

Form **990**
 Department of the Treasury
 Internal Revenue Service

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

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

OMB No 1545-0047
2012
Open to Public Inspection

A For the 2012 calendar year, or tax year beginning 01-01-2012, 2012, and ending 12-31-2012

B Check if applicable: <input checked="" type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization CHILD TRENDS INC Doing Business As		D Employer identification number 13-2982969	
	Number and street (or P O box if mail is not delivered to street address) Room/suite 7315 WISCONSIN AVENUE SUITE 1200W		E Telephone number (240) 223-9200	
	City or town, state or country, and ZIP + 4 BETHESDA, MD 20814		G Gross receipts \$ 11,073,546	
	F Name and address of principal officer CAROL EMIG 7315 WISCONSIN AVENUE SUITE 1200W BETHESDA, MD 20814		H(a) Is this a group return for affiliates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all affiliates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list (see instructions) H(c) Group exemption number ▶	
I Tax-exempt status <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () (Insert no) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527				
J Website: ▶ WWW.CHILDTRENDS.ORG				
K Form of organization <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶			L Year of formation 1979	M State of legal domicile NY

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities IMPROVING THE LIVES OF CHILDREN BY CONDUCTING RESEARCH AND PROVIDING SCIENCE-BASED INFORMATION		
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets		
	3 Number of voting members of the governing body (Part VI, line 1a)	3	15
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	14
	5 Total number of individuals employed in calendar year 2012 (Part V, line 2a)	5	124
	6 Total number of volunteers (estimate if necessary)	6	14
	7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	0
b Net unrelated business taxable income from Form 990-T, line 34	7b	0	
Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
	9 Program service revenue (Part VIII, line 2g)	8,946,266	10,865,935
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	183,110	199,695
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	198	142
	12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	19,434	7,774
		9,149,008	11,073,546
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	0	0
	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)	6,557,983	7,455,374
	16a Professional fundraising fees (Part IX, column (A), line 11e)	0	0
	b Total fundraising expenses (Part IX, column (D), line 25) ▶ 419,978		
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	3,220,789	3,689,687
	18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)	9,778,772	11,145,061
19 Revenue less expenses Subtract line 18 from line 12	-629,764	-71,515	
Net Assets or Fund Balances		Beginning of Current Year	End of Year
	20 Total assets (Part X, line 16)	4,758,251	4,881,127
	21 Total liabilities (Part X, line 26)	859,808	1,054,199
22 Net assets or fund balances Subtract line 21 from line 20	3,898,443	3,826,928	

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including 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
	CAROL EMIG PRESIDENT AND CEO Type or print name and title
Paid Preparer Use Only	Ppnt/Type preparer's name FRANK H SMITH
	Firm's name ▶ RAFFA PC
	Firm's address ▶ 1899 L STREET NW SUITE 900 WASHINGTON, DC 20036

May the IRS discuss this return with the preparer shown above? (see instructions)

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response to any question in this Part III Yes No

1 Briefly describe the organization's mission
 CHILD TRENDS, INC (CHILD TRENDS) IS A NONPROFIT, NONPARTISAN RESEARCH ORGANIZATION DEDICATED TO IMPROVING THE LIVES OF CHILDREN BY CONDUCTING RESEARCH AND PROVIDING SCIENCE-BASED INFORMATION TO IMPROVE THE DECISIONS, PROGRAMS AND POLICIES THAT AFFECT CHILDREN AND THEIR FAMILIES IN ADVANCING ITS MISSION, CHILD TRENDS COLLECTS AND ANALYZES DATA, CONDUCTS, SYNTHESIZES, AND DISSEMINATES RESEARCH, DESIGNS AND EVALUATES PROGRAMS, AND DEVELOPS AND TESTS PROMISING APPROACHES TO RESEARCH IN THE FIELD

