

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

Department of the Treasury Internal Revenue Service

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

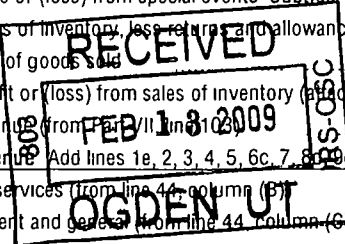
A For the 2007 calendar year, or tax year beginning JUL 1, 2007 and ending JUN 30, 2008

B Check if applicable: Address change, Name change, Initial return, Termination, Amended return, Application pending. C Name of organization: THE CHILDREN'S AID SOCIETY. D Employer identification number: 13-5562191. E Telephone number: 212-949-4800. F Accounting method: Cash, Accrual.

G Website: WWW.CHILDRENSAIDSOCIETY.ORG. J Organization type: 501(c)(3). K Check here if the organization is not a 509(a)(3) supporting organization. L Gross receipts: 354,791,432.

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances

Table with 21 rows detailing Revenue (lines 1-12), Expenses (lines 13-17), and Net Assets (lines 18-21). Includes sub-rows for contributions, program revenue, investment income, and sales of assets.



ENVELOPE POSTMARK DATE FEB 12 2009

SCANNED FEB 27 2009

Part II Statement of Functional Expenses

All organizations must complete column (A) Columns (B), (C), and (D) are required for section 501(c)(3) and (4) organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others

Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I	(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22a Grants paid from donor advised funds (attach schedule) (cash \$ 0 noncash \$ 0) If this amount includes foreign grants, check here <input type="checkbox"/>				
22b Other grants and allocations (attach schedule) (cash \$ 0 noncash \$ 0) If this amount includes foreign grants, check here <input type="checkbox"/>				
23 Specific assistance to individuals (attach schedule) STATEMENT 5	23 12,327,715.	12,327,715.		
24 Benefits paid to or for members (attach schedule)	24			
25a Compensation of current officers, directors, key employees, etc listed in Part V-A	25a 1,970,460.	1,783,491.	144,176.	42,793.
b Compensation of former officers, directors, key employees, etc listed in Part V-B	25b 283,049.	185,089.	93,519.	4,441.
c Compensation and other distributions, not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	25c			
26 Salaries and wages of employees not included on lines 25a, b, and c	26 57,991,778.	53,477,727.	3,151,635.	1,362,416.
27 Pension plan contributions not included on lines 25a, b, and c	27 2,986,620.	2,603,620.	296,487.	86,513.
28 Employee benefits not included on lines 25a - 27	28 6,520,261.	5,684,113.	647,280.	188,868.
29 Payroll taxes	29 4,871,481.	4,519,591.	235,926.	115,964.
30 Professional fundraising fees	30			
31 Accounting fees	31 192,950.	160,284.	25,132.	7,534.
32 Legal fees	32 860,208.	714,578.	112,041.	33,589.
33 Supplies	33 2,401,185.	2,325,211.	39,986.	35,988.
34 Telephone	34 625,013.	578,012.	39,001.	8,000.
35 Postage and shipping	35 149,815.	97,879.	999.	50,937.
36 Occupancy	36 4,674,663.	4,432,629.	160,022.	82,012.
37 Equipment rental and maintenance	37			
38 Printing and publications	38 512,931.	196,590.	11,975.	304,366.
39 Travel	39 1,149,482.	1,095,459.	51,022.	3,001.
40 Conferences, conventions, and meetings	40 1,039,305.	948,191.	64,080.	27,034.
41 Interest	41			
42 Depreciation, depletion, etc (attach schedule)	42 1,532,423.	1,412,468.	109,959.	9,996.
43 Other expenses not covered above (itemize)				
a	43a			
b	43b			
c	43c			
d	43d			
e	43e			
f	43f			
g SEE STATEMENT 4	43g 9,731,365.	8,072,125.	1,229,126.	430,114.
44 Total functional expenses Add lines 22a through 43g (Organizations completing columns (B)-(D), carry these totals to lines 13-15)	44 109,820,704.	100,614,772.	6,412,366.	2,793,566.

Joint Costs. Check if you are following SOP 98-2
 Are any joint costs from a combined educational campaign and fundraising solicitation reported in (B) Program services? Yes No
 If "Yes," enter (i) the aggregate amount of these joint costs \$ N/A, (ii) the amount allocated to Program services \$ N/A
 (iii) the amount allocated to Management and general \$ N/A, and (iv) the amount allocated to Fundraising \$ N/A

Part III Statement of Program Service Accomplishments (See the instructions)

Form 990 is available for public inspection and, for some people, serves as the primary or sole source of information about a particular organization. How the public perceives an organization in such cases may be determined by the information presented on its return. Therefore, please make sure the return is complete and accurate and fully describes, in Part III, the organization's programs and accomplishments.

What is the organization's primary exempt purpose? ► <u>SEE STATEMENT 10</u>	Program Service Expenses (Required for 501(c)(3) and (4) orgs, and 4947(a)(1) trusts, but optional for others)
All organizations must describe their exempt purpose achievements in a clear and concise manner. State the number of clients served, publications issued, etc. Discuss achievements that are not measurable (Section 501(c)(3) and (4) organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others.)	
a <u>SEE STATEMENT 6</u> 	
(Grants and allocations \$ _____) If this amount includes foreign grants, check here ► <input type="checkbox"/>	42,083,346.
b <u>SEE STATEMENT 7</u> 	
(Grants and allocations \$ _____) If this amount includes foreign grants, check here ► <input type="checkbox"/>	18,846,003.
c <u>SEE STATEMENT 8</u> 	
(Grants and allocations \$ _____) If this amount includes foreign grants, check here ► <input type="checkbox"/>	22,209,024.
d <u>SEE STATEMENT 9</u> 	
(Grants and allocations \$ _____) If this amount includes foreign grants, check here ► <input type="checkbox"/>	13,746,457.
e Other program services (attach schedule) <u>SEE STATEMENT 11</u> 	
(Grants and allocations \$ _____) If this amount includes foreign grants, check here ► <input type="checkbox"/>	3,729,942.
f Total of Program Service Expenses (should equal line 44, column (B), Program services) ►	100,614,772.

Part IV Balance Sheets (See the instructions)

Note: Where required, attached schedules and amounts within the description column should be for end-of-year amounts only

		(A) Beginning of year		(B) End of year
Assets	45 Cash - non-interest-bearing	73,751.	45	86,703.
	46 Savings and temporary cash investments	5,509,015.	46	4,979,027.
	47 a Accounts receivable	47a 14,072,197.		
	b Less allowance for doubtful accounts	47b 690,898.	11,577,802.	47c 13,381,299.
	48 a Pledges receivable	48a 9,940,666.		
	b Less allowance for doubtful accounts	48b	9,998,016.	48c 9,940,666.
	49 Grants receivable			49
	50 a Receivables from current and former officers, directors, trustees, and key employees			50a
	b Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)			50b
	51 a Other notes and loans receivable	51a		51c
	b Less allowance for doubtful accounts	51b		
	52 Inventories for sale or use			52
	53 Prepaid expenses and deferred charges		329,871.	53 554,289.
	54 a Investments - publicly-traded securities STMT 15 <input type="checkbox"/> Cost <input checked="" type="checkbox"/> FMV		245,394,525.	54a 203,071,740.
	b Investments - other securities STMT 14 <input type="checkbox"/> Cost <input checked="" type="checkbox"/> FMV		42,787,780.	54b 60,422,158.
55 a Investments - land, buildings, and equipment, basis	55a			
b Less accumulated depreciation	55b		55c	
56 Investments - other		0.	56 0.	
57 a Land, buildings, and equipment: basis	57a 36,914,354.			
b Less accumulated depreciation STMT 12	57b 20,087,255.	14,948,881.	57c 16,827,099.	
58 Other assets including program-related investments (describe ► ACCRUED INTEREST RECEIVABLE)		861,229.	58 788,800.	
59 Total assets (must equal line 74) Add lines 45 through 58		331,480,870.	59 310,051,781.	
Liabilities	60 Accounts payable and accrued expenses	25,660,124.	60	32,171,318.
	61 Grants payable		61	
	62 Deferred revenue	2,809,277.	62	2,345,435.
	63 Loans from officers, directors, trustees, and key employees		63	
	64 a Tax-exempt bond liabilities		64a	
	b Mortgages and other notes payable		64b	
	65 Other liabilities (describe ► SEE STATEMENT 13)		837,364.	65 1,040,668.
66 Total liabilities. Add lines 60 through 65		29,306,765.	66 35,557,421.	
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74.			
	67 Unrestricted	267,646,978.	67	244,056,602.
	68 Temporarily restricted	30,185,086.	68	24,997,129.
	69 Permanently restricted	4,342,041.	69	5,440,629.
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 70 through 74			
	70 Capital stock, trust principal, or current funds		70	
	71 Paid-in or capital surplus, or land, building, and equipment fund		71	
	72 Retained earnings, endowment, accumulated income, or other funds		72	
	73 Total net assets or fund balances Add lines 67 through 69 or lines 70 through 72 (Column (A) must equal line 19 and column (B) must equal line 21)		302,174,105.	73 274,494,360.
	74 Total liabilities and net assets/fund balances. Add lines 66 and 73		331,480,870.	74 310,051,781.

Part IV-A Reconciliation of Revenue per Audited Financial Statements With Revenue per Return (See the instructions)

a	Total revenue, gains, and other support per audited financial statements		a	832,322.61
b	Amounts included on line a but not on Part I, line 12:			
1	Net unrealized gains on investments	b1		
2	Donated services and use of facilities	b2		
3	Recoveries of prior year grants	b3		
4	Other (specify) _____	b4		
	Add lines b1 through b4		b	-34,147,933.
c	Subtract line b from line a		c	117,380,194.
d	Amounts included on Part I, line 12, but not on line a:			
1	Investment expenses not included on Part I, line 6b	d1		
2	Other (specify) _____	d2		
	Add lines d1 and d2		d	0.
e	Total revenue (Part I, line 12) Add lines c and d		e	117,380,194.

Part IV-B Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

a	Total expenses and losses per audited financial statements		a	109,820,704.
b	Amounts included on line a but not on Part I, line 17:			
1	Donated services and use of facilities	b1		
2	Prior year adjustments reported on Part I, line 20	b2		
3	Losses reported on Part I, line 20	b3		
4	Other (specify) _____	b4		
	Add lines b1 through b4		b	0.
c	Subtract line b from line a		c	109,820,704.
d	Amounts included on Part I, line 17, but not on line a:			
1	Investment expenses not included on Part I, line 6b	d1		
2	Other (specify) _____	d2		
	Add lines d1 and d2		d	0.
e	Total expenses (Part I, line 17) Add lines c and d		e	109,820,704.

Part V-A Current Officers, Directors, Trustees, and Key Employees (List each person who was an officer, director, trustee, or key employee at any time during the year even if they were not compensated) (See the instructions)

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (If not paid, enter -0-)	(D) Contributions to employee benefit plans & deferred compensation plans	(E) Expense account and other allowances
SEE STATEMENT 16		1,006,035.	964,425.	0.

