	420,269,400.	16	424,446,000.
Liabilities	17	Accounts payable and accrued expenses	77,306,600.	17	67,100,000.
	18	Grants payable	0.	18	0.
	19	Deferred revenue	2,115,200.	19	2,948,000.
	20	Tax-exempt bond liabilities	39,841,100.	20	39,122,000.
	21	Escrow or custodial account liability. Complete Part IV of Schedule D	0.	21	0.
	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L	0.	22	0.
	23	Secured mortgages and notes payable to unrelated third parties	6,425,800.	23	6,456,000.
	24	Unsecured notes and loans payable to unrelated third parties	0.	24	0.
	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	2,306,600.	25	2,932,000.
	26	**Total liabilities.** Add lines 17 through 25	127,995,300.	26	118,558,000.
Net Assets or Fund Balances		**Organizations that follow SFAS 117 (ASC 958), check here ▶ [X] and complete lines 27 through 29, and lines 33 and 34.**			
	27	Unrestricted net assets	271,647,800.	27	281,510,000.
	28	Temporarily restricted net assets	13,815,700.	28	17,567,000.
	29	Permanently restricted net assets	6,810,600.	29	6,811,000.
		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ☐ and complete lines 30 through 34.			
	30	Capital stock or trust principal, or current funds		30	
	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
	32	Retained earnings, endowment, accumulated income, or other funds		32	
	33	Total net assets or fund balances	292,274,100.	33	305,888,000.
	34	Total liabilities and net assets/fund balances	420,269,400.	34	424,446,000.

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	130,672,563.
2	Total expenses (must equal Part IX, column (A), line 25)	2	137,420,563.
3	Revenue less expenses. Subtract line 2 from line 1	3	-6,748,000.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	292,274,100.
5	Net unrealized gains (losses) on investments	5	9,907,000.
6	Donated services and use of facilities	6	0.
7	Investment expenses	7	0.
8	Prior period adjustments	8	0.
9	Other changes in net assets or fund balances (explain in Schedule O)	9	10,454,900.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	305,888,000.

Part XII Financial Statements and Reporting

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

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

Form 990 (2017)

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

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

▶ Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2017

Open to Public Inspection

Name of the organization

THE CHILDREN'S AID SOCIETY

Employer identification number

13-5562191

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

The organization is not a private foundation because it is: (For lines 1 through 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).** (Attach Schedule E (Form 990 or 990-EZ).)

3 ☐ A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**

4 ☐ A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state: _____

5 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II.)

6 ☐ A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**

7 ☒ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II.)

8 ☐ A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II.)

9 ☐ An 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 (see instructions). Enter the name, city, and state of the college or university: _____

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 - subject to certain exceptions, and (2) no more than 33 1/3 % of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2).** (Complete Part III.)

11 ☐ An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).**

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 described in **section 509(a)(1)** or **section 509(a)(2).** See **section 509(a)(3).** Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.

a ☐ **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**

b ☐ **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**

c ☐ **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**

d ☐ **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**

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).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-10 above (see instructions))	(iv) Is the organization listed in your governing document? Yes	(iv) No	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
(A)						
(B)						
(C)						
(D)						
(E)						
Total						

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) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	32,087,427.	32,170,772.	35,165,855.	23,080,291.	23,200,340.	145,704,685.
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0.
3 The value of services or facilities furnished by a governmental unit to the organization without charge						0.
4 **Total.** Add lines 1 through 3	32,087,427.	32,170,772.	35,165,855.	23,080,291.	23,200,340.	145,704,685.
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)						0.
6 **Public support.** Subtract line 5 from line 4						145,704,685.

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
7 Amounts from line 4	32,087,427.	32,170,772.	35,165,855.	23,080,291.	23,200,340.	145,704,685.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	3,428,626.	8,392,545.	5,028,341.	2,792,096.	5,973,000.	25,614,608.
9 Net income from unrelated business activities, whether or not the business is regularly carried on	30,077.		75,487.	106,518.	153,574.	365,656.
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) ATCH 1	815,926.	1,157,752.	446,614.	1,636,275.	1,245,095.	5,301,662.
11 **Total support.** Add lines 7 through 10						176,986,611.

12	Gross receipts from related activities, etc. (see instructions)	12	387,057,577.
13	**First five years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** ▶		☐

Section C. Computation of Public Support Percentage

14	Public support percentage for 2017 (line 6, column (f) divided by line 11, column (f))	14	82.33 %
15	Public support percentage from 2016 Schedule A, Part II, line 14	15	84.22 %

16a **33 1/3 % support test - 2017.** If the organization did not check the box on line 13, and line 14 is 33 1/3 % or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ ☒

b **33 1/3 % support test - 2016.** If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3 % or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ ☐

17a **10%-facts-and-circumstances test - 2017.** 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 ▶ ☐

b **10%-facts-and-circumstances test - 2016.** 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 ▶ ☐

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 ▶ ☐

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) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(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) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 **Total support.** (Add lines 9, 10c, 11, and 12.)						

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

Section C. Computation of Public Support Percentage

15	Public support percentage for 2017 (line 8, column (f) divided by line 13, column (f))	15	%
16	Public support percentage from 2016 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17	Investment income percentage for **2017** (line 10c, column (f) divided by line 13, column (f))	17	%
18	Investment income percentage from **2016** Schedule A, Part III, line 17	18	%

19a **33 1/3% support tests - 2017.** 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 - 2016.** 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 in line 12 on Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of 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? *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.*	1		
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? *If "Yes," explain in* ***Part VI*** *how the organization determined that the supported organization was described in section 509(a)(1) or (2).*	2		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? *If "Yes," answer (b) and (c) below.*	3a		
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)? *If "Yes," describe in* ***Part VI*** *when and how the organization made the determination.*	3b		
c	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? *If "Yes," explain in* ***Part VI*** *what controls the organization put in place to ensure such use.*	3c		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? *If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.*	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? *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.*	4b		
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)? *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.*	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? *If "Yes," answer (b) and (c) 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).*	5a		
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?	5b		
c	**Substitutions only.** Was the substitution the result of an event beyond the organization's control?	5c		
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? *If "Yes," provide detail in* ***Part VI.***	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (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? *If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).*	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? *If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).*	8		
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))? *If "Yes," provide detail in* ***Part VI.***	9a		
b	Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? *If "Yes," provide detail in* ***Part VI.***	9b		
c	Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? *If "Yes," provide detail in* ***Part VI.***	9c		
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)? *If "Yes," answer 10b below.*	10a		
b	Did the organization have any excess business holdings in the tax year? *(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)*	10b		