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 \$ 1,994,157 including grants of \$) (Revenue \$ 39,201)
 EARLY CHILDHOOD - THE U S DEPARTMENT OF HEALTH AND HUMAN SERVICES (THE AGENCY) HAS PROVIDED FUNDING TO CHILD TRENDS TO PROVIDE EXPERT CONSULTATION, ASSESSMENT AND ANALYSIS IN CHILD CARE AND EARLY EDUCATION POLICY AND RESEARCH TO THE OFFICE OF PLANNING, RESEARCH AND EVALUATION (OPRE), IN THE ADMINISTRATION FOR CHILDREN AND FAMILIES (ACF), INCLUDING ACTIVITIES RELATED TO PROVIDING EXPERT ADVICE, ASSISTANCE AND CONSULTATION IN SUPPORT OF THE AGENCY'S RESEARCH PRIORITIES AND GOALS, CONDUCTING STUDIES TO INFORM POLICY AND PRACTICE AND THE DEVELOPMENT OF NEW RESEARCH PRIORITIES, IDENTIFYING AND REFINING MEASURES AND INSTRUMENTS TO IMPROVE THE COLLECTION OF DATA RELATED TO PROGRAM POLICIES AND PRACTICES, AND TO PROGRAM OUTCOMES FOR FAMILIES AND CHILDREN, IDENTIFYING SOURCES OF DATA AND CONDUCTING STATISTICAL ANALYSES ON NATIONAL AND OTHER ORIGINAL DATA-SETS TO ANSWER QUESTIONS OF RELEVANCE TO THE AGENCY ON CHILD CARE UTILIZATION, CHILD CARE SUPPLY, AND THE EFFECTS OF CHILD CARE AND OTHER EARLY CHILDHOOD POLICIES ON PARENTAL AND CHILD OUTCOME, AND PROVIDING TECHNICAL ASSISTANCE AND EXPERTISE IN THE PREPARATION OF WRITTEN MATERIALS AND CONVENING OF EXPERT EARLY CHILDHOOD STAKEHOLDERS ALSO, CHILD TRENDS PLANS AND FACILITATES MEETINGS OF EXPERTS ON CHILD CARE RESEARCH ISSUES OF RELEVANCE TO THE ADMINISTRATION FOR THE CHILD CARE AND DEVELOPMENT FUND (CCDF) AND OTHER EARLY CHILDHOOD PROGRAMS IN STATES, TERRITORIES, AND WITH TRIBES WITH FUNDING FROM THE DEPARTMENT OF HEALTH AND HUMAN SERVICES OFFICE OF PLANNING, RESEARCH AND EVALUATION, CHILD TRENDS HAS CREATED A MARYLAND-MINNESOTA CHILD CARE RESEARCH PARTNERSHIP WHICH BRINGS TOGETHER TWO STATES COMMITTED TO EXAMINING CRITICAL ISSUES IN EARLY CARE AND EDUCATION AND USING RESEARCH FINDINGS TO INFORM POLICY WITH AN INTERDISCIPLINARY TEAM OF RESEARCHERS EXPERIENCED IN CONDUCTING STUDIES ON SUBSIDY POLICY, QUALITY IMPROVEMENT STRATEGIES, FAMILY EXPERIENCES AND CHILD OUTCOMES WITH FUNDING FROM THE DISTRICT OF COLUMBIA PUBLIC SCHOOLS, CHILD TRENDS IS CONDUCTING A LARGE-SCALE PROGRAM EVALUATION OF THE DCPS EARLY CHILDHOOD PROGRAM THAT INCLUDES CLASSROOM OBSERVATIONS IN ALL ECE CLASSROOMS ACROSS THE DISTRICT, DIRECT CHILD ASSESSMENTS ON A SUB-SAMPLE OF CHILDREN AND A COMPARISON OF SCHOOLS PARTICIPATING IN THE TOOLS OF THE MIND PILOT EXPANSION AND THOSE USING OTHER CURRICULA RESULTS FROM THE PROGRAM EVALUATION WILL BE USED TO EVALUATE THE QUALITY OF THE EARLY CHILDHOOD PROGRAM IN DCPS, HELP VALIDATE THE DATA FROM THE TEACHING STRATEGIES GOLD CHILD ASSESSMENT SYSTEM, SERVE AS COMPARISON DATA WITH THE IMPACT EVALUATION SYSTEM DATA, AND PROVIDE OPPORTUNITIES TO COMPARE CLASSROOMS USING THE TOOLS OF THE MIND CURRICULUM WITH THOSE THAT ARE USING ALTERNATIVE CURRICULA WITH FUNDING FROM THE DISTRICT OF COLUMBIA'S OFFICE OF THE STATE SUPERINTENDENT OF EDUCATION, CHILD TRENDS IS PROVIDING THE OSSE/ECE WITH A PRE-K CAPACITY AUDIT WHICH WILL INFORM THE ENHANCEMENT AND EXPANSION INITIATIVES OF THE OSSE/ECE, A RISK & REACH STUDY THAT ASSESSES THE PREVALENCE OF SELECTED RISK FACTORS IN FAMILIES WITH YOUNG CHILDREN AND THE REACH OF OSSE/ECE FUNDED SUPPORTS TO SERVE THOSE FAMILIES, AND OTHER RESEARCH SUBJECT MATTER RELATED TO EARLY CHILDHOOD EDUCATION AS IDENTIFIED BY THE OSSE/ECE