Part V-A Current Officers, Directors, Trustees, and Key Employees (continued) Yes No

<p>75 a Enter the total number of officers, directors, and trustees permitted to vote on organization business at board meetings ▶ 42</p> <p>b Are any officers, directors, trustees, or key employees listed in Form 990, Part V-A, or highest compensated employees listed in Schedule A, Part I, or highest compensated professional and other independent contractors listed in Schedule A, Part II-A or II-B, related to each other through family or business relationships? If "Yes," attach a statement that identifies the individuals and explains the relationship(s) SEE STATEMENT 18</p> <p>c Do any officers, directors, trustees, or key employees listed in Form 990, Part V-A, or highest compensated employees listed in Schedule A, Part I, or highest compensated professional and other independent contractors listed in Schedule A, Part II-A or II-B, receive compensation from any other organizations, whether tax exempt or taxable, that are related to the organization? See the instructions for the definition of "related organization." If "Yes," attach a statement that includes the information described in the instructions.</p> <p>d Does the organization have a written conflict of interest policy?</p>	75b	X		
	75c		X	
	75d	X		

Part V-B Former Officers, Directors, Trustees, and Key Employees That Received Compensation or Other Benefits (If any former officer, director, trustee, or key employee received compensation or other benefits (described below) during the year, list that person below and enter the amount of compensation or other benefits in the appropriate column. See the instructions.)

(A) Name and address	(B) Loans and Advances	(C) Compensation (if not paid, enter -0-)	(D) Contributions to employee benefit plans & deferred compensation plans	(E) Expense account and other allowances
PHILIP COLTOFF 105 EAST 22ND STREET NEW YORK, NY. 10010	0.	125,000.	5,544.	0.
VICTOR REMER 105 EAST 22ND STREET NEW YORK, NY. 10010	0.	61,572.	7,938.	0.
TRUDA JEWETT 105 EAST 22ND STREET NEW YORK, NY. 10010	0.	78,000.	4,995.	0.

Part VI Other Information (See the instructions) Yes No

<p>76 Did the organization make a change in its activities or methods of conducting activities? If "Yes," attach a detailed statement of each change</p> <p>77 Were any changes made in the organizing or governing documents but not reported to the IRS? If "Yes," attach a conformed copy of the changes</p> <p>78 a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return? b If "Yes," has it filed a tax return on Form 990-T for this year?</p> <p>79 Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement</p> <p>80 a Is the organization related (other than by association with a statewide or nationwide organization) through common membership, governing bodies, trustees, officers, etc., to any other exempt or nonexempt organization? b If "Yes," enter the name of the organization SEE STATEMENT 17 _____ and check whether it is <input type="checkbox"/> exempt or <input type="checkbox"/> nonexempt</p> <p>81 a Enter direct and indirect political expenditures (See line 81 instructions.) 81a 0.</p> <p>b Did the organization file Form 1120-POL for this year?</p>	76		X
	77	X	
	78a	X	
	78b	X	
	79		X
	80a	X	
	81b		X

Part VI Other Information (continued)		Yes	No
82 a	Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value?	82a	X
b	If "Yes," you may indicate the value of these items here. Do not include this amount as revenue in Part I or as an expense in Part II. (See instructions in Part III.)	82b	
83 a	Did the organization comply with the public inspection requirements for returns and exemption applications?	83a	X
b	Did the organization comply with the disclosure requirements relating to <i>quid pro quo</i> contributions?	83b	X
84 a	Did the organization solicit any contributions or gifts that were not tax deductible?	84a	X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	84b	N/A
85 a	501(c)(4), (5), or (6). Were substantially all dues nondeductible by members?	85a	N/A
b	Did the organization make only in-house lobbying expenditures of \$2,000 or less?	85b	N/A
	If "Yes" was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization received a waiver for proxy tax owed for the prior year		
c	Dues, assessments, and similar amounts from members	85c	N/A
d	Section 162(e) lobbying and political expenditures	85d	N/A
e	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices	85e	N/A
f	Taxable amount of lobbying and political expenditures (line 85d less 85e)	85f	N/A
g	Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?	85g	N/A
h	If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year?	85h	N/A
86	501(c)(7) organizations Enter: a Initiation fees and capital contributions included on line 12	86a	N/A
b	Gross receipts, included on line 12, for public use of club facilities	86b	N/A
87	501(c)(12) organizations. Enter a Gross income from members or shareholders	87a	N/A
b	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)	87b	N/A
88 a	At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Part IX	88a	X
b	At any time during the year, did the organization, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Part XI	88b	X
89 a	501(c)(3) organizations Enter: Amount of tax imposed on the organization during the year under: section 4911 <u>0.</u> , section 4912 <u>0.</u> , section 4955 <u>0.</u>		
b	501(c)(3) and 501(c)(4) organizations Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach a statement explaining each transaction	89b	X
c	Enter. Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 <u>0.</u>		
d	Enter. Amount of tax on line 89c, above, reimbursed by the organization <u>0.</u>		
e	All organizations At any time during the tax year, was the organization a party to a prohibited tax shelter transaction?	89e	X
f	All organizations Did the organization acquire a direct or indirect interest in any applicable insurance contract?	89f	X
g	For supporting organizations and sponsoring organizations maintaining donor advised funds Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	89g	X
90 a	List the states with which a copy of this return is filed <u>SEE STATEMENT 19</u>		
b	Number of employees employed in the pay period that includes March 12, 2007	90b	1954
91 a	The books are in care of <u>THE ORGANIZATION</u> Telephone no <u>212-949-4800</u> Located at <u>105 EAST 22ND STREET, NEW YORK, NY</u> ZIP + 4 <u>10010</u>		
b	At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? If "Yes," enter the name of the foreign country <u>N/A</u> See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts	91b	X

Part VI Other Information (continued) **Yes** **No**

c At any time during the calendar year, did the organization maintain an office outside of the United States? 91c
 If "Yes," enter the name of the foreign country N/A

92 Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041- Check here
 and enter the amount of tax-exempt interest received or accrued during the tax year 92 N/A

Part VII Analysis of Income-Producing Activities (See the instructions.)

Note: Enter gross amounts unless otherwise indicated

	Unrelated business income		Excluded by section 512, 513, or 514		(E) Related or exempt function income
	(A) Business code	(B) Amount	(C) Exclu- sion code	(D) Amount	
93 Program service revenue:					
a PROGRAM FEES					8,624,998.
b					
c					
d					
e					
f Medicare/Medicaid payments					
g Fees and contracts from government agencies					51,165,358.
94 Membership dues and assessments					
95 Interest on savings and temporary cash investments			14	7,806.	
96 Dividends and interest from securities			14	4,523,396.	
97 Net rental income or (loss) from real estate:					
a debt-financed property					
b not debt-financed property					
98 Net rental income or (loss) from personal property					
99 Other investment income					
100 Gain or (loss) from sales of assets other than inventory			18	17,932,511.	
101 Net income or (loss) from special events			01	104,894.	
102 Gross profit or (loss) from sales of inventory					
103 Other revenue:					
a					
b					
c					
d					
e					
104 Subtotal (add columns (B), (D), and (E))		0.		22,568,607.	59,790,356.
105 Total (add line 104, columns (B), (D), and (E))					82,358,963.

Note: Line 105 plus line 1e, Part I, should equal the amount on line 12, Part I.

Part VIII Relationship of Activities to the Accomplishment of Exempt Purposes (See the instructions.)

Line No.	Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes)
▼	SEE STATEMENT 20

Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities (See the instructions.)

(A) Name, address, and EIN of corporation, partnership, or disregarded entity	(B) Percentage of ownership interest	(C) Nature of activities	(D) Total income	(E) End-of-year assets
N/A	%			
	%			
	%			
	%			

Part X Information Regarding Transfers Associated with Personal Benefit Contracts (See the instructions.)

(a) Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? Yes No

(b) Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? Yes No

Note: If "Yes" to (b), file Form 8870 and Form 4720 (see instructions)

Part XI Information Regarding Transfers To and From Controlled Entities. Complete only if the organization is a controlling organization as defined in section 512(b)(13) N/A

106 Did the reporting organization make any transfers to a controlled entity as defined in section 512(b)(13) of the Code? If "Yes," complete the schedule below for each controlled entity

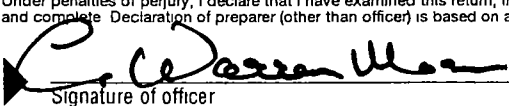
	(A) Name, address, of each controlled entity	(B) Employer Identification Number	(C) Description of transfer	(D) Amount of transfer
a	-----			
b	-----			
c	-----			
Totals				

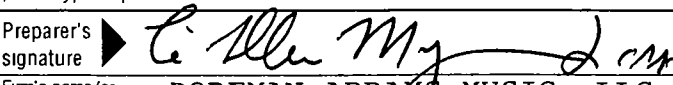
107 Did the reporting organization receive any transfers from a controlled entity as defined in section 512(b)(13) of the Code? If "Yes," complete the schedule below for each controlled entity

	(A) Name, address, of each controlled entity	(B) Employer Identification Number	(C) Description of transfer	(D) Amount of transfer
a	-----			
b	-----			
c	-----			
Totals				

108 Did the organization have a binding written contract in effect on August 17, 2006, covering the interest, rents, royalties, and annuities described in question 107 above?

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.

Please Sign Here:  Date: 2/11/09
 Signature of officer: C. WARREN MOSES, CEO
 Type or print name and title

Paid Preparer's Use Only: Preparer's signature:  Date: 2-10-09 Check if self-employed: Preparer's SSN or PTIN (See Gen. Inst. X):
 Firm's name (or yours if self-employed), address, and ZIP + 4: DORFMAN ABRAMS MUSIC, LLC
 21-00 ROUTE 208 SOUTH
 FAIR LAWN, NEW JERSEY 07410
 EIN: Phone no: (201) 796-9100

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Name of the organization

Organization Exempt Under Section 501(c)(3)

(Except Private Foundation) and Section 501(e), 501(f), 501(k),
501(n), or 4947(a)(1) Nonexempt Charitable Trust

Supplementary Information-(See separate instructions.)
▶ **MUST be completed by the above organizations and attached to their Form 990 or 990-EZ**

OMB No 1545-0047

2007

THE CHILDREN'S AID SOCIETY

Employer identification number

13 5562191

Part I Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees

(See page 1 of the instructions List each one If there are none, enter "None ")

(a) Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
LISA HANDWERKER, MD 105 E. 22ND STREET, NEW YORK, NY 10011	MEDICAL DIRECTOR 40.00	175,913.	45,843.	
WAYNE GREEN, MD 105 E. 22ND STREET, NEW YORK, NY 10011	PSYCHIATRIST 40.00	168,789.	29,429.	
PATRICIA ABANILLA, MD 105 E. 22ND STREET, NEW YORK, NY 10011	PSYCHIATRIST 40.00	152,692.	13,947.	
PATRICIA GRAYSON 105 E. 22ND STREET, NEW YORK, NY 10011	ASST EXEC DIRECTOR 40.00	235,064.	49,660.	
JANE QUINN 105 E. 22ND STREET, NEW YORK, NY 10011	ASST EXEC DIRECTOR 40.00	229,981.	66,806.	
Total number of other employees paid over \$50,000	▶ 269			