Part IV Supporting Organizations *(continued)*

			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
a	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11b		
c	A 35% controlled entity of a person described in (a) or (b) above? *If "Yes" to a, b, or c, provide detail in* ***Part VI.***	11c		

Section B. Type I Supporting Organizations

			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? *If "No," describe in* ***Part VI*** *how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.*	1		
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? *If "Yes," explain in* ***Part VI*** *how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.*	2		

Section C. Type II Supporting Organizations

			Yes	No
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)? *If "No," describe in* ***Part VI*** *how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).*	1		

Section D. All Type III Supporting Organizations

			Yes	No
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?	1		
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? *If "No," explain in* ***Part VI*** *how the organization maintained a close and continuous working relationship with the supported organization(s).*	2		
3	By reason of the relationship described in (2), 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? *If "Yes," describe in* ***Part VI*** *the role the organization's supported organizations played in this regard.*	3		

Section E. Type III Functionally Integrated Supporting Organizations

1 *Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (****see instructions****).*

a ☐ The organization satisfied the Activities Test. *Complete* ***line 2*** *below.*

b ☐ The organization is the parent of each of its supported organizations. *Complete* ***line 3*** *below.*

c ☐ The organization supported a governmental entity. *Describe in* ***Part VI*** *how you supported a government entity (see instructions).*

			Yes	No
2	Activities Test. ***Answer (a) and (b) below.***			
a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? *If "Yes," then in* ***Part VI identify those supported organizations and explain*** *how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.*	2a		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? *If "Yes," explain in* ***Part VI*** *the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.*	2b		
3	Parent of Supported Organizations. ***Answer (a) and (b) below.***			
a	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? *Provide details in* ***Part VI.***	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? *If "Yes," describe in* ***Part VI*** *the role played by the organization in this regard.*	3b		

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 (explain in detail in **Part VI**):			
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 1-1/2% 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 .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 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 ☐ 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	
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	
4	Amounts paid to acquire exempt-use assets	
5	Qualified set-aside amounts (prior IRS approval required)	
6	Other distributions (describe in **Part VI**). See instructions.	
7	**Total annual distributions.** Add lines 1 through 6.	
8	Distributions to attentive supported organizations to which the organization is responsive (provide details in **Part VI**). See instructions.	
9	Distributable amount for 2017 from Section C, line 6	
10	Line 8 amount divided by Line 9 amount	

Section E - Distribution Allocations (see instructions)		(i) Excess Distributions	(ii) Underdistributions Pre-2017	(iii) Distributable Amount for 2017
1	Distributable amount for 2017 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2017 (reasonable cause required-explain in **Part VI**). See instructions.			
3	Excess distributions carryover, if any, to 2017			
a				
b	From 2013			
c	From 2014			
d	From 2015			
e	From 2016			
f	**Total** of lines 3a through e			
g	Applied to underdistributions of prior years			
h	Applied to 2017 distributable amount			
i	Carryover from 2012 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2017 from Section D, line 7: $			
a	Applied to underdistributions of prior years			
b	Applied to 2017 distributable amount			
c	Remainder. Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2017, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in **Part VI**. See instructions.			
6	Remaining underdistributions for 2017. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in **Part VI**. See instructions.			
7	**Excess distributions carryover to 2018**. Add lines 3j and 4c.			
8	Breakdown of line 7:			
a	Excess from 2013. . . .			
b	Excess from 2014. . . .			
c	Excess from 2015. . . .			
d	Excess from 2016. . . .			
e	Excess from 2017. . . .			

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.)

ATTACHMENT 1

SCHEDULE A, PART II - OTHER INCOME

DESCRIPTION	2013	2014	2015	2016	2017	TOTAL
GROSS INCOME FROM FUNDRAISING	815,926.	1,157,752.	326,614.	178,366.	288,095.	2,766,753.
MANAGEMENT FEE				1,457,909.	957,000.	2,414,909.
MISCELLANEOUS			120,000.			120,000.
TOTALS	815,926.	1,157,752.	446,614.	1,636,275.	1,245,095.	5,301,662.

SCHEDULE C (Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Political Campaign and Lobbying Activities

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.**

OMB No. 1545-0047

2017

Open to Public Inspection

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

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

1 Provide a description of the organization's direct and indirect political campaign activities in Part IV. (see instructions for definition of "political campaign activities")

2 Political campaign activity expenditures (see instructions) . . . . . ▶ $

3 Volunteer hours for political campaign activities (see instructions) . . . . . .

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-.
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					

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 (grass roots 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.		
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-		

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.

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) 2014	(b) 2015	(c) 2016	(d) 2017	(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					

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) Yes	(a) No	(b) 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	
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		X	
i Other activities?	X		109,392.
j Total. Add lines 1c through 1i			109,392.
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?		X	

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 expenditure 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.

SCHEDULE C, PART II-B, LINE 1I

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.

Part IV **Supplemental Information** *(continued)*

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

2017

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.

		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		

5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No

6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? ☐ Yes ☐ No

Part II Conservation Easements.

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

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

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

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

		Held at the End of the Tax Year
a	Total number of conservation easements	2a
b	Total acreage restricted by conservation easements	2b
c	Number of conservation easements on a certified historic structure included in (a)	2c
d	Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register	2d

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

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

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

6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ _____

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ $ _____

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

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

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

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

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

(i) Revenue included on Form 990, Part VIII, line 1 ▶ $ _____

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

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

a Revenue included on Form 990, Part VIII, line 1 ▶ $ _____

b Assets included in Form 990, Part X ▶ $ _____

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

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

a ☐ Public exhibition
b ☐ Scholarly research
c ☐ Preservation for future generations
d ☐ Loan or exchange programs
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	18,919,000.	20,160,000.	24,031,000.	23,927,000.	22,220,000.
b Contributions		1,655,000.	1,671,000.	2,587,000.	1,931,000.
c Net investment earnings, gains, and losses	405,000.	832,000.	-277,000.	336,000.	2,570,000.
d Grants or scholarships					
e Other expenditures for facilities and programs	2,553,000.	3,728,000.	5,265,000.	2,819,000.	2,794,000.
f Administrative expenses					
g End of year balance	16,771,000.	18,919,000.	20,160,000.	24,031,000.	23,927,000.