4b (Code) (Expenses \$ 1,910,905 including grants of \$) (Revenue \$ 70,122)
 YOUTH DEVELOPMENT - CHILD TRENDS IS WORKING WITH THE LOS ANGELES UNITED SCHOOL DISTRICT AND FAMILIES IN SCHOOLS TO PILOT AND EVALUATE ABRIENDO PUERTAS PARENT EDUCATION PROGRAM CHILD TRENDS IS DEVELOPING PROTOCOLS, CONDUCTING RANDOM ASSIGNMENT OF PARTICIPANTS (PARENTS WITH PRESCHOOL AGE CHILDREN), DEVELOPING IMPLEMENTATION AND OUTCOME REPORTS, ASSESSING INTERVENTION PARENTS' KNOWLEDGE AND ATTITUDES ON CHILD AND YOUTH DEVELOPMENT, USING COMMUNITY RESOURCES, AND SERVING AS ADVOCATES FOR THEIR CHILDREN'S EDUCATIONAL OPPORTUNITIES CHILD TRENDS IS UPDATING AND EXPANDING THE UNDERSTANDING OF THE FACTORS THAT AFFECT TEEN CHILDBEARING AMONG LATINOS AND SYNTHESIZING THESE FINDINGS INTO A THEORY OF CHANGE AND LOGIC MODEL THIS WORK WILL INFORM THE EVENTUAL GOAL OF DEVELOPING AND IMPLEMENTING A RESEARCH-BASED AND CULTURALLY-APPROPRIATE PROGRAM TO REDUCE POVERTY BY PREVENTING TEEN CHILDBEARING AMONG LATINO ADOLESCENTS WITH FUNDING FROM THE CORPORATION FOR NATIONAL AND COMMUNITY SERVICE, VENTURE PHILANTHROPY PARTNERS (VPP) LAUNCHED THE YOUTHCONNECT INITIATIVE, A NETWORK OF GOVERNMENT, PRIVATE PHILANTHROPY, NONPROFIT ORGANIZATIONS, AND EVALUATORS TO DRAMATICALLY IMPROVE OPPORTUNITIES FOR LOW-INCOME YOUTH, AGES 14-24, IN THE NATIONAL CAPITAL REGION (NCR) YOUTHCONNECT WILL SUPPORT THE COLLABORATION OF A NETWORK OF SIX NONPROFITS IN THE NCR, PROVIDING EDUCATION, SOCIAL SERVICES, AND JOB TRAINING TO LOW-INCOME YOUTH AGES 14-24 CHILD TRENDS PLAYED A KEY ROLE IN THE DESIGN AND IMPLEMENTATION OF THE OPEN COMPETITION PROCESS AS EVALUATION PARTNERS FOR THE VPP YOUTHCONNECT INITIATIVE, CHILD TRENDS IS CONDUCTING MULTIPLE TASKS INCLUDING TECHNICAL ASSISTANCE FOR THE SUBGRANTEES AS THEY DEVELOP EVALUATION PLANS AND SELECT QUALIFIED EVALUATORS TO LEAD EXPERIMENTAL OR QUASI-EXPERIMENTAL STUDIES, AN IMPLEMENTATION EVALUATION, EXAMINING THE OPERATIONS, CHALLENGES, SUCCESSSES OF THE SIX INDIVIDUAL ORGANIZATIONS AS WELL AS THE COLLABORATIVE NETWORK THAT THEY FORM, AND AN OUTCOMES MONITORING STUDY THAT ASSESSES PROGRESS TOWARDS IMPROVING COMMONLY AGREED UPON OUTCOMES IN THE DOMAINS OF EDUCATION, DISCONNECTION AND EMPLOYMENT WITH FUNDING FROM THE U S DEPARTMENT OF HEALTH AND HUMAN SERVICES OFFICE OF ADOLESCENT HEALTH, CHILD TRENDS IS PROVIDING RESOURCES AND TOOLS, INCLUDING DIRECT TRAINING AND TECHNICAL ASSISTANCE AND CONFERENCE SUPPORT, WHICH WILL INCREASE CAPACITY AND SKILLS OF PREGNANCY ASSISTANCE FUND GRANTEEES TO PROVIDE SERVICES FOR PREGNANT AND PARENTING TEENS, WOMEN, AND THEIR FAMILIES AN INTERACTIVE WEB RESOURCE WILL PROVIDE PROFESSIONALS, POLICYMAKERS, PRACTITIONERS, GRANTEEES, AND THE GENERAL PUBLIC WITH INFORMATION, TOOLS, AND RESOURCES TO PROMOTE EVIDENCE-BASED BEST PRACTICES IN EFFECTIVELY WORKING WITH PREGNANT AND PARENTING TEENS, WOMEN, AND THEIR FAMILIES

4c (Code) (Expenses \$ 1,096,355 including grants of \$) (Revenue \$ 58,761)
 FERTILITY AND FAMILY STRUCTURE - CHILD TRENDS AND PARTNERS, UNIVERSITY OF CALIFORNIA AT SAN FRANCISCO AND TRILOGY INTERACTIVE, ARE SUPPORTING THE DEPARTMENT OF HEALTH AND HUMAN SERVICES OFFICE OF ADOLESCENT HEALTH IN DEVELOPING NONPARTISAN RESOURCES AND A DATA-RICH WEBSITE AND MANAGING A MULTI-FACETED OUTREACH AND COMMUNICATIONS STRATEGY TO SHARE INFORMATION WITH THE MANY IMPORTANT STAKEHOLDERS IN THE ADOLESCENT FIELD IN THE WORK WITH FUNDING FROM THE U S DEPARTMENT OF HEALTH AND HUMAN SERVICES, CHILD TRENDS AND ITS PARTNER, MATHEMATICA POLICY RESEARCH, ARE DOCUMENTING HOW THE GOVERNMENT'S PERSONAL RESPONSIBILITY EDUCATION PROGRAM (PREP)-FUNDED PROGRAMS ARE OPERATIONALIZED IN THE FIELD AND ASSESSING SELECTED PREP-FUNDED PROGRAMS' EFFECTIVENESS THIS IS A SEVEN-YEAR EVALUATION WHICH WILL MAKE A SIGNIFICANT CONTRIBUTION TO THE TEEN PREGNANCY PREVENTION EVIDENCE BASE THERE ARE 3 MAIN COMPONENTS OF THE EVALUATION 1) A DESIGN AND IMPLEMENTATION STUDY A SURVEY OF HOW STATES DESIGNED AND IMPLEMENTED PREP PROGRAMS, 2) PERFORMANCE ANALYSIS STUDY CREATION OF A SYSTEM TO MONITOR GRANTEE PERFORMANCE AND ANALYSIS OF PERFORMANCE DATA, AND 3) IMPACT AND IMPLEMENTATION STUDY OF A SELECT NUMBER OF PREP-FUNDED PROGRAMS CHILD TRENDS WILL BE LEADING ALL ACTIVITIES ASSOCIATED WITH THE PERFORMANCE ANALYSIS STUDY, AND WILL ALSO BE INVOLVED IN TASKS FOR THE OTHER TWO COMPONENTS WITH FUNDING FROM THE DEPARTMENT OF HEALTH AND HUMAN SERVICES OFFICE OF ADOLESCENT HEALTH, CHILD TRENDS IS HELPING TO IMPROVE SERVICE DELIVERY FOR FAMILY PLANNING CLINICS SERVING HISPANIC WOMEN BY PROVIDING NATIONAL DATA ANALYSES AND IN-DEPTH PERSPECTIVES FROM TEENS AND YOUNG ADULTS, AS WELL AS PROVIDERS, ON HOW TO BEST ENCOURAGE OR SUPPORT HISPANIC IMMIGRANT AND NON-IMMIGRANT WOMEN IN UTILIZING FAMILY PLANNING SERVICES THE PROJECT WILL RESULT IN THE IDENTIFICATION OF STRATEGIES THAT ARE FEASIBLE TO IMPLEMENT AND CAN BE USED TO ATTRACT HISPANIC WOMEN IN NEED OF FAMILY PLANNING SERVICES TO CLINICS AND PROGRAMS A KEY AIM OF THE PROJECT IS TO TRANSLATE THE RESEARCH FINDINGS TO MAKE THEM ACCESSIBLE TO THE PRACTITIONER COMMUNITY CHILD TRENDS IS COLLABORATING WITH THE DEPARTMENT OF HEALTH AND HUMAN SERVICES OFFICE OF POPULATION AFFAIRS TO PRODUCE AND DISSEMINATE RESEARCH-BASED INFORMATION TO IMPROVE THE DELIVERY OF FAMILY PLANNING SERVICES CHILD TRENDS IS ADDRESSING THE PREVALENCE, TRENDS, AND SUB-POPULATION DIFFERENCES IN POPULATIONS AT RISK OF UNINTENDED PREGNANCY AND STIS, WITH A FOCUS ON ADOLESCENTS AND YOUNG ADULTS CHILD TRENDS IS ALSO EXAMINING SEXUAL ACTIVITY (INCLUDING SEXUAL INTERCOURSE, ORAL SEX, PARTNER CHARACTERISTICS AND SAME SEX PARTNERS) AND CONTRACEPTIVE BEHAVIORS (INCLUDING HORMONAL METHODS, CONDOMS AND DUAL METHODS) THAT AFFECT THE RISK OF UNINTENDED CHILDBEARING AND STIS AS WELL AS IMPORTANT FAMILY, INDIVIDUAL, PEER, PARTNER, SCHOOL AND COMMUNITY FACTORS ASSOCIATED WITH REPRODUCTIVE HEALTH OUTCOMES