Part II-A Compensation of the Five Highest Paid Independent Contractors for Professional Services

(See page 2 of the instructions List each one (whether individuals or firms) If there are none, enter "None ")

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
LONE PINON 2 GREENWICH PLAZA, GREENWICH, CT 06830	INVESTMENT ADVISORS	859,649.
MT SINAI HOSPITAL 1 GUSTAVE LEVY PL., NEW YORK, NY 10129	HEALTH SERVICES	615,167.
ROSIN STEINHAGEN MENDEL 630 THIRD AVENUE, NEW YORK, NY 10017	LEGAL SERVICES	573,266.
MICHAEL A CARRERA LTD 444 E 82ND ST, NEW YORK, NY 10028	HEALTH SERVICES	420,000.
JUBILEE TAX EXEMPT PARTNERS, LP 4 CONNELL DRIVE SUITE 5100, BERKELEY HEIGHTS, NJ	INVESTMENT ADVISORS	392,000.
Total number of others receiving over \$50,000 for professional services	▶ 22	

Part II-B Compensation of the Five Highest Paid Independent Contractors for Other Services

(List each contractor who performed services other than professional services, whether individuals or firms If there are none, enter "None " See page 2 of the instructions)

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
BRISTOL CONSTRUCTION CO. 545 8TH AVE, NEW YORK, NY 10018	CONSTRUCTION	1,575,218.
LANE ASSOCIATES 3916 LONG BEACH RD, ISLAND PARK, NY 11558	CONSTRUCTION	284,248.
REGIONAL SHOTCRETE CORP. 469 FAIR OAKS RD, MIDDLETOWN, NY 10940	CONSTRUCTION	254,200.
ALDA BUILDING CO. 128 NORMAN AVE, BROOKLYN, NY 11222	CONSTRUCTION	205,627.
DP CONSULTING CORP. 303 5TH AVE, NEW YORK, NY 10016	CONSTRUCTION	148,900.
Total number of other contractors receiving over \$50,000 for other services	▶ 7	

Part III Statements About Activities (See page 2 of the instructions)

		Yes	No
1	During the year, has the organization attempted to influence national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid or incurred in connection with the lobbying activities ▶ \$ _____ \$ <u>26,354.</u> (Must equal amounts on line 38, Part VI-A, or line i of Part VI-B) <u>VI-B, LINE I</u>	X	
Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A Other organizations checking "Yes" must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities			
2	During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or with any taxable organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal beneficiary? (If the answer to any question is "Yes," attach a detailed statement explaining the transactions.)		
a	Sale, exchange, or leasing of property?		X
b	Lending of money or other extension of credit?		X
c	Furnishing of goods, services, or facilities? SEE STATEMENT 22	X	
d	Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)? SEE STATEMENT 23	X	
e	Transfer of any part of its income or assets?		X
3 a	Did the organization make grants for scholarships, fellowships, student loans, etc? (If "Yes," attach an explanation of how the organization determines that recipients qualify to receive payments) SEE STATEMENT 24	X	
b	Did the organization have a section 403(b) annuity plan for its employees?	X	
c	Did the organization receive or hold an easement for conservation purposes, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," attach a detailed statement		X
d	Did the organization provide credit counseling, debt management, credit repair, or debt negotiation services?	X	
4 a	Did the organization maintain any donor advised funds? If "Yes," complete lines 4b through 4g If "No," complete lines 4f and 4g		X
b	Did the organization make any taxable distributions under section 4966? N/A		
c	Did the organization make a distribution to a donor, donor advisor, or related person? N/A		
d	Enter the total number of donor advised funds owned at the end of the tax year ▶	N/A	
e	Enter the aggregate value of assets held in all donor advised funds owned at the end of the tax year ▶	N/A	
f	Enter the total number of separate funds or accounts owned at the end of the year (excluding donor advised funds included on line 4d) where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts ▶	0.	
g	Enter the aggregate value of assets in all funds or accounts included on line 4f at the end of the tax year ▶	0.	

Part IV Reason for Non-Private Foundation Status (See pages 4 through 8 of the instructions)

I certify that the organization is not a private foundation because it is (Please check only ONE applicable box)

- 5 A church, convention of churches, or association of churches Section 170(b)(1)(A)(i)
- 6 A school Section 170(b)(1)(A)(ii) (Also complete Part V)
- 7 A hospital or a cooperative hospital service organization Section 170(b)(1)(A)(iii)
- 8 A federal, state, or local government or governmental unit Section 170(b)(1)(A)(v)
- 9 A medical research organization operated in conjunction with a hospital Section 170(b)(1)(A)(iii) Enter the hospital's name, city, and state
- 10 An organization operated for the benefit of a college or university owned or operated by a governmental unit Section 170(b)(1)(A)(iv) (Also complete the **Support Schedule** in Part IV-A)
- 11a An organization that normally receives a substantial part of its support from a governmental unit or from the general public Section 170(b)(1)(A)(vi) (Also complete the **Support Schedule** in Part IV-A)
- 11b A community trust Section 170(b)(1)(A)(vi) (Also complete the **Support Schedule** in Part IV-A)
- 12 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 charitable, etc , 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) (Also complete the **Support Schedule** in Part IV-A)
- 13 An organization that is not controlled by any disqualified persons (other than foundation managers) and otherwise meets the requirements of section 509(a)(3) Check the box that describes the type of supporting organization
 Type I Type II Type III-Functionally Integrated Type III-Other

Provide the following information about the supported organizations (See page 8 of the instructions)

(a) Name(s) of supported organization(s)	(b) Employer identification number (EIN)	(c) Type of organization (described in lines 5 through 12 above or IRC section)	(d) Is the supported organization listed in the supporting organization's governing documents?		(e) Amount of support
			Yes	No	
Total					▶

- 14 An organization organized and operated to test for public safety Section 509(a)(4) (See page 8 of the instructions)

Part IV-A Support Schedule (Complete only if you checked a box on line 10, 11, or 12) Use cash method of accounting.
 Note: You may use the worksheet in the instructions for converting from the accrual to the cash method of accounting

Calendar year (or fiscal year beginning in)	(a) 2006	(b) 2005	(c) 2004	(d) 2003	(e) Total
15 Gifts, grants, and contributions received (Do not include unusual grants See line 28)	72886063.	71973945.	60988507.	58767150.	264615665.
16 Membership fees received					
17 Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is related to the organization's charitable, etc., purpose	8,015,681.	8,278,401.	7,617,798.	7,820,055.	31,731,935.
18 Gross income from interest, dividends, amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, income from similar sources, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975	4,797,268.	4,846,203.	3,718,151.	4,053,287.	17,414,909.
19 Net income from unrelated business activities not included in line 18					
20 Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf					
21 The value of services or facilities furnished to the organization by a governmental unit without charge Do not include the value of services or facilities generally furnished to the public without charge					
22 Other income Attach a schedule Do not include gain or (loss) from sale of capital assets					
23 Total of lines 15 through 22	85699012.	85098549.	72324456.	70640492.	313762509.
24 Line 23 minus line 17	77683331.	76820148.	64706658.	62820437.	282030574.
25 Enter 1% of line 23	856,990.	850,985.	723,245.	706,405.	

26 Organizations described on lines 10 or 11: a Enter 2% of amount in column (e), line 24	26a	5,640,611.
b Prepare a list for your records to show the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 2003 through 2006 exceeded the amount shown in line 26a Do not file this list with your return. Enter the total of all these excess amounts	26b	0.
c Total support for section 509(a)(1) test Enter line 24, column (e)	26c	282030574.
d Add Amounts from column (e) for lines 18 <u>17,414,909.</u> 19 _____ 22 _____ 26b _____	26d	17,414,909.
e Public support (line 26c minus line 26d total)	26e	264615665.
f Public support percentage (line 26e (numerator) divided by line 26c (denominator))	26f	93.8252%

27 Organizations described on line 12: a For amounts included in lines 15, 16, and 17 that were received from a "disqualified person," prepare a list for your records to show the name of, and total amounts received in each year from, each "disqualified person" Do not file this list with your return. Enter the sum of such amounts for each year N/A	(2006)	(2005)	(2004)	(2003)
b For any amount included in line 17 that was received from each person (other than "disqualified persons"), prepare a list for your records to show the name of, and amount received for each year, that was more than the larger of (1) the amount on line 25 for the year or (2) \$5,000 (include in the list organizations described in lines 5 through 11b, as well as individuals) Do not file this list with your return. After computing the difference between the amount received and the larger amount described in (1) or (2), enter the sum of these differences (the excess amounts) for each year N/A	(2006)	(2005)	(2004)	(2003)
c Add Amounts from column (e) for lines 15 _____ 16 _____ 17 _____ 20 _____ 21 _____	27c	N/A		
d Add Line 27a total _____ and line 27b total _____	27d	N/A		
e Public support (line 27c total minus line 27d total)	27e	N/A		
f Total support for section 509(a)(2) test Enter amount on line 23, column (e) 27f N/A	27f	N/A		
g Public support percentage (line 27e (numerator) divided by line 27f (denominator))	27g	N/A %		
h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator))	27h	N/A %		

28 Unusual Grants. For an organization described in line 10, 11, or 12 that received any unusual grants during 2003 through 2006, prepare a list for your records to show, for each year, the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant Do not file this list with your return Do not include these grants in line 15

NONE

Part V Private School Questionnaire (See page 9 of the instructions)

N/A

(To be completed ONLY by schools that checked the box on line 6 in Part IV)

		Yes	No
29	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?		
30	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?		
31	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe, if "No," please explain (If you need more space, attach a separate statement)		

32	Does the organization maintain the following		
a	Records indicating the racial composition of the student body, faculty, and administrative staff?		
b	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?		
c	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?		
d	Copies of all material used by the organization or on its behalf to solicit contributions? If you answered "No" to any of the above, please explain (If you need more space, attach a separate statement)		

33	Does the organization discriminate by race in any way with respect to		
a	Students' rights or privileges?		
b	Admissions policies?		
c	Employment of faculty or administrative staff?		
d	Scholarships or other financial assistance?		
e	Educational policies?		
f	Use of facilities?		
g	Athletic programs?		
h	Other extracurricular activities? If you answered "Yes" to any of the above, please explain (If you need more space, attach a separate statement)		

34 a	Does the organization receive any financial aid or assistance from a governmental agency?		
b	Has the organization's right to such aid ever been revoked or suspended? If you answered "Yes" to either 34a or b, please explain using an attached statement		
35	Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05 of Rev Proc 75-50, 1975-2 C B 587, covering racial nondiscrimination? If "No," attach an explanation		

Part VI-A Lobbying Expenditures by Electing Public Charities (See page 11 of the instructions)

N/A

(To be completed ONLY by an eligible organization that filed Form 5768)

Check a if the organization belongs to an affiliated group

Check b if you checked "a" and "limited control" provisions apply

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred)		(a) Affiliated group totals	(b) To be completed for all electing organizations
		N/A	
36	Total lobbying expenditures to influence public opinion (grassroots lobbying)	36	
37	Total lobbying expenditures to influence a legislative body (direct lobbying)	37	
38	Total lobbying expenditures (add lines 36 and 37)	38	
39	Other exempt purpose expenditures	39	
40	Total exempt purpose expenditures (add lines 38 and 39)	40	
41	Lobbying nontaxable amount Enter the amount from the following table - If the amount on line 40 is - The lobbying nontaxable amount is - Not over \$500,000 20% of the amount on line 40 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	41	
42	Grassroots nontaxable amount (enter 25% of line 41)	42	
43	Subtract line 42 from line 36 Enter -0- if line 42 is more than line 36	43	
44	Subtract line 41 from line 38 Enter -0- if line 41 is more than line 38	44	

Caution: If there is an amount on either line 43 or line 44, you must file Form 4720.