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
a Board designated or quasi-endowment ▶ 51.3300 %
b Permanent endowment ▶ 40.6100 %
c Temporarily restricted endowment ▶ 8.0600 %
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	3a(i)		X
(ii) related organizations	3a(ii)		X
b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?	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		5,782,000.		5,782,000.
b Buildings		70,143,000.	15,471,301.	54,671,699.
c Leasehold improvements		6,820,000.	4,861,106.	1,958,894.
d Equipment		11,161,000.	7,299,593.	3,861,407.
e Other		752,000.	22,000.	730,000.
Total. Add lines 1a through 1e. *(Column (d) must equal Form 990, Part X, column (B), line 10c.)* ▶				67,004,000.

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) OTHER INVESTMENTS		FMV
(B) PRIVATE CAPITAL	17,513,000.	FMV
(C) HEDGE FUNDS	57,644,000.	FMV
(D) LIMITED PARTNERSHIP INTERESTS	7,636,000.	FMV
(E) EMERGING MARKETS	11,602,000.	FMV
(F)		
(G)		
(H)		
Total. *(Column (b) must equal Form 990, Part X, col. (B) line 12.)* ▶	94,395,000.	

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. *(Column (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)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. *(Column (b) must equal Form 990, Part X, col. (B) line 15.)* ▶	

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) OTHER LIABILITIES	129,000.
(3) SPLIT-INTEREST OBLIGATIONS	2,803,000.
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. *(Column (b) must equal Form 990, Part X, col. (B) line 25.)* ▶	2,932,000.

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 FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII [X]

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.

SEE PAGE 5

Part XIII Supplemental Information *(continued)*

SCHEDULE D, PART V, LINE 4

THE ENDOWMENTS CONSIST OF DONOR-RESTRICTED ENDOWMENT FUNDS AND BOARD DESIGNATED SPECIAL PURPOSE FUNDS. CHILDREN'S AID RECOGNIZES THAT NEW YORK STATE ADOPTED AS LAW THE NEW YORK PRUDENT MANAGEMENT OF INSTITUTIONAL FUNDS ACT ("NYPMIFA") ON SEPTEMBER 17, 2010. NYPMIFA REPLACES THE PRIOR LAW WHICH WAS THE UNIFORM MANAGEMENT OF INSTITUTIONAL FUNDS ACT ("UMIFA"). NYPMIFA CREATES A REBUTTABLE PRESUMPTION OF IMPRUDENCE IF AN ORGANIZATION APPROPRIATES MORE THAN 7% OF A DONOR-RESTRICTED PERMANENT ENDOWMENT FUND'S FAIR VALUE (AVERAGED OVER A PERIOD OF NOT LESS THAN THE PRECEDING FIVE YEARS) IN ANY YEAR ANY UNAPPROPRIATED EARNINGS THAT WOULD OTHERWISE BE CONSIDERED UNRESTRICTED BY THE DONOR WILL BE REFLECTED AS TEMPORARILY RESTRICTED UNTIL APPROPRIATED.

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 FUND AS CHILDREN'S AID DETERMINES IS PRUDENT FOR THE USES, BENEFITS, PURPOSES AND DURATION FOR WHICH THE ENDOWMENT FUND WAS ESTABLISHED, SUBJECT TO THE INTENT OF THE DONOR AS EXPRESSED IN THE GIFT INSTRUMENT. CHILDREN'S AID'S POLICY IS THAT ENDOWMENT EARNINGS WILL BE APPROPRIATED FOR EXPENDITURES IN ACCORDANCE WITH THE DONOR'S STIPULATIONS IN THE ABSENCE OF DONOR STIPULATIONS. ENDOWMENT EARNINGS ARE CLASSIFIED AS TEMPORARILY RESTRICTED UNTIL APPROPRIATED FOR OPERATIONS BY THE BOARD OF TRUSTEES.

Part XIII Supplemental Information *(continued)*

SCHEDULE D, 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 CONSOLIDATED FINANCIAL STATEMENTS IF THE POSITION IS "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 CODE ("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 THE CONSOLIDATED FINANCIAL STATEMENTS FOR THE YEARS ENDED JUNE 30, 2018 AND JUNE 30, 2017.

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

2017

Open to Public Inspection

Name of the organization
THE CHILDREN'S AID SOCIETY

Employer identification number
13-5562191

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
(1) CENTRAL AMERICA/CARIBBEAN	0.	0.	INVESTMENTS		69,539,635.
(2) EUROPE	0.	0.	INVESTMENTS		5,596,626.
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
(10)					
(11)					
(12)					
(13)					
(14)					
(15)					
(16)					
(17)					
3a Sub-total					75,136,261.
b Total from continuation sheets to Part I					
c Totals (add lines 3a and 3b)					75,136,261.

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)
(1)									
(2)									
(3)									
(4)									
(5)									
(6)									
(7)									
(8)									
(9)									
(10)									
(11)									
(12)									
(13)									
(14)									
(15)									
(16)									

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt 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 . . . . . ▶

Schedule F (Form 990) 2017

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)
(1)							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							
(13)							
(14)							
(15)							
(16)							
(17)							
(18)							

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)*	[X] 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	[X] 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)*	[X] 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)*	[X] 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)*	[X] 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	[X] 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.

SCHEDULE G
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" on Form 990, Part IV, line 17, 18, or 19, or if the organization entered more than $15,000 on Form 990-EZ, line 6a.

▶ Attach to Form 990 or Form 990-EZ.

▶ Go to *www.irs.gov/Form990* for the latest instructions.

OMB No. 1545-0047

2017

Open to Public Inspection

Name of the organization: THE CHILDREN'S AID SOCIETY

Employer identification number: 13-5562191

Part I **Fundraising Activities.** Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.

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

a [X] Mail solicitations
b [X] Internet and email solicitations
c [X] Phone solicitations
d [X] In-person solicitations
e [X] Solicitation of non-government grants
f [X] Solicitation of government grants
g [X] Special fundraising events

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

b If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least $5,000 by the organization.

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions? Yes	(iii) No	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
1 ATTACHMENT 1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
Total ▶					115,500.	