(Code) (Expenses \$ 822,300 including grants of \$) (Revenue \$ 8,413)
 CHILD WELFARE

(Code) (Expenses \$ 717,794 including grants of \$) (Revenue \$ 19,007)
 EDUCATION

(Code) (Expenses \$ 455,589 including grants of \$) (Revenue \$)
 POLICY AND COMMUNICATIONS

(Code) (Expenses \$ 174,234 including grants of \$) (Revenue \$ 4,066)
 INDICATORS

(Code) (Expenses \$ 145,209 including grants of \$) (Revenue \$)
 PARENTING AND FAMILY DYNAMICS

(Code) (Expenses \$ 140,363 including grants of \$) (Revenue \$ 125)
 EMERGING ISSUES

(Code) (Expenses \$ 31,605 including grants of \$) (Revenue \$)
 HEALTH

4d Other program services (Describe in Schedule O)
 (Expenses \$ 2,487,094 including grants of \$) (Revenue \$ 31,611)

4e Total program service expenses 7,488,511

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)? <i>If "Yes," complete Schedule A</i> <input checked="" type="checkbox"/>	Yes	
2 Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> (see instructions)? <input checked="" type="checkbox"/>	Yes	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>		No
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>		No
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? <i>If "Yes," complete Schedule C, Part III</i>		No
6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</i> <input checked="" type="checkbox"/>		No
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i> <input checked="" type="checkbox"/>		No
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i> <input checked="" type="checkbox"/>		No
9 Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i> <input checked="" type="checkbox"/>		No
10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i> <input checked="" type="checkbox"/>		No
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? <i>If "Yes," complete Schedule D, Part VI</i> <input checked="" type="checkbox"/>	Yes	
b Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII</i> <input checked="" type="checkbox"/>		No
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? <i>If "Yes," complete Schedule D, Part VIII</i> <input checked="" type="checkbox"/>		No
d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX</i> <input checked="" type="checkbox"/>		No
e Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i> <input checked="" type="checkbox"/>	Yes	
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X</i> <input checked="" type="checkbox"/>	Yes	
12a Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i> <input checked="" type="checkbox"/>	Yes	
b Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional</i> <input checked="" type="checkbox"/>		No
13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>		No
14a Did the organization maintain an office, employees, or agents outside of the United States?		No
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? <i>If "Yes," complete Schedule F, Parts I and IV</i>		No
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? <i>If "Yes," complete Schedule F, Parts II and IV</i>		No
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? <i>If "Yes," complete Schedule F, Parts III and IV</i>		No
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I (see instructions)</i>		No
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>		No
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>		No
20a Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>		No
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		

Part IV Checklist of Required Schedules *(continued)*

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

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

Table with columns for question ID, question text, and Yes/No response boxes. Includes questions 1a-1b, 1c, 2a-2b, 3a-3b, 4a-4b, 5a-5c, 6a-6b, 7a-7h, 8, 9a-9b, 10a-10b, 11a-11b, 12a-12b, 13a-13c, and 14a-14b.

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

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

Section A. Governing Body and Management

Table with 3 columns: Question, Yes, No. Rows include: 1a Enter the number of voting members of the governing body at the end of the tax year (15); 1b Enter the number of voting members included in line 1a, above, who are independent (14); 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? (No); 3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? (No); 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? (No); 5 Did the organization become aware during the year of a significant diversion of the organization's assets? (No); 6 Did the organization have members or stockholders? (No); 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? (No); 7b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? (No); 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: 8a The governing body? (Yes); 8b Each committee with authority to act on behalf of the governing body? (Yes); 9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O (No).

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

Table with 3 columns: Question, Yes, No. Rows include: 10a Did the organization have local chapters, branches, or affiliates? (No); 10b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?; 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? (Yes); 11b 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 (Yes); 12b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? (Yes); 12c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done (Yes); 13 Did the organization have a written whistleblower policy? (Yes); 14 Did the organization have a written document retention and destruction policy? (Yes); 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? 15a The organization's CEO, Executive Director, or top management official (Yes); 15b Other officers or key employees of the organization (Yes); 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? (No); 16b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?