4-Year Averaging Period Under Section 501(h)

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below See the instructions for lines 45 through 50 on page 13 of the instructions)

Calendar year (or fiscal year beginning in) ▶	Lobbying Expenditures During 4-Year Averaging Period				N/A
	(a) 2007	(b) 2006	(c) 2005	(d) 2004	(e) Total
45	Lobbying nontaxable amount				0.
46	Lobbying ceiling amount (150% of line 45(e))				0.
47	Total lobbying expenditures				0.
48	Grassroots nontaxable amount				0.
49	Grassroots ceiling amount (150% of line 48(e))				0.
50	Grassroots lobbying expenditures				0.

Part VI-B Lobbying Activity by Nonelecting Public Charities

(For reporting only by organizations that did not complete Part VI-A) (See page 14 of the instructions)

During the year, did the organization attempt to influence national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of

- a Volunteers
- b Paid staff or management (Include compensation in expenses reported on lines c through h.)
- c Media advertisements
- d Mailings to members, legislators, or the public
- e Publications, or published or broadcast statements
- f Grants to other organizations for lobbying purposes
- g Direct contact with legislators, their staffs, government officials, or a legislative body
- h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means
- i Total lobbying expenditures (Add lines c through h.)

Yes	No	Amount
	X	
	X	
	X	
	X	
	X	
	X	
X		26,354.
	X	
		26,354.

SEE STATEMENT 25

Part VII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations (See page 14 of the instructions)

51 Did the reporting organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?

a Transfers from the reporting organization to a noncharitable exempt organization of

(i) Cash

(ii) Other assets

b Other transactions

(i) Sales or exchanges of assets with a noncharitable exempt organization

(ii) Purchases of assets from a noncharitable exempt organization

(iii) Rental of facilities, equipment, or other assets

(iv) Reimbursement arrangements

(v) Loans or loan guarantees

(vi) Performance of services or membership or fundraising solicitations

c Sharing of facilities, equipment, mailing lists, other assets, or paid employees

d If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting organization. If the organization received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received

	Yes	No
51a(i)		X
a(ii)		X
b(i)		X
b(ii)		X
b(iii)		X
b(iv)		X
b(v)		X
b(vi)		X
c		X

N/A

(a) Line no	(b) Amount involved	(c) Name of noncharitable exempt organization	(d) Description of transfers, transactions, and sharing arrangements

52 a Is the organization directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? Yes No

b If "Yes," complete the following schedule N/A

(a) Name of organization	(b) Type of organization	(c) Description of relationship

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Asset No	Description	Date Acquired	Method	Life	C o n v	Line No	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	* Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
1	LAND	VARIOUS		.000		HXL6	1,250,459.				1,250,459.		0.		
2	LAND IMPROVEMENTS	VARIOUS		.000		HXL6	644,491.				644,491.	339,327.	40,966.	40,966.	380,293.
3	COMPUTERS	VARIOUS		.000		HXL6	730,175.				730,175.	637,781.	27,859.	27,859.	665,640.
4	BUILDING IMPROVEMENTS	VARIOUS		.000		HXL6	1,332,585.				1,332,585.	7,381,530.	565,936.	7,947,466.	
5	LEASEHOLD IMPROVEMENTS	VARIOUS		.000		HXL6	1,321,378.				1,321,378.	673,668.	105,411.	105,411.	779,079.
6	BUILDING ASSETS	VARIOUS		.000		HXL6	1,317,5027.				1,317,5027.	7,835,225.	283,480.	8,119,705.	
7	AUTO'S & TRUCKS	VARIOUS		.000		HXL6	176,935.				176,935.	140,140.	15,585.	15,585.	155,725.
8	FURNITURE & EQUIPMENT	VARIOUS		.000		HXL6	1,867,542.				1,867,542.	1,446,639.	109,186.	1,555,815.	
9	CONSTRUCTION IN PROGRESS	VARIOUS		.000		HXL6	14,938.				14,938.		0.	0.	
10	BUILDING ASSETS	VARIOUS		.000		HXL6	20,000.				20,000.	188.	500.	688.	
11	BUILDING IMPROVEMENTS	VARIOUS		.000		HXL6	1,536,325.				1,536,325.	66,016.	102,422.	168,438.	
12	COMPUTERS	VARIOUS		.000		HXL6	184,354.				184,354.	12,240.	36,871.	49,111.	
13	FURNITURE & EQUIPMENT	VARIOUS		.000		HXL6	241,038.				241,038.	16,597.	24,104.	40,701.	
14	LEASEHOLD IMPROVEMENTS	VARIOUS		.000		HXL6	70,578.				70,578.	4,461.	4,705.	9,156.	
15	LAND IMPROVEMENTS	VARIOUS		.000		HXL6	6,400.				6,400.	30.	427.	457.	
16	CONSTRUCTION IN PROGRESS	VARIOUS		.000		HXL6	185,101.				185,101.		0.	0.	
17	AUTOS & TRUCKS	VARIOUS		.000		HXL6	27,838.				27,838.		3,667.	3,667.	
18	BUILDING IMPROVEMENTS	VARIOUS		.000		HXL6	544,058.				544,058.		23,156.	23,156.	

728111
08-23-07

(D) - Asset disposed

* ITC, Salvage, Bonus, Commercial Revitalization Deduction, GO Zone

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Asset No	Description	Date Acquired	Method	Life	C o n v	Line No	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	* Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
19	COMPUTERS	VARIOUS		.000		HY16	544,957.				544,957.			14,482.	14,482.
20	FURNITURE & EQUIPMENT	VARIOUS		.000		HY16	467,155.				467,155.			31,042.	31,042.
21	LEASEHOLD IMPROVEMENTS	VARIOUS		.000		HY16	2,259,493.				2,259,493.			132,285.	132,285.
22	LAND IMPROVEMENTS	VARIOUS		.000		HY16	312,527.				312,527.			10,339.	10,339.
23				.000		HY16								0.	
	* TOTAL 990 PAGE 2 DEPR						36914354.				36914354.	18554832.		1,532,423.	20087255.

FORM 990	GAIN (LOSS) FROM PUBLICLY TRADED SECURITIES			STATEMENT	1
DESCRIPTION	GROSS SALES PRICE	COST OR OTHER BASIS	EXPENSE OF SALE	NET GAIN OR (LOSS)	
	255,107,463.	237,174,952.	0.	17,932,511.	
TO FORM 990, PART I, LINE 8	255,107,463.	237,174,952.	0.	17,932,511.	

FORM 990	SPECIAL EVENTS AND ACTIVITIES				STATEMENT	2
DESCRIPTION OF EVENT	GROSS RECEIPTS	CONTRIBUT. INCLUDED	GROSS REVENUE	DIRECT EXPENSES	NET INCOME OR (LOSS)	
9TH ANNUAL GOLF OUTING	322,700.	155,850.	166,850.	201,780.	-34,930.	
GREENWICH VILLAGE BENEFIT	101,495.	3,350.	98,145.	11,334.	86,811.	
RHINELANDER GALA	87,993.	23,514.	64,479.	20,972.	43,507.	
OTHER VARIOUS EVENTS	23,854.	12,148.	11,706.	2,200.	9,506.	
TO FM 990, PART I, LINE 9	536,042.	194,862.	341,180.	236,286.	104,894.	

FORM 990	OTHER CHANGES IN NET ASSETS OR FUND BALANCES		STATEMENT	3
DESCRIPTION				AMOUNT
UNREALIZED LOSS ON INVESTMENTS				-34,147,933.
EFFECT OF ADOPTION OF FASB 158				-1,663,193.
EFFECT OF ADOPTION OF SUPPLEMENTAL EXEC. RETIREMENT PLAN				-492,213.
PENSION-RELATED CHANGES OTHER THAN NET PERIODIC PENSION COST				1,064,039.
ROUNDING				65.
TOTAL TO FORM 990, PART I, LINE 20				-35,239,235.

FORM 990	OTHER EXPENSES			STATEMENT 4
DESCRIPTION	(A) TOTAL	(B) PROGRAM SERVICES	(C) MANAGEMENT AND GENERAL	(D) FUNDRAISING
PROFESSIONAL FEES	6,423,797.	5,336,270.	836,691.	250,836.
REPAIRS & MAINTENANCE	223,028.	203,025.	17,003.	3,000.
INSURANCE EXPENSE	731,069.	681,133.	34,955.	14,981.
MEMBERSHIP DUES	125,881.	68,935.	51,951.	4,995.
FOOD	1,023,455.	981,436.	30,014.	12,005.
COMPUTER PROCESSING	700,032.	574,847.	89,132.	36,053.
MISCELLANEOUS EXPENSES	208,382.	120,220.	55,101.	33,061.
MISCELLANEOUS SPECIAL EVENTS	295,721.	106,259.	114,279.	75,183.
TOTAL TO FM 990, LN 43	9,731,365.	8,072,125.	1,229,126.	430,114.

FORM 990	SPECIFIC ASSISTANCE TO INDIVIDUALS	STATEMENT 5
DESCRIPTION	AMOUNT	
CAMPS	280,994.	
EDUCATION FEES	1,222,972.	
CHILDRENS CENTERS	1,392,968.	
FAMILY, CHILD AND COMMUNITY SERVICES	390,991.	
ADOPTION AND FOSTER CARE	8,678,799.	
WORLD TRADE CENTER RELIEF	109,997.	
TEEN PREGNANCY PREVENTION	69,998.	
MEDICAL, DENTAL AND HOSPITAL EXPENSES	90,998.	
SUPPORT SERVICES	89,998.	
TOTAL TO FORM 990, PART II, LINE 23	12,327,715.	