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

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

Part II **Fundraising Events.** Complete if the organization answered "Yes" 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 BENEFIT (event type)	(b) Event #2 GOLF CLASSIC (event type)	(c) Other events (total number)	(d) Total events (add col. (a) through col. (c))
Revenue	1 Gross receipts	1,796,245.	268,206.		2,064,451.
	2 Less: Contributions	1,696,040.	80,316.		1,776,356.
	3 Gross income (line 1 minus line 2)	100,205.	187,890.		288,095.
Direct Expenses	4 Cash prizes				
	5 Noncash prizes	11,038.	1,996.		13,034.
	6 Rent/facility costs	194,055.	96,174.		290,229.
	7 Food and beverages				
	8 Entertainment	87,535.	6,101.		93,636.
	9 Other direct expenses	106,976.	6,997.		113,973.
	10 Direct expense summary. Add lines 4 through 9 in column (d) ▶				510,872.
	11 Net income summary. Subtract line 10 from line 3, column (d) ▶				-222,777.

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))
Revenue	1 Gross revenue				
Direct Expenses	2 Cash prizes				
	3 Noncash prizes				
	4 Rent/facility costs				
	5 Other direct expenses				
	6 Volunteer labor	☐ Yes ☐ No %	☐ Yes ☐ No %	☐ Yes ☐ 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 ▶ _____

15 a 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 explanation 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).

FORM 990, SCHEDULE G, PART I - FUNDRAISING

THE CHILDREN'S AID SOCIETY IS A FUNDRAISING ORGANIZATION THAT OCCASIONALLY EMPLOYS INDEPENDENT CONTRACTORS TO UNDERTAKE FUNDRAISING EFFORTS. THE CHILDREN'S AID SOCIETY RECEIVES CONTRIBUTIONS FROM A VARIETY OF SOURCES AS A RESULT OF THE CONCERTED EFFORTS OF ITS CONSULTANTS. THE CHILDREN'S AID SOCIETY DOES NOT TRACK HOW MUCH MONEY EACH SPECIFIC CONSULTANT RAISES ON ITS BEHALF AND SO IT IS UNABLE TO IDENTIFY HOW MUCH

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 explanation 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).

FUNDRAISING REVENUES TO ALLOCATE TO THE FUNDRAISER DISCLOSED IN SCHEDULE G.

ATTACHMENT 1

990, SCHEDULE G, PART I - HIGHEST PAID FUNDRAISER

NAME AND ADDRESS OF FUNDRAISER	ACTIVITY	DID FUNDRAISER HAVE CUSTODY OR CONTROL OF CONTRIBUTIONS? YES	NO	GROSS RECEIPTS FROM ACTIVITY	AMOUNT PAID TO (OR RETAINED BY FUNDRAISER	AMOUNT PAID TO (OR RETAINED BY ORGANIZATION
KLB DEVELOPMENT 1851 7TH AVENUE, STE 13 NY NY 10026	CONSULTANT		X		97,500.	
CITIZEN CONSULTING LTD 50 BRIDGE ST. APT. #518 BROOKLYN NY 11201	CONSULTANT		X		18,000.	

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

2017

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? . . . . . [X] 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 non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) ALVIN AILEY DANCE FOUNDATION 405 WEST 55TH STREET NEW YORK, NY 10019	13-2584273	501(C)(3)	15,785.				GENERAL SUPPORT
(2) PHIPPS NEIGHBORHOOD INC. 902 BROADWAY NEW YORK, NY 10010	13-2707665	501(C)(3)	28,759.				GENERAL SUPPORT
(3) EDGE FOUNDATION 2017 FAIRVIEW AVENUE EAST SEATTLE, WA 98102	32-2262709	501(C)(3)	10,000.				GENERAL SUPPORT
(4) STATEN ISLAND CHILDREN'S MUSEUM 1000 RICHMOND TERRACE	23-7379930	501(C)(3)	12,020.				GENERAL SUPPORT
(5) CARIBBEAN CULTURE CENTER 1825 PARK AVENUE NEW YORK, NY 10035	13-3054001	501(C)(3)	12,650.				GENERAL SUPPORT
(6) HELLEN KELLER INTERNATIONAL ONE DAG HAMMARKSKJOLD PLAZA	13-5562162	501(C)(3)	43,562.				GENERAL SUPPORT
(7) RAMAPO FOR CHILDREN P.O. BOX 266 RHINEBECK, NY 12572	13-5600422	501(C)(3)	13,125.				GENERAL SUPPORT
(8) TRUSTEES OF BOSTON COLLEGE 140 COMMONWEALTH AVE	04-2103545	501(C)(3)	80,000.				GENERAL SUPPORT
(9)							
(10)							
(11)							
(12)							

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table . . . . . ▶ 8.

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

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

Schedule I (Form 990) (2017)

JSA
7E1288 1.000

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 non-cash assistance
1	SPECIFIC ASSISTANCE	1,537.	685,883.			
2	BABYSITTING	1.	360.			
3	SCHOLARSHIPS	82.	292,319.			
4	STIPENDS	2,702.	418,860.			
5	CHILDREN'S RECREATIONAL ACTIVITIES	1,302.	770,589.			
6						
7						

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

SCHEDULE I, PART I, LINE 2

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

SCHEDULE J (Form 990)

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

2017

Open to Public Inspection

Name of the organization

THE CHILDREN'S AID SOCIETY

Employer identification number

13-5562191

Part I Questions Regarding Compensation

		Yes	No
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.		
	☐ First-class or charter travel		
	☐ Travel for companions		
	☐ Tax indemnification and gross-up payments		
	☐ Discretionary spending account		
	☐ Housing allowance or residence for personal use		
	☐ Payments for business use of personal residence		
	☐ Health or social club dues or initiation fees		
	☐ Personal services (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 1b		
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? 2		
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.		
	☒ Compensation committee		
	☒ Independent compensation consultant		
	☒ Form 990 of other organizations		
	☐ Written employment contract		
	☒ Compensation survey or study		
	☒ Approval by the board or compensation committee		
4	During the year, did any person listed 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? 4a		X
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan? 4b	X	
c	Participate in, or receive payment from, an equity-based compensation arrangement? 4c		X
	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? 5a		X
b	Any related organization? 5b		X
	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? 6a		X
b	Any related organization? 6b		X
	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. 7		X
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 8		X
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)? 9		