Section C. Disclosure

- 17 List the States with which a copy of this Form 990 is required to be filed; 18 Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply: [] Own website [] Another's website [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, physical address, and telephone number of the person who possesses the books and records of the organization: KAREN CALLOO 7315 WISCONSIN AVENUE SUITE 1200W BETHESDA, MD (240) 223-9305

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

Check if Schedule O contains a response to any question in this Part 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, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations

• List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

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

(A) Name and Title	(B) 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) CAROL EMIG PRESIDENT AND CEO	37 50	X		X				230,822	0	35,922
(2) JACK LEONE CHAIR	1 00	X		X				0	0	0
(3) WILLIAM THORNE VICE CHAIR	1 00	X		X				0	0	0
(4) ALAN HAUSMAN SECRETARY	1 00	X		X				0	0	0
(5) LISA KARLISCH TREASURER	1 00	X		X				0	0	0
(6) LEONARD BURTON BOARD MEMBER	1 00	X						0	0	0
(7) DAN CARDINALI BOARD MEMBER	1 00	X						0	0	0
(8) ROB GEEN BOARD MEMBER	1 00	X						0	0	0
(9) CHERYL HAYES BOARD MEMBER	1 00	X						0	0	0
(10) ROBERT KENNEY JR BOARD MEMBER	1 00	X						0	0	0
(11) GREG NIBLETT BOARD MEMBER	1 00	X						0	0	0
(12) ANDREW SCHNEIDER-MUNOZ BOARD MEMBER	1 00	X						0	0	0
(13) LAUREN SMITH BOARD MEMBER	1 00	X						0	0	0
(14) BRENDA WELBURN BOARD MEMBER	1 00	X						0	0	0
(15) DON WINSTEAD BOARD MEMBER	1 00	X						0	0	0
(16) TRACEY STEVENS VP OF FIN & ADMIN (THRU 10/2012)	37 50			X				149,452	0	18,761
(17) HOPE COOPER VP OF PUBLIC POLICY (THRU 10/2012)	37 50			X				131,688	0	22,008

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			
(18) NATALIA PANE VP OF RESEARCH OPERATIONS	37 50			X				133,875	0	25,945
(19) KRISTIN MOORE SENIOR SCHOLAR	37 50				X			197,354	0	25,480
(20) LAURA LIPPMAN SENIOR PROGRAM AREA DIRECTOR	37 50					X		154,601	0	24,021
(21) TAMARA HALLE SENIOR PROGRAM AREA DIRECTOR	37 50					X		138,796	0	16,284
(22) KATHRYN TOUT SENIOR PROGRAM AREA DIRECTOR	37 50					X		137,141	0	15,910
(23) KAREN WALKER SENIOR PROGRAM AREA DIRECTOR	37 50					X		150,287	0	16,640
(24) JENNIFER MANLOVE SENIOR PROGRAM AREA DIRECTOR	37 50					X		136,056	0	26,239
1b Sub-Total										
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)								1,560,072	0	227,210

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 **18**

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

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization Report compensation for the calendar year ending with or within the organization's tax year

(A) Name and business address	(B) Description of services	(C) Compensation
TRILOGY INTERACTIVE LLC PO BOX 4177 MOUNTAIN VIEW CA 94040	CONSULTING SERVICES	218,093
WESTAT INC PO BOX 1004 ROCKVILLE MD 20850	CONSULTING SERVICES	175,440

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

Part VIII Statement of Revenue

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

		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514	
Contributions, Gifts, Grants and Other Similar Amounts	1a Federated campaigns 1a					
	b Membership dues 1b					
	c Fundraising events 1c					
	d Related organizations 1d					
	e Government grants (contributions) 1e	5,988,597				
	f All other contributions, gifts, grants, and similar amounts not included above 1f	4,877,338				
	g Noncash contributions included in lines 1a-1f \$					
	h Total. Add lines 1a-1f	10,865,935				
Program Service Revenue	2a GENERAL SUPPORT SERV	900099	151,228	151,228		
	b HONORARIUM	900099	48,467	48,467		
	c					
	d					
	e					
	f All other program service revenue					
	g Total. Add lines 2a-2f		199,695			
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)		142		142	
	4 Income from investment of tax-exempt bond proceeds					
	5 Royalties					
	6a Gross rents	(i) Real				
		(ii) Personal				
		b Less rental expenses				
		c Rental income or (loss)				
	d Net rental income or (loss)					
	7a Gross amount from sales of assets other than inventory	(i) Securities				
		(ii) Other				
		b Less cost or other basis and sales expenses				
		c Gain or (loss)				
	d Net gain or (loss)					
	8a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c) See Part IV, line 18	a				
		b Less direct expenses b				
		c Net income or (loss) from fundraising events				
	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						
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					
Miscellaneous Revenue	Business Code					
11a OTHER INCOME	900099	7,774			7,774	
b						
c						
d All other revenue						
e Total. Add lines 11a-11d		7,774				
12 Total revenue. See Instructions		11,073,546	199,695	0	7,916	

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A)

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

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 governments and organizations in the United States. See Part IV, line 21				
2	Grants and other assistance to individuals in the United States. See Part IV, line 22				
3	Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	971,307	226,918	728,483	15,906
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	4,347,118	3,205,659	877,983	263,476
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	445,567	327,632	91,002	26,933
9	Other employee benefits	1,258,569	852,709	333,802	72,058
10	Payroll taxes	432,813	283,834	125,856	23,123
11	Fees for services (non-employees)				
a	Management				
b	Legal	27,006		27,006	
c	Accounting	41,885		41,885	
d	Lobbying				
e	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	2,212,090	1,951,526	256,871	3,693
12	Advertising and promotion				
13	Office expenses	254,207	110,593	141,807	1,807
14	Information technology	126,335	4,122	122,213	
15	Royalties				
16	Occupancy	670,886		670,886	
17	Travel	183,471	150,672	32,695	104
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	53,364		53,364	
23	Insurance	30,938		30,938	
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	GIFTS-SURVEY PARTICIP	21,607	21,607		
b	MEMBERSHIP/SUBSCRIPT	18,698	9,475	9,223	
c	RECRUITMENT	16,688		16,688	
d	PROF DEVELOPMENT	14,733	2,175	12,558	
e	All other expenses	17,779	341,589	-336,688	12,878
25	Total functional expenses. Add lines 1 through 24e	11,145,061	7,488,511	3,236,572	419,978
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