DESCRIPTION OF PROGRAM SERVICE ONE--ENGAGING CHILDREN IN COMMUNITY CENTERS AND COMMUNITY SCHOOLS

BOLSTERING CHILDREN, FAMILIES, AND COMMUNITIES THROUGH MULTI-SERVICE CHILDREN'S CENTERS: CHILDREN'S AID'S 14 COMMUNITY-BASED CENTERS, LOCATED ACROSS NEW YORK CITY, OFFER CRITICALLY ACCLAIMED AND AWARD-WINNING CHILDREN'S PROGRAMS. FROM LITERACY TO DANCE TO SWIMMING TO CAREER WORKSHOPS AND MORE, THE CHILDREN'S CENTERS PROVIDE ACTIVITIES THAT SERVE CHILDREN'S EDUCATIONAL, SOCIAL, CULTURAL AND RECREATIONAL NEEDS. THROUGH EARLY CHILDHOOD PROGRAMS INCLUDING EARLY HEAD START, HEAD START AND LICENSED CHILD CARE, THE AGENCY SUPPORTS THE DEVELOPMENTAL NEEDS OF 0-5 YEAR OLDS. THE AFTER-SCHOOL, SATURDAY AND SUMMER PROGRAMS ENGAGE SCHOOL-AGE CHILDREN AND TEENS IN EDUCATIONAL ENRICHMENT, TECHNOLOGY, ARTS, RECREATION, LEADERSHIP DEVELOPMENT AND COLLEGE AND CAREER PREPARATION. CHILDREN'S AID BELIEVES THAT SELF-EXPRESSION AND CREATIVITY BUILDS INDIVIDUALITY AND SELF-CONFIDENCE, AND ULTIMATELY EXPANDS A YOUNG PERSON'S HORIZONS. TWO CENTERS ARE DESIGNATED SPECIFICALLY FOR TEENAGERS, PROVIDING PEER EDUCATION AND LEADERSHIP PROGRAMMING AS WELL AS CAREER READINESS, EDUCATIONAL SUPPORT AND LEGAL ADVOCACY, ESPECIALLY FOR YOUTH AGING OUT OF FOSTER CARE. COMBINED, THE CHILDREN'S CENTERS SERVE APPROXIMATELY 42,000 CHILDREN AND THEIR FAMILY MEMBERS. COMPREHENSIVE MEDICAL, DENTAL AND MENTAL HEALTH SERVICES ARE ALSO PROVIDED AT SEVERAL OF THESE LOCATIONS.

PUTTING THE DEVELOPMENT OF THE WHOLE CHILD AT THE CENTER OF SCHOOLS, AND SCHOOLS AT THE CENTER OF COMMUNITIES THROUGH THE COMMUNITY SCHOOLS MOVEMENT: CHILDREN'S AID IS WIDELY KNOWN FOR ITS GROUND-BREAKING WORK INCLUDING REINVENTING PUBLIC EDUCATION THROUGH OUR COMMUNITY SCHOOL MODEL. IN PARTNERSHIP WITH THE NYC DEPARTMENT OF EDUCATION, CHILDREN'S AID OPERATES 19 NEW YORK CITY COMMUNITY SCHOOLS WITH A GEOGRAPHIC FOCUS ON THE HIGH NEED COMMUNITIES OF WASHINGTON HEIGHTS, HARLEM AND THE SOUTH BRONX. A COMMUNITY SCHOOL IS A PUBLIC SCHOOL THAT COMBINES THE BEST EDUCATIONAL PRACTICES WITH A WIDE RANGE OF VITAL IN-HOUSE HEALTH AND SOCIAL SERVICES TO ENSURE THAT CHILDREN ARE PHYSICALLY, EMOTIONALLY AND SOCIALLY PREPARED TO LEARN. OPEN EARLY MORNINGS, AFTERNOONS, WEEKENDS AND SUMMERS, THE COMMUNITY SCHOOL

SERVES AS A TRUE CENTER OF NEIGHBORHOOD LIFE. IT IS MORE THAN SIMPLY A PLACE WHERE CHILDREN ATTEND CLASSES. IN THIS FAMILIAR ENVIRONMENT, THEY CAN ALSO RECEIVE MEDICAL AND DENTAL CARE, SPEAK TO A COUNSELOR ABOUT A PROBLEM, STAY AFTER SCHOOL TO BUILD READING SKILLS, PLAY CHESS, WORK ON A COMPUTER, TAKE ART AND MUSIC LESIONS, GET HELP WITH HOMEWORK, PRACTICE SPORTS AND ATTEND SUMMER CAMP.

COMMUNITY SCHOOLS OFFER SERVICES FOR CHILDREN AND PARENTS THAT INCLUDE: YOUTH DEVELOPMENT PROGRAMS, INCLUDING ACADEMIC ENRICHMENT, SPORTS, ARTS AND COMMUNITY SERVICE; SUMMER CAMPS; MEDICAL, DENTAL AND MENTAL HEALTH SERVICES; EARLY CHILDHOOD EDUCATION; SOCIAL SERVICES; ADULT EDUCATION; CHILD HEALTH INSURANCE ENROLLMENT; EARLY CHILDHOOD PROGRAMS; AND COMMUNITY DEVELOPMENT, INCLUDING EMPLOYMENT OF NEIGHBORHOOD RESIDENTS AND SPONSORSHIP OF COMMUNITY EVENTS. THESE PROGRAMS ARE AVAILABLE TO APPROXIMATELY 42,000 STUDENTS AND THEIR FAMILY MEMBERS. COMPREHENSIVE MEDICAL, DENTAL AND MENTAL HEALTH SERVICES ARE ALSO PROVIDED AT MOST OF THESE LOCATIONS. WE RECOGNIZE THAT EDUCATION BEGINS AT BIRTH, NOT AGE 5, SO WE HAVE DEVELOPED PROGRAMS FOR CHILDREN FROM BIRTH-COACHING THROUGH AGE 5 RIGHT IN THE PUBLIC SCHOOLS.

INITIATED IN 1992, THE CHILDREN'S AID COMMUNITY SCHOOL MODEL HAS WON NATIONAL RECOGNITION AND NUMEROUS AWARDS, ATTRACTING SIGNIFICANT INTEREST NATIONALLY AND INTERNATIONALLY. THROUGH ITS NATIONAL TECHNICAL ASSISTANCE CENTER FOR COMMUNITY SCHOOLS, THE AGENCY HAS HOSTED THOUSANDS OF INTERESTED EDUCATORS, CIVIC LEADERS, FUNDERS AND ELECTED OFFICIALS. AT LEAST 40 COUNTRIES HAVE SENT DELEGATIONS TO SEE COMMUNITY SCHOOLS IN ACTION. SEVERAL OF THESE COUNTRIES, MOST NOTABLY ENGLAND, THE NETHERLANDS AND SCOTLAND, HAVE ADOPTED COMMUNITY SCHOOLS AS A NATIONAL REFORM STRATEGY.

PREVENTING TEEN PREGNANCY: THE CHILDREN'S AID SOCIETY'S NATIONALLY RECOGNIZED ADOLESCENT SEXUALITY AND PREGNANCY PREVENTION PROGRAM IS GUIDED BY A PHILOSOPHY THAT SEES YOUTH AS "AT PROMISE" INSTEAD OF "AT RISK." THE CO-ED PROGRAM USES A HOLISTIC APPROACH TO EMPOWER YOUTH, HELP THEM DEVELOP A DESIRE FOR A PRODUCTIVE FUTURE, AND ASSIST THEM IN IMPROVING THEIR SEXUAL LITERACY AND UNDERSTANDING OF THE CONSEQUENCES OF SEXUAL ACTIVITY. THE MODEL, WHICH HAS BEEN INDEPENDENTLY EVALUATED AND FOUND TO REDUCE TEEN PREGNANCY, CONSISTS OF SEVEN COMPONENTS: DAILY EDUCATIONAL SUPPORT; FAMILY LIFE/SEX EDUCATION; JOB CLUB; SELF-EXPRESSION THROUGH THE ARTS; LIFETIME SPORTS; COMPREHENSIVE, NO COST MEDICAL AND DENTAL CARE; AND COUNSELING. THESE PROGRAM COMPONENTS ARE FULLY INTEGRATED INTO THE AFTER-SCHOOL ACTIVITIES OF

CHILDREN'S AID COMMUNITY CENTERS AND SCHOOLS AND AT OTHER LOCATIONS AROUND THE COUNTRY. THE PROGRAM HAS BEEN REPLICATED IN NEW YORK CITY AND ACROSS 7 STATES, SERVING APPROXIMATELY 1,600 YOUTH ANNUALLY AND IS NOW BEING INTEGRATED INTO THE ACADEMIC SCHOOL DAY, INDICATING THAT PRINCIPALS UNDERSTAND THEIR STUDENTS NEED MORE THAN PURE ACADEMICS TO SUCCEED.

INFORMING POLICY: EVERY DAY, CHILDREN'S AID IS ON THE FRONT LINES IN LOW-INCOME COMMUNITIES; WE SEE THE PROFOUND AND EMERGING NEEDS OF FAMILIES AND WE HAVE A LOT TO SAY. THROUGH OUR OFFICE OF PUBLIC POLICY AND CLIENT ADVOCACY, WE HELP FAMILIES WITH EMERGENCY MATERIAL NEEDS TO STAVE OFF EVICTION OR OBTAIN FOOD AND CLOTHING. WITH THIS KNOWLEDGE THAT COMES FROM OUR WORK, CHILDREN'S AID ENDEAVORS TO INFORM THE PUBLIC AND POLICY-MAKERS OF THE HUMAN COSTS OF POVERTY.

OUR STRATEGY IS THREE-FOLD: WE MAINTAIN A COMMITMENT TO TOP QUALITY YOUTH DEVELOPMENT AND CHILD WELFARE SERVICES; WE WORK WITH WHOLE COMMUNITIES TO BLANKET THEM WITH COMPREHENSIVE SERVICES; AND WE CREATE FAR-REACHING SYSTEMIC CHANGE BY BRINGING OUR HIGHLY EFFECTIVE PROGRAMS THAT COMBAT INTRACTABLE PROBLEMS TO A BROADER REACH THROUGH ADAPTATION, REPLICATION AND POLICY WORK.

AFRICAN AMERICAN MALE INITIATIVE:
CHILDREN'S AID HAS BEEN GRAVELY CONCERNED ABOUT THE OUTCOMES FOR AFRICAN AMERICAN MALES. IN SCHOOL, YOUNG BLACK MEN HAVE HIGHER RATES OF SUSPENSION, EXPULSION, DROPOUT AND PLACEMENT IN SPECIAL EDUCATION THAN OTHER GROUPS. IN ADULTHOOD, AFRICAN AMERICAN MALES ARE MORE LIKELY TO BE UNEMPLOYED AND INCARCERATED OR ON PROBATION THAN MEN OF OTHER RACIAL GROUPS. IN FACT, AFRICAN AMERICANS MAKE UP 12 PERCENT OF THE U.S. POPULATION BUT BLACK MALES REPRESENT NEARLY HALF THE MALE PRISON POPULATION.

IN RESPONSE, CHILDREN'S AID HAS CREATED THE AFRICAN AMERICAN MALE INITIATIVE TO FURTHER EXAMINE THIS ISSUE AND SEEK SOLUTIONS. AS PART OF OUR INITIATIVE, WE LAUNCHED STEPS TO SUCCESS, WHICH SERVES SECOND-, THIRD- AND FOURTH- GRADE AFRICAN AMERICAN MALES OF HARLEM BY PROVIDING THE FOLLOWING SERVICES: A LIFE COACH WHO FUNCTIONS AS A MENTOR, INSPIRES BOYS TO HAVE DREAMS AND HELPS THEM DEVELOP WAYS TO FULFILL THEIR GOALS; A SATURDAY ACADEMY PROVIDING CULTURAL ENRICHMENT ACTIVITIES HIGHLIGHTING AFRICAN AMERICAN HISTORY AND TRADITIONS; ACADEMIC SUPPORT, TWICE A WEEK AFTER SCHOOL; AND POSITIVE BLACK MALE VOLUNTEERS, WHO ARE POSITIVE ROLE MODELS, STAFF OUR VOLUNTEER COMPONENT.