Schedule J (Form 990) 2017 Page **2**

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 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)	433,391.	0.	0.	29,882.	22,350.	485,623.	0.
		(ii)	0.	0.	0.	0.	0.	0.	0.
2	DANIEL LEHMAN CHIEF OPERATING OFFICER	(i)	257,405.	0.	0.	11,887.	9,202.	278,494.	0.
		(ii)	0.	0.	0.	0.	0.	0.	0.
3	SARAH GILLMAN CHIEF FINANCIAL OFFICER	(i)	235,889.	0.	0.	3,750.	18,500.	258,139.	0.
		(ii)	0.	0.	0.	0.	0.	0.	0.
4	VALERIE RUSSO VP FOR STRATEGY AND EXCELLENCE	(i)	153,771.	0.	0.	7,035.	22,080.	182,886.	0.
		(ii)	0.	0.	0.	0.	0.	0.	0.
5	DREMA BROWN VP FOR SCHOOL AGE PROGRAMS	(i)	188,301.	0.	0.	7,754.	20,828.	216,883.	0.
		(ii)	0.	0.	0.	0.	0.	0.	0.
6	JANE QUINN VP FOR COMMUNITY SERVICES	(i)	251,183.	0.	0.	25,199.	18,843.	295,225.	0.
		(ii)	0.	0.	0.	0.	0.	0.	0.
7	GEORGIA BOOTHE VP CHILD WELFARE & FAMILY SVCS	(i)	192,653.	0.	0.	5,772.	1,330.	199,755.	0.
		(ii)	0.	0.	0.	0.	0.	0.	0.
8	LISA HANDWERKER, M.D. CHIEF MEDICAL OFFICER	(i)	206,180.	0.	0.	27,048.	22,708.	255,936.	0.
		(ii)	0.	0.	0.	0.	0.	0.	0.
9	ROBYN DIETZ DIRECTOR TALENT MANAGEMENT/HR	(i)	194,371.	0.	0.	6,235.	21,700.	222,306.	0.
		(ii)	0.	0.	0.	0.	0.	0.	0.
10	ALETHEA PRATT CHIEF INFORMATION OFFICER	(i)	194,082.	0.	0.	6,068.	8,873.	209,023.	0.
		(ii)	0.	0.	0.	0.	0.	0.	0.
11	JAMES SWEENY ASSISTANT VP REAL ESTATE	(i)	194,010.	0.	0.	5,963.	20,829.	220,802.	0.
		(ii)	0.	0.	0.	0.	0.	0.	0.
12	MORIA CAPPIO VP EARLY CHILDHOOD PROGRAM	(i)	177,128.	0.	0.	4,656.	7,815.	189,599.	0.
		(ii)	0.	0.	0.	0.	0.	0.	0.
13	MIRIAM MARTINEZ CHIEF PROGRAM OFFICER	(i)	251,661.	0.	0.	1,969.	8,115.	261,745.	0.
		(ii)	0.	0.	0.	0.	0.	0.	0.
14	COURTENAYE JACKSON-CHAS GENERAL COUNSEL	(i)	213,124.	0.	0.	3,542.	20,927.	237,593.	0.
		(ii)	0.	0.	0.	0.	0.	0.	0.
15	SANDRA ESCAMILLA VP ADOLESCENCE	(i)	177,272.	0.	0.	1,854.	20,462.	199,588.	0.
		(ii)	0.	0.	0.	0.	0.	0.	0.
16	ANTHONY RAMOS DIR. MARKETING & COMMUNICATION	(i)	158,500.	0.	0.	6,928.	8,120.	173,548.	0.
		(ii)	0.	0.	0.	0.	0.	0.	0.

Part III Supplemental Information

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

FORM 990, SCHEDULE J, LINE 4(B)

PRESIDENT & CEO, PHOEBE BOYER, PARTICIPATES IN A SUPPLEMENTAL EXECUTIVE RETIREMENT PLAN; THE ORGANIZATION MADE A CONTRIBUTION OF $18,000 TO THE PLAN ON HER BEHALF IN CALENDAR YEAR 2017. THIS PAYMENT IS REFLECTED IN SCHEDULE J, PART II, COLUMN (C).

SCHEDULE K (Form 990)

Department of the Treasury
Internal Revenue Service

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.

OMB No. 1545-0047

2017

Open to Public Inspection

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	07/01/2015	37,205,000.	TO FINANCE CONSTRUCTION OF A BLDG		X		X		X
B												
C												
D												

Part II Proceeds

		A	B	C	D
1	Amount of bonds retired	625,000.			
2	Amount of bonds legally defeased				
3	Total proceeds of issue	37,205,000.			
4	Gross proceeds in reserve funds	93,663.			
5	Capitalized interest from proceeds	3,682,078.			
6	Proceeds in refunding escrows				
7	Issuance costs from proceeds	667,249.			
8	Credit enhancement from proceeds				
9	Working capital expenditures from proceeds				
10	Capital expenditures from proceeds	32,137,009.			
11	Other spent proceeds				
12	Other unspent proceeds				
13	Year of substantial completion	2018			

		A		B		C		D	
		Yes	No	Yes	No	Yes	No	Yes	No
14	Were the bonds issued as part of a current refunding issue?		X						
15	Were the bonds issued as part of an advance refunding issue?		X						
16	Has the final allocation of proceeds been made?		X						
17	Does the organization maintain adequate books and records to support the final allocation of proceeds?		X						

Part III Private Business Use

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

Part III Private Business Use *(Continued)* BUILD NYC RESOURCE CORPORATION

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
3a Are there any management or service contracts that may result in private business use of bond-financed property?		X						
b 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						
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						
8a Has there been a sale or disposition of any of the bond-financed property to a nongovernmental person other than a 501(c)(3) organization since the bonds were issued?		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							

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						
2 If "No" to line 1, did the following apply?								
a Rebate not due yet?		X						
b Exception to rebate?		X						
c No rebate due?		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						
4a Has the organization or the governmental issuer entered into a qualified hedge with respect to the bond issue?		X						
b Name of provider								
c Term of hedge								
d Was the hedge superintegrated?								
e Was the hedge terminated?								

Part IV **Arbitrage** *(Continued)*

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
5a Were gross proceeds invested in a guaranteed investment contract (GIC)?		X						
b Name of provider								
c Term of GIC								
d Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?								
6 Were any gross proceeds invested beyond an available temporary period?		X						
7 Has the organization established written procedures to monitor the requirements of section 148?	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							

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

Part VI **Supplemental Information.** Provide additional information for responses to questions on Schedule K (see instructions) *(Continued)*

SCHEDULE M (Form 990)

Department of the Treasury
Internal Revenue Service

Noncash Contributions

▶ 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 the latest information.