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

		(A) Beginning of year		(B) End of year
Assets	1 Cash—non-interest-bearing	1,000,250	1	250
	2 Savings and temporary cash investments	892,624	2	2,413,908
	3 Pledges and grants receivable, net	2,609,895	3	2,032,188
	4 Accounts receivable, net		4	
	5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L		5	
	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		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	151,737	9	297,268
	10a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a 950,081		
	b Less accumulated depreciation	10b 853,489	62,824	10c 96,592
	11 Investments—publicly traded securities		11	
	12 Investments—other securities See Part IV, line 11		12	
	13 Investments—program-related See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets See Part IV, line 11	40,921	15	40,921
16 Total assets. Add lines 1 through 15 (must equal line 34)	4,758,251	16	4,881,127	
Liabilities	17 Accounts payable and accrued expenses	713,796	17	835,730
	18 Grants payable		18	
	19 Deferred revenue	83,118	19	213,538
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability Complete Part IV of Schedule D		21	
	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		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D	62,894	25	4,931
	26 Total liabilities. Add lines 17 through 25	859,808	26	1,054,199
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	1,559,785	27	1,837,775
	28 Temporarily restricted net assets	2,338,658	28	1,989,153
	29 Permanently restricted net assets		29	
	Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> 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	3,898,443	33	3,826,928	
34 Total liabilities and net assets/fund balances	4,758,251	34	4,881,127	

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	11,073,546
2	Total expenses (must equal Part IX, column (A), line 25)	2	11,145,061
3	Revenue less expenses Subtract line 2 from line 1	3	-71,515
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	3,898,443
5	Net unrealized gains (losses) on investments	5	
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	0
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	3,826,928

Part XII Financial Statements and Reporting

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

	Yes	No
1 Accounting method used to prepare the Form 990 <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> 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 <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		No
2b Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	Yes	
2c If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	Yes	
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	Yes	
3b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	Yes	

SCHEDULE A
(Form 990 or 990EZ)

Public Charity Status and Public Support

OMB No 1545-0047

2012

Open to Public Inspection

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

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

Name of the organization
CHILD TRENDS INC

Employer identification number
13-2982969

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

The organization is not a private foundation because it is (For lines 1 through 11, check only one box)

- 1 A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i)**.
- 2 A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E)
- 3 A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**.
- 4 A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii)**. Enter the hospital's name, city, and state _____
- 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv)**. (Complete Part II)
- 6 A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v)**.
- 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)**. (Complete Part II)
- 8 A community trust described in **section 170(b)(1)(A)(vi)** (Complete Part II)
- 9 An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See **section 509(a)(2)**. (Complete Part III)
- 10 An organization organized and operated exclusively to test for public safety See **section 509(a)(4)**.
- 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See **section 509(a)(3)**. Check the box that describes the type of supporting organization and complete lines 11e through 11h
 a Type I b Type II c Type III - Functionally integrated d Type III - Non-functionally integrated
- e By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2)
- f If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box
- g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?
 (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?
 (ii) A family member of a person described in (i) above?
 (iii) A 35% controlled entity of a person described in (i) or (ii) above?
- h Provide the following information about the supported organization(s)

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

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1- 9 above or IRC section (see instructions))	(iv) Is the organization in col (i) listed in your governing document?		(v) Did you notify the organization in col (i) of your support?		(vi) Is the organization in col (i) organized in the U S ?		(vii) Amount of monetary support
			Yes	No	Yes	No	Yes	No	
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) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")	10,107,133	6,864,055	8,378,865	8,946,266	10,865,935	45,162,254
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3	10,107,133	6,864,055	8,378,865	8,946,266	10,865,935	45,162,254
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)						3,168,339
6 Public support. Subtract line 5 from line 4						41,993,915

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
7 Amounts from line 4	10,107,133	6,864,055	8,378,865	8,946,266	10,865,935	45,162,254
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	83,815	75,532	31,609	198	142	191,296
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)	100	7,120	33,166	19,434	7,774	67,594
11 Total support (Add lines 7 through 10)						45,421,144
12 Gross receipts from related activities, etc (see instructions)					12	688,293
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

14 Public support percentage for 2012 (line 6, column (f) divided by line 11, column (f))	14	92 450 %
15 Public support percentage for 2011 Schedule A, Part II, line 14	15	89 760 %
16a 33 1/3% support test—2012. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization <input checked="" type="checkbox"/>		
b 33 1/3% support test—2011. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization <input type="checkbox"/>		
17a 10%-facts-and-circumstances test—2012. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization <input type="checkbox"/>		
b 10%-facts-and-circumstances test—2011. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization <input type="checkbox"/>		
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions <input type="checkbox"/>		

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

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
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) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(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 IV.)						
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 501(c)(3) organization, check this box and stop here <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

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

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2012 (line 10c, column (f) divided by line 13, column (f))	17	
18 Investment income percentage from 2011 Schedule A, Part III, line 17	18	

- 19a 33 1/3% support tests—2012.** 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—2011.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization
- 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 **Supplemental Information.** Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).