	GRANTS	EXPENSES
TO FORM 990, PART III, LINE A	<hr/>	<hr/>
	<hr/>	<hr/>
		42,083,346.

DESCRIPTION OF PROGRAM SERVICE TWO

--SUPPORTING OUR MOST VULNERABLE YOUTH AND HIGHEST NEED FAMILIES

FAMILY, CHILD, AND COMMUNITY SERVICES: CHILDREN'S AID WORKS TO KEEP FAMILIES TOGETHER THROUGH COMPREHENSIVE PREVENTIVE SERVICES, INCLUDING COUNSELING SERVICES, HOMEMAKER SERVICES, HOME VISITS BY THERAPISTS AND SOCIAL WORKERS, SHELTER FOR HOMELESS FAMILIES WITH CHILDREN, HELP FOR FAMILIES IN FAMILY COURTS, AND ADVOCACY AND ADVICE FOR CLIENTS SO THEY MAY RECEIVE THE BENEFITS TO WHICH THEY ARE ENTITLED. FAMILY, CHILD, AND COMMUNITY SERVICES WERE PROVIDED TO APPROXIMATELY 3,815 CHILDREN AND ADULTS THIS YEAR.

JUVENILE JUSTICE AND TEEN PROGRAMS: WE NEVER GIVE UP ON YOUNG PEOPLE, ESPECIALLY THOSE ON THE VERGE OF FALLING THROUGH THE CRACKS, AND WE HAVE HAD ENORMOUS SUCCESS WITH OUR JUVENILE JUSTICE PROGRAMS. OUR UNIQUE COMMUNITY RE-ENTRY PROGRAMS HELP ADJUDICATED YOUTH RECONNECT WITH THEIR COMMUNITIES IN A SUPPORTED AND POSITIVE WAY. WE OFFER A CAREER READINESS PROGRAM THAT CONNECTS YOUNG PEOPLE WITH SUPERVISORS WHO ALSO SERVE AS MENTORS, PROVIDING PATIENT BUT FIRM GUIDANCE. OUR JUVENILE JUSTICE WORK DEMONSTRATES THAT PUBLIC DOLLARS ARE BETTER INVESTED IN PREVENTION AND STRENGTHENING YOUTH THAN LOCKING THEM UP IN COSTLY RESIDENTIAL FACILITIES WITH HIGH RATES OF RECIDIVISM.

TO FORM 990, PART III, LINE B

GRANTS	EXPENSES
	18,846,003.

DESCRIPTION OF PROGRAM SERVICE THREE

--KEEPING FAMILIES SAFE

ADOPTION AND FOSTER CARE: CHILDREN'S AID HAS, IN EVERY DAY OF ITS EXISTENCE, WORKED WITH ABANDONED AND ABUSED CHILDREN. AS A CITY-CONTRACTED AGENCY, CHILDREN'S AID PROVIDES ADOPTION AND FOSTER CARE SERVICES TO MORE THAN 600 CHILDREN AND TEENS. THE AGENCY OPERATES FOUR PROGRAMS: FAMILY FOSTER CARE; MEDICAL FOSTER CARE (FOR CHILDREN WHO ARE DISABLED OR CHRONICALLY ILL AND REQUIRE EXTENSIVE MEDICAL CARE); THERAPEUTIC FOSTER CARE (FOR CHILDREN WITH SEVERE EMOTIONAL DISTURBANCE OR OTHER MENTAL HEALTH DIAGNOSES WHO NEED BEHAVIOR MODIFICATION SERVICES AND SUPPORT); AND TEEN FOSTER CARE (FOR YOUNG PEOPLE IN FOSTER CARE, THOSE WHO ARE PREPARING TO "AGE OUT" AND YOUNG ADULTS 18-24 WHO AGED OUT OF FOSTER CARE). THE FAMILY FOSTER CARE AND THERAPEUTIC FOSTER CARE PROGRAMS SERVE CHILDREN PRIMARILY FROM THE BRONX, MANHATTAN AND STATEN ISLAND WHILE THE MEDICAL FOSTER CARE PROGRAM SERVES CHILDREN AND FAMILIES THROUGHOUT THE CITY. HEALTH SERVICES ARE ROUTINELY PROVIDED TO FOSTER CARE CHILDREN SERVED BY CHILDREN'S AID AS WELL AS SEVERAL OTHER FOSTER CARE AGENCIES THAT CONTRACT WITH CHILDREN'S AID.

TO FORM 990, PART III, LINE C

GRANTS

EXPENSES

	22,209,024.
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DESCRIPTION OF PROGRAM SERVICE FOUR

--ENSURING ACCESS FOR ALL CHILDREN TO HIGH QUALITY HEALTHCARE

HEALTH SERVICES: CHILDREN'S AID PROVIDES OVER 85,000 MEDICAL, DENTAL, MENTAL HEALTH AND HEALTH EDUCATION VISITS THROUGH ITS MEDICAL, DENTAL AND MENTAL HEALTH CLINICS. CHILDREN'S AID PROVIDES MEDICAL CARE THROUGH FIVE SCHOOL-BASED CLINICS AND THREE COMMUNITY CLINICS LOCATED IN WASHINGTON HEIGHTS, HARLEM, THE BRONX, AND MIDTOWN MANHATTAN, WHICH ARE STAFFED BY CARING PEDIATRICIANS, NURSE PRACTITIONERS, NURSES AND HEALTH EDUCATORS. CHILDREN RECEIVE FULL-SERVICE HEALTH CARE INCLUDING PHYSICAL EXAMINATIONS, GROWTH ASSESSMENTS, SCREENINGS (HEARING, VISION, SCOLIOSIS), TREATMENT OF ACUTE ILLNESSES SUCH AS ASTHMA. FOR ADOLESCENTS, CHILDREN'S AID OFFERS SPECIALIZED CONFIDENTIAL HEALTH SERVICES INCLUDING HEALTH EDUCATION, PHYSICAL EXAMINATIONS FOR SCHOOL, SPORTS AND WORK, SEXUALLY TRANSMITTED DISEASE TESTING, GYNECOLOGICAL EXAMS, IMMUNIZATIONS AND HIV COUNSELING AND TESTING.

THE AGENCY PROVIDES DENTAL VISITS ACROSS SEVEN SCHOOL- AND CENTER-BASED CLINICS. CHILDREN'S AID ALSO PROVIDES COMPREHENSIVE MENTAL HEALTH SERVICES IN SCHOOL- AND CENTER-BASED CLINICS, WHICH ARE COMPRISED OF PSYCHIATRISTS, PSYCHOLOGISTS, SOCIAL WORKERS, SPECIALIZED COUNSELORS AND CASEWORKERS WHO TREAT CHILDREN EXHIBITING HIGH RATES OF DEPRESSION AND ANXIETY, ADD/ADHD, ADJUSTMENT DISORDER, OPPOSITIONAL DISORDER, SEPARATION ANXIETY DISORDER, AND NEUROTIC DEPRESSION.

	GRANTS	EXPENSES
TO FORM 990, PART III, LINE D	_____	13,746,457.
	=====	=====

EXPLANATION

AS A LEADER IN THE FIELDS OF YOUTH DEVELOPMENT AND CHILD WELFARE, THE CHILDREN'S AID SOCIETY IS COMMITTED TO ENSURING THE PHYSICAL AND EMOTIONAL WELL-BEING OF UNDERSERVED CHILDREN AND THEIR FAMILIES IN NEW YORK CITY. OUR INTEGRATED AND COMPREHENSIVE SERVICES RESPOND TO THE NEEDS OF CHILDREN FROM BIRTH THROUGH YOUNG ADULTHOOD AND HAVE LONG BEEN KNOWN FOR INNOVATION. TODAY, OUR SERVICES SPAN MEDICAL AND DENTAL CARE, ADOPTION AND FOSTER CARE, COUNSELING, PREVENTIVE SERVICES, SUMMER CAMPS AND RESPITE CAMPS,

EDUCATIONAL ENRICHMENT, LEADERSHIP DEVELOPMENT, THE ARTS, RECREATION, COLLEGE SCHOLARSHIPS AND JOB TRAINING. PRIVATE SUPPORT AND INNOVATIVE PHILANTHROPY ALLOW CHILDREN'S AID TO BE THE RESEARCH AND DEVELOPMENT ARM IN THE FIELD, ALWAYS WITH AN EYE TOWARD CUTTING-EDGE PROGRAMS THAT WILL MOST EFFECTIVELY ENABLE CHILDREN TO STRIVE FOR AND REACH THEIR POTENTIAL.

FORM 990

OTHER PROGRAM SERVICES

STATEMENT 11

DESCRIPTION OF OTHER PROGRAM SERVICES

GRANTS AND ALLOCATIONS EXPENSES

WORLD TRADE CENTER RELIEF: CHILDREN'S AID CONTINUES TO PROVIDE EMERGENCY ASSISTANCE, CASE MANAGEMENT, LONG-TERM FINANCIAL ASSISTANCE, AND MENTAL HEALTH SERVICES TO FAMILIES WHO LOST A LOVED ONE OR WERE AFFECTED BY THE ATTACKS OF 9/11. THE ASSISTANCE IS COMING TO A CLOSE.

0. 1,665,009.

CAMPS: CHILDREN'S AID OPERATES TWO CO-ED SUMMER DAY CAMPS IN CHAPPAQUA, NY AND STATEN ISLAND, SERVING APPROXIMATELY 1,080 CHILDREN. EACH CAMP IS SITUATED ON MORE THAN 40 ACRES OF LAND PROVIDING THE QUINTESSENTIAL, RURAL CAMP EXPERIENCE WITH SWIMMING POOLS, BALL FIELDS, NATURE PROGRAMS, ARTS AND CRAFTS, AND CARING CAMP COUNSELORS WHO PROVIDE THE CARE AND ATTENTION THAT PROMOTES HEALTHY GROWTH AND SOCIAL DEVELOPMENT. THE CAMP IN CHAPPAQUA, NAMED WAGON ROAD, OFFERS A WIDE RANGE OF ACTIVITIES AND IS DESIGNED TO EMPHASIZE CREATIVITY, SKILL DEVELOPMENT AND SOCIAL LEARNING. WAGON ROAD HAS TWO HEATED OUTDOOR SWIMMING POOLS, ATHLETIC FACILITIES FOR BASKETBALL, BASEBALL, SOCCER AND VOLLEYBALL AND AN ADVENTURE ROPES COURSE. IT ALSO HAS INDOOR FACILITIES FOR MUSIC, NATURE, COOKING AND DANCE, AS WELL AS SUMMER PROGRAM AREAS FOR DRAMA AND ARTS AND CRAFTS. THERE ARE TWO RIDING RINGS FOR THE HORSEMANSHIP PROGRAM.