OMB No. 1545-0047

2017

Open to Public Inspection

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		4,405,585.	STOCK MARKET QUOTE
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		407,136.	MARKET VALUE
21	Taxidermy				
22	Historical artifacts				
23	Scientific specimens				
24	Archeological artifacts				
25	Other ▶( )				
26	Other ▶( )				
27	Other ▶( )				
28	Other ▶( )				

			Yes	No
29	Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement	29		
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 three years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period?	30a		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?	31	X	
32a	Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?	32a	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, PART I, 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.

Name of the organization
THE CHILDREN'S AID SOCIETY

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FORM 990, PART III, LINE 1

CONTINUATION OF ORGANIZATION'S MISSION:

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

WE BELIEVE ALL KIDS 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.

LINE 4A

CHILD WELFARE AND FAMILY SERVICES (CONTINUED)

THE NEXT GENERATION CENTER SUPPORTS TEENS AND YOUNG ADULTS, PARTICULARLY THOSE AGING OUT OF FOSTER CARE, IN THEIR TRANSITION TO ADULTHOOD. THE OFFICE OF CLIENT ADVOCACY HELPS STABILIZE LOW-INCOME FAMILIES THROUGH LEGAL ADVOCACY, EMERGENCY MATERIAL ASSISTANCE, AND COLLEGE SAVERS, WHICH

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THE CHILDREN'S AID SOCIETY	13-5562191

ESTABLISHES SAVINGS ACCOUNTS AND PROVIDES INCENTIVES TOWARDS SAVING FOR COLLEGE.

LINE 4B

SCHOOL AGE (CONTINUED)

CORE SERVICES INCLUDE OUT-OF SCHOOL TIME PROGRAMS IN CHILDREN'S AID COMMUNITY CENTERS AND SCHOOLS, SUMMER CAMPS, AND ATHLETICS PROGRAMMING.

LINE 4D

HEALTH AND WELLNESS

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.

ADOLESCENCE

THE ADOLESCENCE DIVISION WORKS WITH ADOLESCENTS AND YOUNG ADULTS TO ENHANCE YOUNG PEOPLE'S PHYSICAL, SOCIAL AND EMOTIONAL COMPETENCIES, IMPROVE THEIR ACADEMIC PERFORMANCE, AND PREPARE THEM FOR SUCCESSFUL CAREERS AND FINANCIAL INDEPENDENCE. CORE SERVICES INCLUDE: PREGNANCY PREVENTION PROGRAMS, WHICH MEETS THE TOP-TIER EVIDENCE OF EFFECTIVENESS STANDARDS BY THE COALITION FOR EVIDENCE-BASED POLICY; THE EXCEL COLLEGE

SUPPORT PROGRAM, PROVIDING ASSISTANCE TO HELP YOUNG PEOPLE ENTER AND COMPLETE COLLEGE; THE HOPE LEADERSHIP ACADEMY, WHICH PROVIDES WRAP-AROUND SUPPORTS AND DEVELOPS LEADERSHIP THROUGH A PEER EDUCATION MODEL; AND TEEN EMPLOYMENT SERVICES SUCH AS AMERICORPS INTERNSHIPS, SUMMER YOUTH EMPLOYMENT PROGRAMS, AND THE NEW YORK TIMES EMPLOYMENT PROGRAM.

NATIONAL CENTER FOR COMMUNITY SCHOOLS
THE CENTER 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.

FORM 990, PART VI, SECTION A, LINE 1
THE EXECUTIVE COMMITTEE'S PRINCIPAL ROLE IS TO ACT FOR THE BOARD WHEN THE BOARD ITSELF IS UNABLE TO ACT. THIS COMMITTEE ALSO SHALL NOMINATE THE CHAIR OF THE GOVERNANCE AND NOMINATING COMMITTEE AND MAKE RECOMMENDATIONS TO THE BOARD AS TO EXECUTIVE COMPENSATION. ANY DECISION MADE BY THE EXECUTIVE COMMITTEE SHALL BE REPORTED TO THE BOARD AS SOON AS PRACTICAL. THE EXECUTIVE COMMITTEE SHALL CONSIST OF ALL OFFICERS, THE CHAIR OF THE FINANCE COMMITTEE, CHAIR OF THE INVESTMENT COMMITTEE, AND THE CHAIR OF THE GOVERNANCE AND NOMINATING COMMITTEE, AND FIVE (5) TO SEVEN (7) TRUSTEES WHO ARE NOT CHAIRS OF ANY COMMITTEE OF THE BOARD. THE EXECUTIVE COMMITTEE SHALL BE CHAIRED BY THE CHAIR OF THE BOARD.

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THE CHILDREN'S AID SOCIETY	13-5562191

THE EXECUTIVE COMMITTEE SHALL HAVE AND MAY EXERCISE ALL OF THE POWERS OF THE BOARD OF TRUSTEES BETWEEN MEETINGS OF THE BOARD, EXCEPT THAT THE EXECUTIVE COMMITTEE SHALL NOT HAVE THE POWER TO APPOINT OR ENTER INTO A CONTRACTUAL AGREEMENT REGARDING A NEWLY APPOINTED CHIEF EXECUTIVE OFFICER WITHOUT THE VOTE OF THE BOARD; SUBMIT ANY ACTION TO THE MEMBERS OF THE CORPORATION FOR THEIR APPROVAL; FILL ANY VACANCIES ON THE BOARD OF TRUSTEES OR ANY COMMITTEE; AMEND, REPEAL, OR ADOPT BYLAWS; AMEND OR REPEAL ANY RESOLUTION OF THE BOARD OF TRUSTEES WHICH IS NOT BY ITS TERMS SO AMENDABLE OR REPEALABLE; MAKE DECISIONS REGARDING THE PURCHASE, LEASING, OR OTHER DISPOSITION OF REAL ESTATE, IF SUCH PURCHASE, LEASE, OR DISPOSITION INVOLVES ALL OR SUBSTANTIALLY ALL OF THE CORPORATION'S ASSETS; OR MAKE DECISIONS REGARDING THE FIXING OF COMPENSATION, IF ANY, OF TRUSTEES. THE COMMITTEE ALSO DOES NOT HAVE THE POWER TO ELECT OR REMOVE OFFICERS OR DIRECTORS; APPROVE A MERGER OR PLAN OF DISSOLUTION; OR APPROVE AMENDMENTS TO THE CERTIFICATE OF INCORPORATION.