Facts And Circumstances Test

Explanation

SCHEDULE D (Form 990)

OMB No 1545-0047

Supplemental Financial Statements

2012

Open to Public Inspection

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

Department of the Treasury Internal Revenue Service

Name of the organization CHILD TRENDS INC

Employer identification number

13-2982969

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

Table with 2 columns: (a) Donor advised funds, (b) Funds and other accounts. Rows include total number at end of year, aggregate contributions, aggregate grants, aggregate value, and questions about donor advised funds and grant purposes.

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

Table with 2 columns: Description, Held at the End of the Year. Rows include purpose(s) of conservation easements, total number of easements, total acreage, and other details.

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

Table with 2 columns: Description, Amount. Rows include questions about reporting art and historical treasures, and amounts for revenues and assets.

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" to 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

Table with 2 columns: Label (1c-1f) and Amount

2a Did the organization include an amount on Form 990, Part X, line 21? Yes No

b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII

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

Table with 6 columns: (a) Current year, (b) Prior year, (c) Two years back, (d) Three years back, (e) Four years back. Rows include 1a-1g.

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as

- a Board designated or quasi-endowment, b Permanent endowment, c Temporarily restricted endowment

The percentages in 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

- (i) unrelated organizations, (ii) related organizations

Table with 3 rows (3a(i), 3a(ii), 3b) and 2 columns (Yes, No)

b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?

4 Describe in Part XIII the intended uses of the organization's endowment funds

Part VI Land, Buildings, and Equipment. See Form 990, Part X, line 10.

Table with 5 columns: Description of property, (a) Cost or other basis (investment), (b) Cost or other basis (other), (c) Accumulated depreciation, (d) Book value. Rows include 1a-1e and Total.

Part VII Investments—Other Securities. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
Other		
Total. (Column (b) must equal Form 990, Part X, col (B) line 12.)		

Part VIII Investments—Program Related. See Form 990, Part X, line 13.

(a) Description of investment type	(b) Book value	(c) Method of valuation Cost or end-of-year market value
Total. (Column (b) must equal Form 990, Part X, col (B) line 13.)		

Part IX Other Assets. See Form 990, Part X, line 15.

(a) Description	(b) Book value
Total. (Column (b) must equal Form 990, Part X, col.(B) line 15.)	

Part X Other Liabilities. See Form 990, Part X, line 25.

1 (a) Description of liability	(b) Book value
Federal income taxes	
DEFERRED RENT	4,931
Total. (Column (b) must equal Form 990, Part X, col (B) line 25.)	4,931

2. Fin 48 (ASC 740) Footnote 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

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

1	Total revenue, gains, and other support per audited financial statements	1	11,101,171
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a	Net unrealized gains on investments	2a	
b	Donated services and use of facilities	2b	27,625
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII)	2d	
e	Add lines 2a through 2d	2e	27,625
3	Subtract line 2e from line 1	3	11,073,546
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	0
5	Total revenue Add lines 3 and 4c . (This must equal Form 990, Part I, line 12)	5	11,073,546

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

1	Total expenses and losses per audited financial statements	1	11,172,686
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
a	Donated services and use of facilities	2a	27,625
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIII)	2d	
e	Add lines 2a through 2d	2e	27,625
3	Subtract line 2e from line 1	3	11,145,061
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	0
5	Total expenses Add lines 3 and 4c . (This must equal Form 990, Part I, line 18)	5	11,145,061

Part XIII Supplemental Information

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, line 2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b Also complete this part to provide any additional information

Identifier	Return Reference	Explanation
DESCRIPTION OF UNCERTAIN TAX POSITIONS UNDER FIN 48	PART X, LINE 2	CHILD TRENDS REVIEWS AND ASSESSES ALL ACTIVITIES ANNUALLY TO IDENTIFY ANY CHANGES IN THE SCOPE OF THE ACTIVITIES AND REVENUE SOURCES AND THE TAX TREATMENT THEREOF TO IDENTIFY ANY UNCERTAIN TAX POSITIONS NO PROVISION FOR INCOME TAXES WAS REQUIRED FOR THE YEARS ENDED DECEMBER 31, 2012 AND 2011, AS CHILD TRENDS HAD NO NET UNRELATED BUSINESS INCOME AND DID NOT IDENTIFY ANY UNCERTAIN TAX POSITIONS REQUIRING RECOGNITION OR DISCLOSURE IN THESE FINANCIAL STATEMENTS

Schedule J
(Form 990)

Compensation Information

OMB No 1545-0047

2012

Open to Public Inspection

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

▶ Complete if the organization answered "Yes" to Form 990, Part IV, question 23.

▶ Attach to Form 990. ▶ See separate instructions.

Department of the Treasury
Internal Revenue Service

Name of the organization
CHILD TRENDS INC

Employer identification number

13-2982969

Part I Questions Regarding Compensation

- 1a** Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.
- | | |
|--------------------------------------------------------------------|--------------------------------------------------------------------------|
| <input type="checkbox"/> First-class or charter travel | <input type="checkbox"/> Housing allowance or residence for personal use |
| <input type="checkbox"/> Travel for companions | <input type="checkbox"/> Payments for business use of personal residence |
| <input type="checkbox"/> Tax indemnification and gross-up payments | <input type="checkbox"/> Health or social club dues or initiation fees |
| <input type="checkbox"/> Discretionary spending account | <input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef) |

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

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

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

- | | |
|---------------------------------------------------------------------|-------------------------------------------------------------------------------------|
| <input type="checkbox"/> Compensation committee | <input type="checkbox"/> Written employment contract |
| <input type="checkbox"/> Independent compensation consultant | <input checked="" type="checkbox"/> Compensation survey or study |
| <input checked="" type="checkbox"/> Form 990 of other organizations | <input checked="" type="checkbox"/> Approval by the board or compensation committee |

4 During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization

- a** Receive a severance payment or change-of-control payment?
- b** Participate in, or receive payment from, a supplemental nonqualified retirement plan?
- c** Participate in, or receive payment from, an equity-based compensation arrangement?
If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III

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

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

- a** The organization?
- b** Any related organization?