ADDITIONALLY, WAGON ROAD PROVIDES A YEAR-LONG RESPITE COMPONENT TO APPROXIMATELY 116 DIFFERENT PHYSICALLY AND DEVELOPMENTALLY DISABLED CHILDREN BETWEEN THE AGES OF SEVEN AND 18. EACH RESPITE HAS THE CAPACITY OF 52 CHILDREN TIMES 8 RESPITES, FOR A TOTAL OF 416 RESPITE VISITS. THE PURPOSE OF THE PROGRAM IS TWO-FOLD: TO SUPPORT AND STRENGTHEN THE FAMILIES, AND TO ENRICH THE LIVES OF THE CHILDREN. RESPITE CAMPERS, MANY OF WHOM LIVE WITH SUCH ILLNESSES AS CEREBRAL PALSY, SPINAL BIFIDA, AUTISM, DOWNS SYNDROME AND NEUROLOGICAL IMPAIRMENTS CAN PARTICIPATE IN AS MANY AS FOUR WEEKENDS OF PROGRAMMING EACH YEAR. THE SESSIONS RANGE FROM SHORT TWO-DAY WEEKEND PROGRAMS TO LONGER 6-DAY PROGRAMS.

THE WILLIAM OSBORN DAY CAMP AT GOODHUE CENTER ON

STATEN ISLAND PROVIDES CAMPING FOR CHILDREN AGES 5-13. PROGRAMS ARE CREATIVE AND NURTURING AND HAVE A LASTING INFLUENCE. THE CAMP HAS WOODLANDS AND TRAILS, BASEBALL AND SOCCER FIELDS, TWO OUTDOOR BASKETBALL COURTS, A PLAYGROUND, A GYMNASIUM, A POND FOR FISHING AND BOATING, A GOLF RANGE AND A LEARNING CENTER FOR COMPUTERS AND SCIENCE DISCOVERY. PROGRAM HIGHLIGHTS INCLUDE ARTS AND CRAFTS, DRAWING AND PAINTING, TV AND RADIO PRODUCTION, NATURE STUDY AND SCIENCE, GARDENING, THEATER, SPORTS AND SWIM INSTRUCTION AND BOATING AND FISHING.

0. 2,064,933.

TOTAL TO FORM 990, PART III, LINE E

3,729,942.

FORM 990 DEPRECIATION OF ASSETS NOT HELD FOR INVESTMENT STATEMENT 12

DESCRIPTION	COST OR OTHER BASIS	ACCUMULATED DEPRECIATION	BOOK VALUE
LAND	1,250,459.	0.	1,250,459.
LAND IMPROVEMENTS	644,491.	380,293.	264,198.
COMPUTERS	730,175.	665,640.	64,535.
BUILDING IMPROVEMENTS	11,332,585.	7,947,466.	3,385,119.
LEASEHOLD IMPROVEMENTS	1,321,378.	779,079.	542,299.
BUILDING ASSETS	13,176,027.	8,119,705.	5,056,322.
AUTO'S & TRUCKS	176,935.	155,725.	21,210.
FURNITURE & EQUIPMENT	1,867,542.	1,555,815.	311,727.
CONSTRUCTION IN PROGRESS	14,938.	0.	14,938.
BUILDING ASSETS	20,000.	688.	19,312.
BUILDING IMPROVEMENTS	1,536,325.	168,438.	1,367,887.
COMPUTERS	184,354.	49,111.	135,243.
FURNITURE & EQUIPMENT	241,038.	40,701.	200,337.
LEASEHOLD IMPROVEMENTS	70,578.	9,166.	61,412.
LAND IMPROVEMENTS	6,400.	457.	5,943.
CONSTRUCTION IN PROGRESS	185,101.	0.	185,101.
AUTOS & TRUCKS	27,838.	3,667.	24,171.
BUILDING IMPROVEMENTS	544,058.	23,156.	520,902.
COMPUTERS	544,957.	14,482.	530,475.
FURNITURE & EQUIPMENT	467,155.	31,042.	436,113.
LEASEHOLD IMPROVEMENTS	2,259,493.	132,285.	2,127,208.
LAND IMPROVEMENTS	312,527.	10,339.	302,188.
TOTAL TO FORM 990, PART IV, LN 57	36,914,354.	20,087,255.	16,827,099.

FORM 990	OTHER LIABILITIES	STATEMENT 13	
DESCRIPTION		BEGINNING OF YEAR	END OF YEAR
OTHER LIABILITIES		837,364.	1,040,668.
TOTAL TO FORM 990, PART IV, LINE 65		837,364.	1,040,668.

FORM 990	OTHER SECURITIES	STATEMENT 14	
SECURITY DESCRIPTION		COST/FMV	OTHER SECURITIES
CASH EQUIVALENTS		FMV	27,250,248.
LIMITED PARTNERSHIP INTEREST		FMV	776,778.
OTHER INVESTMENTS		FMV	32,395,132.
TO FORM 990, LINE 54B, COL B			60,422,158.

FORM 990	NON-GOVERNMENT SECURITIES			STATEMENT 15	
SECURITY DESCRIPTION	COST/FMV	CORPORATE STOCKS	CORPORATE BONDS	OTHER PUBLICLY TRADED SECURITIES	TOTAL NON-GOV'T SECURITIES
STOCKS	FMV	132692462.			132692462.
BONDS	FMV		70,379,278.		70,379,278.
TO FORM 990, LINE 54A, COL B		132692462.	70,379,278.		203071740.

FORM 990 PART V-A - LIST OF CURRENT OFFICERS, DIRECTORS, TRUSTEES AND KEY EMPLOYEES STATEMENT 16

NAME AND ADDRESS	TITLE AND AVRG HRS/WK	COMPEN- SATION	EMPLOYEE BEN PLAN CONTRIB	EXPENSE ACCOUNT
C. WARREN MOSES 105 EAST 22ND STREET NEW YORK, NY. 10010	ASST SEC/TREAS/CEO 40.00	481,158.	870,047.	0.
BETTY NOGAN-WOERNER 105 EAST 22ND STREET NEW YORK, NY. 10010	CHIEF FINANCIAL OFFICER 40.00	248,976.	49,480.	0.
WILLIAM WEISBERG 105 EAST 22ND STREET NEW YORK, NY. 10010	CHIEF OPERATING OFFICER 40.00	236,154.	41,865.	0.
ANGELIQUE C. MAMBY PANNELL 105 EAST 22ND STREET NEW YORK, NY. 10010	GENERAL COUNSEL 40.00	39,747.	3,033.	0.
EDWARD LAMONT 105 EAST 22ND STREET NEW YORK, NY. 10010	CHAIRMAN EMERITUS 2.00	0.	0.	0.
CHARLTON Y PHELPS 105 EAST 22ND STREET NEW YORK, NY. 10010	CHAIRMAN EMERITUS 2.00	0.	0.	0.
EDGAR R. KOERNER 105 EAST 22ND STREET NEW YORK, NY. 10010	CHAIRMAN 5.00	0.	0.	0.
ANGELA DIAZ, M.D. 105 EAST 22ND STREET NEW YORK, NY. 10010	PRESIDENT 5.00	0.	0.	0.
SAMUEL M. CONVISSOR 105 EAST 22ND STREET NEW YORK, NY. 10010	VICE PRESIDENT 5.00	0.	0.	0.
VIRGINIA M. SERMIER 105 EAST 22ND STREET NEW YORK, NY. 10010	TREASURER 5.00	0.	0.	0.
IRIS ABRONS 105 EAST 22ND STREET NEW YORK, NY. 10010	SECRETARY 5.00	0.	0.	0.

SHEILA BAIRD 105 EAST 22ND STREET NEW YORK, NY. 10010	TRUSTEE 2.00	0.	0.	0.
MARC BROXMEYER 105 EAST 22ND STREET NEW YORK, NY. 10010	TRUSTEE 2.00	0.	0.	0.
ELLY CHRISTOPHERSEN 105 EAST 22ND STREET NEW YORK, NY. 10010	TRUSTEE 2.00	0.	0.	0.
ANNE CITRIN 105 EAST 22ND STREET NEW YORK, NY. 10010	TRUSTEE 2.00	0.	0.	0.
JAN CORREA 105 EAST 22ND STREET NEW YORK, NY. 10010	TRUSTEE 2.00	0.	0.	0.
SUSAN COUPEY, MD 105 EAST 22ND STREET NEW YORK, NY. 10010	TRUSTEE 2.00	0.	0.	0.
GLORIA DABIRI 105 EAST 22ND STREET NEW YORK, NY. 10010	TRUSTEE 2.00	0.	0.	0.
BART J EAGLE 105 EAST 22ND STREET NEW YORK, NY. 10010	TRUSTEE 2.00	0.	0.	0.
MARK M EDMISTON 105 EAST 22ND STREET NEW YORK, NY. 10010	TRUSTEE 2.00	0.	0.	0.
DESMOND G. FITZGERALD 105 EAST 22ND STREET NEW YORK, NY. 10010	TRUSTEE 2.00	0.	0.	0.
LIZ GARDINER 105 EAST 22ND STREET NEW YORK, NY. 10010	TRUSTEE 2.00	0.	0.	0.
MARSHALL M GREEN 105 EAST 22ND STREET NEW YORK, NY. 10010	TRUSTEE 2.00	0.	0.	0.
MAEVE GYENES 105 EAST 22ND STREET NEW YORK, NY. 10010	TRUSTEE 2.00	0.	0.	0.

LOLITA K JACKSON 105 EAST 22ND STREET NEW YORK, NY. 10010	TRUSTEE 2.00	0.	0.	0.
LANE H KATZ 105 EAST 22ND STREET NEW YORK, NY. 10010	TRUSTEE 2.00	0.	0.	0.
RONALD H KAUFMANN 105 EAST 22ND STREET NEW YORK, NY. 10010	TRUSTEE 2.00	0.	0.	0.
MARTHA KELLNER 105 EAST 22ND STREET NEW YORK, NY. 10010	TRUSTEE 2.00	0.	0.	0.
URSULA G. LAMOTTE 105 EAST 22ND STREET NEW YORK, NY. 10010	TRUSTEE 2.00	0.	0.	0.
MARTHA LIPP 105 EAST 22ND STREET NEW YORK, NY. 10010	TRUSTEE 2.00	0.	0.	0.
SHARON MADISON 105 EAST 22ND STREET NEW YORK, NY. 10010	TRUSTEE 2.00	0.	0.	0.
RICHARD H. MANGUM 105 EAST 22ND STREET NEW YORK, NY. 10010	TRUSTEE 2.00	0.	0.	0.
MARTHA B MCLANAHAN 105 EAST 22ND STREET NEW YORK, NY. 10010	TRUSTEE 2.00	0.	0.	0.
FELIX A. ORBE 105 EAST 22ND STREET NEW YORK, NY. 10010	TRUSTEE 2.00	0.	0.	0.
CALVIN RAMSEY 105 EAST 22ND STREET NEW YORK, NY. 10010	TRUSTEE 2.00	0.	0.	0.
MEREDITH PHELPS RUGG 105 EAST 22ND STREET NEW YORK, NY. 10010	TRUSTEE 2.00	0.	0.	0.
MELVIN R. SEIDEN 105 EAST 22ND STREET NEW YORK, NY. 10010	TRUSTEE 2.00	0.	0.	0.