IN ADDITION, THE EXECUTIVE COMMITTEE SHALL BE RESPONSIBLE FOR RECOMMENDING POLICIES AND PROCEDURES FOR DETERMINING EXECUTIVE COMPENSATION AND FOR SUCCESSION PLANNING, RETAINING COMPENSATION CONSULTANTS, CONDUCTING DUE DILIGENCE REGARDING COMPENSATION, AND ANNUALLY MAKING RECOMMENDATIONS AS TO COMPENSATION TO THE BOARD.

FORM 990, PART VI, SECTION A, LINE 6
THE CHILDREN'S AID SOCIETY IS A NEW YORK NOT-FOR-PROFIT CORPORATION COMPRISED OF THE FOLLOWING MEMBERS:

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

(1) INDIVIDUALS WHO WERE MEMBERS ON THE DATE THE BYLAWS WERE ADOPTED;

(2) SUCH OTHER INDIVIDUALS AS THE BOARD OF TRUSTEES MAY FROM TIME TO TIME IN ITS DISCRETION DESIGNATE AS MEMBERS BY RESOLUTION; AND

(3) INDIVIDUALS WHO MAKE CONTRIBUTIONS TO THE CORPORATION IN EXCESS OF SUCH SUMS AS THE BOARD MAY SPECIFY FROM TIME TO TIME.

FORM 990, PART VI, SECTION A, LINE 7A

THE MEMBERS ARE AUTHORIZED TO ELECT THE BOARD OF TRUSTEES AS DESIGNATED WITHIN THE BYLAWS OF THE CHILDREN'S AID SOCIETY. THE MEMBERS ARE ALSO EMPOWERED TO FILL TRUSTEE VACANCIES AS NEEDED.

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.

FORM 990, PART VI, SECTION B, LINE 11A

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.

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THE CHILDREN'S AID SOCIETY	13-5562191

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 EXECUTIVE COMMITTEE OF THE BOARD OF TRUSTEES. THE EXECUTIVE COMMITTEE DETERMINES WHETHER A CONFLICT OF INTEREST EXISTS AND EVALUATES CONFLICT OF INTEREST TRANSACTIONS. THE EXECUTIVE COMMITTEE ALSO REVIEWS EXISTING CONFLICTS OF INTEREST ON AN ANNUAL BASIS. AN INDIVIDUAL INVOLVED, DIRECTLY OR INDIRECTLY, IN AN ACTUAL OR POTENTIAL CONFLICT OF INTEREST TRANSACTION MAY NOT PARTICIPATE IN ANY DISCUSSION OF THE RELEVANT TRANSACTION. 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

IN 2018, THE EXECUTIVE COMMITTEE OF THE BOARD OF TRUSTEES REVIEWED THE RECOMMENDATION OF THE COMPENSATION WORKING GROUP OF CHILDREN'S AID'S PRESIDENT AND CHIEF EXECUTIVE OFFICER. THE REVIEW WAS BASED ON INFORMATION PROVIDED EARLIER IN THE YEAR BY AN OUTSIDE ADVISOR TO ASSESS THE COMPLIANCE AND COMPETITIVENESS OF THE ANNUAL COMPENSATION OF THE PRESIDENT AND CHIEF EXECUTIVE OFFICER. IN 2017, ADDITIONAL LEADERSHIP POSITIONS, NAMELY, THE CHIEF FINANCIAL OFFICER, VICE PRESIDENT AND GENERAL COUNSEL, CHIEF PROGRAM OFFICER, CHIEF OPERATING OFFICER, VICE

Name of the organization	Employer identification number
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PRESIDENT, ADOLESCENCE PROGRAMS, VICE PRESIDENT AND DIRECTOR OF THE NATIONAL CENTER FOR COMMUNITY SCHOOLS, VICE PRESIDENT, HEALTH AND WELLNESS, CHIEF DEVELOPMENT OFFICER, VICE PRESIDENT, SCHOOL AGE PROGRAMS, VICE PRESIDENT, CHILD WELFARE AND FAMILY SERVICES, VICE PRESIDENT, EARLY CHILDHOOD PROGRAMS, VICE PRESIDENT OF MARKETING AND COMMUNICATIONS, AND CHIEF OF STAFF WERE ALSO REVIEWED BY AN OUTSIDE ADVISOR TO ASSESS THE COMPLIANCE AND COMPETITIVENESS OF THE SENIOR LEADERSHIP TEAM. THIS INFORMATION WAS REVIEWED AND PRESENTED BY THE CEO AND THE DIRECTOR OF TALENT MANAGEMENT AND HUMAN RESOURCES.

THE BOARD OF TRUSTEES REVIEWED AND APPROVED THE RECOMMENDATIONS OF THE EXECUTIVE COMMITTEE AND THE EXECUTIVE COMPENSATION WORKING GROUP.

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

ADJUSTMENT TO OBLIGATION UNDER SPLIT-INTEREST AGREEMENTS:	(942,000)
PENSION RELATED CHANGES:	11,398,000
ROUNDING DIFFERENCE:	1,000
TOTAL:	10,454,900

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

FORM 990, PART XII, LINE 2C

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.

ATTACHMENT 1

FORM 990, PART III, LINE 4D - OTHER PROGRAM SERVICES

DESCRIPTION	GRANTS	EXPENSES	REVENUE
HEALTH AND WELLNESS	110,881.	16,178,246.	13,312,653.
ADOLESCENCE	439,666.	8,306,432.	5,182,718.
NATIONAL CENTER FOR COMMUNITY SCHOOLS	0.	1,359,439.	490,216.
TOTALS	550,547.	25,844,117.	18,985,587.

ATTACHMENT 2

FORM 990, PART VI, LINE 17 - STATES

AL,AZ,AR,AE,CA,CO,CT,DE,

DC,FL,GA,HI,ID,IL,IN,IA,KS,KY,LA,ME,MD,MA,MI,

MN,MO,MT,NE,NV,NH,NJ,NM,NY,NC,OH,OK,OR,PA,PR,

RI,SC,TN,TX,UT,VT,VA,WA,WI,WY

ATTACHMENT 3

990, PART VII- COMPENSATION OF THE FIVE HIGHEST PAID IND. CONTRACTORS

NAME AND ADDRESS	DESCRIPTION OF SERVICES	COMPENSATION
E.W. HOWELL CO., LLC 37 WEST 37TH STREET 7TH FLOOR NEW YORK, NY 10018	CONSTRUCTION	9,368,970.
CDW DIRECT LLC PO BOX 75723 CHICAGO,, IL 60675-5723	TECHNOLOGY	636,628.

Name of the organization: THE CHILDREN'S AID SOCIETY

Employer identification number: 13-5562191

ATTACHMENT 3 (CONT'D)

990, PART VII- COMPENSATION OF THE FIVE HIGHEST PAID IND. CONTRACTORS

NAME AND ADDRESS	DESCRIPTION OF SERVICES	COMPENSATION
TEC BUILDING CONSULTANTS, INC. 641 LEXINGTON AVE. #10 NEW YORK, NY 10022	BUILDING CONSULTANTS	503,663.
AMERICAN QUALITY SERVICE 575 MADISON AVENUE NEW YORK, NY 10022	BUILDING SERVICES	411,146.
ROSIN STEINHAGEN MENDEL 801 SECOND AVE. 7TH FLOOR NEW YORK, NY 10017	LEGAL SERVICES	396,000.

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.

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Open to Public Inspection

Name of the organization

THE CHILDREN'S AID SOCIETY

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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
(1) 910 EAST 172ND STREET LLC 27-1491886 711 THIRD AVENUE NEW YORK, NY 10017	REAL ESTATE	NY	1,110,674.	13,157,650.	N/A
(2) 1218 SOUTHERN BLVD LLC 46-5337940 711 THIRD AVENUE NEW YORK, NY 10017	REAL ESTATE	NY	6.	1,742,228.	N/A
(3) NEXT GENERATION CENTER CATERING LLC 81-2375033 711 THIRD AVENUE NEW YORK, NY 10017	CATERING	NY	0.	0.	N/A
(4) 1232 SOUTHERN BLVD LLC 46-5333550 711 THIRD AVENUE NEW YORK, NY 10017	REAL ESTATE	NY	1,859,142.	50,752,825.	N/A
(5)					
(6)					

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	(g) Section 512(b)(13) controlled entity? No
(1) MILBANK HOUSING DEVELOPMENT FUND CORP. 13-3421433 711 THIRD AVENUE NEW YORK, NY 10017	DISSOLVING	NY	501 (C)(3)	LINE 10	N/A		X
(2) THE UNITED CHARITIES 13-5562368 105 EAST 22ND STREET NEW YORK, NY 10010	DISSOLVING	NY	501 (C)(3)	LINE 6	N/A		X
(3) CHILDREN'S AID COLLEGE PREP CHARTER SCHL 90-0763840 1919 PROSPECT AVENUE 3RD FLOOR BRONX, NY 10460	SEE PART VII	NY	501(C)(3)	LINE 2	N/A		X
(4)							
(5)							
(6)							
(7)							

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? Yes	(h) No	(i) Code V - UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner? Yes	(j) No	(k) Percentage ownership
(1)												
(2)												
(3)												
(4)												
(5)												
(6)												
(7)												

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	(i) No
(1) CAMPBELL DEVON PRODUCTIONS INC 13-2567508 711 THIRD AVENUE NEW YORK, NY 10017	SEE PART VII	DE	N/A	S CORP	0.	65,313.	33.0000		X
(2)									
(3)									
(4)									
(5)									
(6)									
(7)									

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.		Yes	No
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	1a		X
b Gift, grant, or capital contribution to related organization(s)	1b	X	
c Gift, grant, or capital contribution from related organization(s)	1c		X
d Loans or loan guarantees to or for related organization(s)	1d		X
e Loans or loan guarantees by related organization(s)	1e		X
f Dividends from related organization(s)	1f		X
g Sale of assets to related organization(s)	1g		X
h Purchase of assets from related organization(s)	1h		X
i Exchange of assets with related organization(s)	1i		X
j Lease of facilities, equipment, or other assets to related organization(s)	1j	X	
k Lease of facilities, equipment, or other assets from related organization(s)	1k		X
l Performance of services or membership or fundraising solicitations for related organization(s)	1l	X	
m Performance of services or membership or fundraising solicitations by related organization(s)	1m		X
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n	X	
o Sharing of paid employees with related organization(s)	1o		X
p Reimbursement paid to related organization(s) for expenses	1p		X
q Reimbursement paid by related organization(s) for expenses	1q	X	
r Other transfer of cash or property to related organization(s)	1r	X	
s Other transfer of cash or property from related organization(s)	1s		X

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)	CHILDREN'S AID COLLEGE PREP CHARTER SCHOOL	B	428,070.	FMV
(2)	CHILDREN'S AID COLLEGE PREP CHARTER SCHOOL	N,Q	592,626.	FMV
(3)	CHILDREN'S AID COLLEGE PREP CHARTER SCHOOL	L	835,284.	FMV
(4)	CHILDREN'S AID COLLEGE PREP CHARTER SCHOOL	R	759,422.	FMV
(5)	CHILDREN'S AID COLLEGE PREP CHARTER SCHOOL	J	354,000.	FMV
(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) Are all partners section 501(c)(3) organizations? Yes	(e) No	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations? Yes	(h) No	(i) Code V - UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner? Yes	(j) No	(k) Percentage ownership
(1)													
(2)													
(3)													
(4)													
(5)													
(6)													
(7)													
(8)													
(9)													
(10)													
(11)													
(12)													
(13)													
(14)													
(15)													
(16)													

Part VII Supplemental Information
Provide additional information for responses to questions on Schedule R. See instructions.

PRIMARY ACTIVITY

SCHEDULE R, PART II, COLUMN B

CHILDREN'S AID COLLEGE PREP CHARTER SCHOOL: PREPARE ELEMENTARY SCHOOL STUDENTS FOR SUCCESS IN MIDDLE SCHOOL, HIGH SCHOOL, COLLEGE AND LIFE VIA A RIGOROUS INSTRUCTIONAL EXPERIENCE ADDRESSING THEIR PHYSICAL, SOCIAL AND EMOTIONAL NEEDS.

SCHEDULE R, PART IV, COLUMN B

CAMPBELL DEVON PRODUCTIONS, INC: COLLECT ROYALTIES AND DISTRIBUTE PROCEEDS TO CHARITABLE ORGANIZATIONS.