ROSALIE K. STAHL 105 EAST 22ND STREET NEW YORK, NY. 10010	TRUSTEE 2.00	0.	0.	0.
BERNICE STERN 105 EAST 22ND STREET NEW YORK, NY. 10010	TRUSTEE 2.00	0.	0.	0.
KEVIN J WATSON 105 EAST 22ND STREET NEW YORK, NY. 10010	TRUSTEE 2.00	0.	0.	0.
JEAN L. STERN 105 EAST 22ND STREET NEW YORK, NY. 10010	TRUSTEE 2.00	0.	0.	0.
PETER P HANSON 105 EAST 22ND STREET NEW YORK, NY. 10010	TRUSTEE 2.00	0.	0.	0.
JUDITH DIMON 105 EAST 22ND STREET NEW YORK, NY. 10010	TRUSTEE 2.00	0.	0.	0.
ELIOT P GREEN 105 EAST 22ND STREET NEW YORK, NY. 10010	TRUSTEE 2.00	0.	0.	0.
ROBERT WOLF 105 EAST 22ND STREET NEW YORK, NY. 10010	TRUSTEE 2.00	0.	0.	0.
DAVID STEIN 105 EAST 22ND STREET NEW YORK, NY. 10010	TRUSTEE 2.00	0.	0.	0.
JOHN SPURDLE 105 EAST 22ND STREET NEW YORK, NY. 10010	TRUSTEE 2.00	0.	0.	0.

TOTALS INCLUDED ON FORM 990, PART V-A	1,006,035.	964,425.	0.
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FORM 990 IDENTIFICATION OF RELATED ORGANIZATIONS STATEMENT 17
PART VI, LINE 80B

NAME OF ORGANIZATION	EXEMPT	NONEXEMPT
MILBANK HOUSING DEVELOPMENT FUND, CORP.	X	
THE MADISON AVENUE FUND FOR CHILDREN	X	
CAMPBELL DEVON PRODUCTIONS, INC.		X
THE UNITED CHARITIES	X	

FORM 990

EXPLANATION OF RELATIONSHIP
PART V-A, LINE 75B

STATEMENT 18

INDIVIDUAL'S NAME

TITLE OR ROLE

ELIOT P GREEN

TRUSTEE

INDIVIDUAL'S NAME

TITLE OR ROLE

.

.

EXPLANATION OF RELATIONSHIP

MR. GREEN IS AN ATTORNEY AT LOEB AND LOEB, ONE OF THE ORGANIZATION'S PAID LAW FIRMS

5

INDIVIDUAL'S NAME

TITLE OR ROLE

SHARON MADISON

TRUSTEE

INDIVIDUAL'S NAME

TITLE OR ROLE

.

.

EXPLANATION OF RELATIONSHIP

MS. MADISON HAS A FAMILY RELATIONSHIP WITH THE OWNERS OF UNITED BUILDING MAINTENANCE COMPANY, ONE OF THE COMPANIES THE ORGANIZATION USES FOR MAINTENANCE SERVICES.

INDIVIDUAL'S NAME

TITLE OR ROLE

ANGELA DIAZ, MD

PRESIDENT

INDIVIDUAL'S NAME

TITLE OR ROLE

.

.

EXPLANATION OF RELATIONSHIP

MS. DIAZ IS DIRECTOR OF MT. SINAI ADOLESCENT HEALTH CENTER, ONE OF THE FACILITIES THAT PROVIDES PAID HEALTH SERVICES TO THE ORGANIZATION.

INDIVIDUAL'S NAME

TITLE OR ROLE

SUSAN COUPEY, MD

TRUSTEE

INDIVIDUAL'S NAME

TITLE OR ROLE

.

.

EXPLANATION OF RELATIONSHIP

SUSAN COUPEY, MD, IS CHIEF OF THE DIVISION OF ADOLESCENT MEDICINE AT THE CHILDREN'S HOSPITAL OF MONTEFIORE, ONE OF THE FACILITIES THAT PROVIDES PAID HEALTH SERVICES TO OUR CLIENTS.

INDIVIDUAL'S NAME

TITLE OR ROLE

CHARLTON Y PHELPS

CHAIRMAN EMERITI

INDIVIDUAL'S NAME

TITLE OR ROLE

MEREDITH RUGG

TRUSTEE

EXPLANATION OF RELATIONSHIP

MOTHER/DAUGHTER

FORM 990

LIST OF STATES RECEIVING COPY OF RETURN
PART VI, LINE 90

STATEMENT 19

STATES

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

FORM 990

PART VIII - RELATIONSHIP OF ACTIVITIES TO
ACCOMPLISHMENT OF EXEMPT PURPOSES

STATEMENT 20

LINE EXPLANATION OF RELATIONSHIP OF ACTIVITIES

93A PROGRAM FEES AND DUES: HEALTH, RECREATION, PRESCHOOL, AFTER SCHOOL
AND EDUCATION SERVICES ARE PROVIDED IN THE COMMUNITY. CAMPS ARE
OPERATED FOR SERIOUSLY HANDICAPPED CHILDREN DURING THE FALL, WINTER
AND SPRING MONTH'S.

93G FEES FROM GOVERNMENT AGENCIES: NEW YORK CITY & NEW YORK STATE
REIMBURSE THE AGENCY FOR FOSTER BOARDING HOME PROGRAMS IN ORDER TO
REDUCE CRIME, DRUG ABUSE & VIOLENCE, TRUANCY, TEEN PREGNANCY, & TO
IMPROVE THE QUALITY OF LIFE FOR YOUTH IN THE COMMUNITY.

SCHEDULE A, PART III, 3D

THE CHILDREN'S AID SOCIETY PROVIDES FINANCIAL ASSISTANCE, INCLUDING DOWN PAYMENT ASSISTANCE IN CERTAIN CIRCUMSTANCES, TO CLIENTS FOR HOUSING AS A PART OF THE NEW YORK TIMES SUBPRIME NEEDIEST CASES PROGRAM. IN CONNECTION WITH DETERMINING THE TYPE AND AMOUNT OF ASSISTANCE TO PROVIDE, THE CHILDREN'S AID SOCIETY ANALYZES THE CLIENTS' BUDGETS AND THEIR INCOME TO DEBT RATIOS.

SCHEDULE A	EXPLANATION OF TRANSACTIONS PART III, LINE 2C	STATEMENT 22
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- 1) ELIOT GREEN, TRUSTEE, IS AN ATTORNEY AT A PAID LAW FIRM.
- 2) SHARON MADISON, TRUSTEE, HAS A FAMILY RELATIONSHIP WITH THE OWNERS OF A PAID INDEPENDENT CONTRACTOR ENTITY.
- 3) ANGELA DIAZ MD, PRESIDENT, IS DIRECTOR OF A PAID HEALTH SERVICES PROVIDER.
- 4) SUSAN COUPEY, MD, TRUSTEE, IS CHIEF OF THE DIVISION OF ADOLESCENT MEDICINE AT THE CHILDREN'S HOSPITAL OF MONTEFIORE, ONE OF THE FACILITIES THAT PROVIDES PAID HEALTH SERVICES TO OUR CLIENTS.
- 5) OUR CEO HAS USED AN APARTMENT LOCATED AT OUR RHINELANDER CHILDREN'S CENTER APPROXIMATELY FIVE NIGHTS DURING THE YEAR, WHEN REQUIRED TO DO SO AS A RESULT OF BUSINESS ENGAGEMENTS. THE CEO'S USE OF THE APARTMENT IS AN ECONOMICAL ALTERNATIVE TO THE CEO INCURRING HOTEL EXPENSES AND OBTAINING REIMBURSEMENT FROM THE CHILDREN'S AID SOCIETY FOR SUCH EXPENSES.

SCHEDULE A	EXPLANATION OF TRANSACTIONS PART III, LINE 2D	STATEMENT 23
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WAGES PAID TO KEY EMPLOYEES - SEE 990 PAGE 5, PART V-A.

SCHEDULE A EXPLANATION OF QUALIFICATIONS TO RECEIVE PAYMENTS STATEMENT 24
PART III, LINE 3A

3A - THE CHILDREN'S AID SOCIETY GRANTS SCHOLARSHIPS TO ELIGIBLE PROGRAM PARTICIPANTS TO FURTHER THEIR EDUCATION. PROGRAM PARTICIPANTS ARE ELIGIBLE FOR SCHOLARSHIPS IF THEY MEET CERTAIN LOW INCOME CRITERIA.

SCHEDULE A STATEMENT OF LOBBYING ACTIVITIES - PART VI-B STATEMENT 25

HINMAN STRAUB ADVISORS, LLC EDUCATES AND INFORMS SENIOR MANAGEMENT AT CHILDREN'S AID WITH RESPECT TO PROPOSED CHANGES IN NEW YORK STATE LAWS AND REGULATIONS THAT AFFECT THE ABILITY OF CHILDREN'S AID TO DELIVER SERVICES TO CHILDREN AND FAMILIES IN NEW YORK STATE.
HINMAN STRAUB ADVISORS ALSO WORKS TO INFORM AND EDUCATE GOVERNMENT DECISION-MAKERS, INCLUDING STATE ASSEMBLY AND SENATE LEADERS, SENIOR STAFF AND THE EXECUTIVE BRANCH, ABOUT MATTERS THAT AFFECT CHILDREN'S AID'S PROGRAMS AND THEIR ABILITY TO DELIVER SERVICES TO CHILDREN AND FAMILIES IN NEW YORK STATE.

Application for Extension of Time To File an Exempt Organization Return

▶ File a separate application for each return.

- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** and check this box ▶
 - If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** (on page 2 of this form).
- Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868.**

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

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

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

Electronic Filing (e-file). Generally, you can electronically file Form 8868 if you want a 3-month automatic extension of time to file one of the returns noted below (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 electronically if (1) you want the additional (not automatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or consolidated Form 990-T. Instead, you must submit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic filing of this form, visit www.irs.gov/efile and click on *e-file for Charities & Nonprofits*.

Type or print	Name of Exempt Organization THE CHILDREN'S AID SOCIETY	Employer identification number 13-5562191
File by the due date for filing your return. See instructions	Number, street, and room or suite no. If a P.O. box, see instructions. 105 EAST 22ND STREET	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. NEW YORK, NY 10010	

Check type of return to be filed (file a separate application for each return):

- | | | |
|--|---|------------------------------------|
| <input checked="" type="checkbox"/> Form 990 | <input type="checkbox"/> Form 990-T (corporation) | <input type="checkbox"/> Form 4720 |
| <input type="checkbox"/> Form 990-BL | <input type="checkbox"/> Form 990-T (sec. 401(a) or 408(a) trust) | <input type="checkbox"/> Form 5227 |
| <input type="checkbox"/> Form 990-EZ | <input type="checkbox"/> Form 990-T (trust other than above) | <input type="checkbox"/> Form 6069 |
| <input type="checkbox"/> Form 990-PF | <input type="checkbox"/> Form 1041-A | <input type="checkbox"/> Form 8870 |

- The books are in the care of ▶ **THE ORGANIZATION**
 Telephone No. ▶ **212-949-4911** FAX No. ▶ _____
- If the organization does not have an office or place of business in the United States, check this box ▶
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) _____. If this is for the whole group, check this box ▶ . If it is for part of the group, check this box ▶ and attach a list with the names and EINs of all members the extension will cover.

1 I request an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time until **FEBRUARY 15, 2009**, to file the exempt organization return for the organization named above. The extension is for the organization's return for:

▶ calendar year _____ or

▶ tax year beginning **JUL 1, 2007**, and ending **JUN 30, 2008**.

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

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

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