If "Yes," to line 5a or 5b, describe in Part III

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

- a** The organization?
- b** Any related organization?

If "Yes," to line 6a or 6b, describe in Part III

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

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

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

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

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that are not listed on Form 990, Part VII.

Note. The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

(A) Name and Title	(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported as deferred in prior Form 990
	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
See Additional Data Table							

Part III Supplemental Information

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

Identifier	Return Reference	Explanation
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Software ID:
Software Version:
EIN: 13-2982969
Name: CHILD TRENDS INC

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

(A) Name	(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
	(i) Base Compensation	(ii) Bonus & incentive compensation	(iii) Other compensation				
CAROL EMIG	(i) 230,822 (ii) 0	0 0	0 0	24,000 0	11,922 0	266,744 0	0 0
TRACEY STEVENS	(i) 149,452 (ii) 0	0 0	0 0	13,132 0	5,629 0	168,213 0	0 0
HOPE COOPER	(i) 131,688 (ii) 0	0 0	0 0	12,259 0	9,749 0	153,696 0	0 0
NATALIA PANE	(i) 133,875 (ii) 0	0 0	0 0	14,175 0	11,770 0	159,820 0	0 0
KRISTIN MOORE	(i) 197,354 (ii) 0	0 0	0 0	20,000 0	5,480 0	222,834 0	0 0
LAURA LIPPMAN	(i) 154,601 (ii) 0	0 0	0 0	15,644 0	8,377 0	178,622 0	0 0
TAMARA HALLE	(i) 138,796 (ii) 0	0 0	0 0	14,513 0	1,771 0	155,080 0	0 0
KATHRYN TOUT	(i) 137,141 (ii) 0	0 0	0 0	14,161 0	1,749 0	153,051 0	0 0
KAREN WALKER	(i) 150,287 (ii) 0	0 0	0 0	14,853 0	1,787 0	166,927 0	0 0
JENNIFER MANLOVE	(i) 136,056 (ii) 0	0 0	0 0	14,533 0	11,706 0	162,295 0	0 0

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.
▶ **Attach to Form 990 or 990-EZ.**

2012

Open to Public Inspection

Name of the organization
CHILD TRENDS INC

Employer identification number

13-2982969

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION B, LINE 11	THE FEDERAL FORM 990 DRAFT IS REVIEWED BY THE CONTROLLER AND VICE PRESIDENT OF FINANCE AND ADMINISTRATION THE FINAL DRAFT OF THE FEDERAL FORM 990 WILL BE REVIEWED BY THE AUDIT COMMITTEE OF THE BOARD OF DIRECTORS PRIOR TO FILING THE RETURN, A FINAL DRAFT IS PROVIDED VIA EMAIL TO THE ENTIRE BOARD OF DIRECTORS
	FORM 990, PART VI, SECTION B, LINE 12C	THERE IS A COMMITTEE OF RFP EVALUATORS WHO CONSIDER POTENTIAL CONFLICTS OF INTEREST THAT MAY EXIST WITH POTENTIAL NEW FUNDERS THE PRESIDENT AND VICE PRESIDENT OF FINANCE AND ADMINISTRATION REGULARLY REVIEW NEW FUNDER RELATIONSHIPS, VENDOR RELATIONSHIPS AND BOARD OF DIRECTORS RELATIONSHIPS TO BE SURE TO AVOID ANY POTENTIAL CONFLICTS OF INTEREST SERVICE ON THE BOARD OF DIRECTORS IS A VOLUNTEER SERVICE, ACCORDINGLY, THERE IS NO COMPENSATION PAID TO BOARD MEMBERS THE PRESIDENT AND VICE PRESIDENT OF FINANCE AND ADMINISTRATION ALSO REQUESTS ITS KEY EMPLOYEES TO DISCLOSE ANY POTENTIAL CONFLICTS AT THE END OF EACH YEAR
	FORM 990, PART VI, SECTION B, LINE 15	AN ORGANIZATION-WIDE SALARY REVIEW UTILIZING PAYSACLE SALARY SURVEY TOOL, OTHER ORGANIZATION'S FEDERAL FORM 990 AND AVAILABLE MARKET DATA IS CONDUCTED ANNUALLY TO DETERMINE THE COMPETITIVENESS OF STAFF AND EXECUTIVE SALARIES EVERY THREE YEARS, OR MORE REGULARLY AS DETERMINED NECESSARY, AN INDEPENDENT CONSULTANT IS USED TO CONDUCT AN ORGANIZATION WIDE SALARY REVIEW THE INDEPENDENT CONSULTANT USED IN 2012 WAS NONPROFIT HR SOLUTIONS ONCE AN INITIAL ASSESSMENT HAS BEEN MADE REGARDING NECESSARY INCREASES IN COMPENSATION DUE TO MERIT INCREASES AND PROMOTION INCREASES, A RECOMMENDED SALARY ESCALATION PERCENTAGE IS PRESENTED TO THE BOARD OF DIRECTORS FOR APPROVAL SALARY INCREASES ARE DETERMINED BASED ON MERIT (TIED TO PERFORMANCE REVIEWS) AND PROMOTION (TIED TO PERFORMANCE AND EXPERIENCE) THE BOARD OF DIRECTORS REVIEWS RECOMMENDED EXECUTIVE SALARY INCREASES FOR REASONABLENESS
	FORM 990, PART VI, SECTION C, LINE 19	CHILD TRENDS MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC UPON REQUEST
OTHER FEES	FORM 990, PART IX, LINE 11G	SUBCONTRACTORS PROGRAM SERVICE EXPENSES 1,616,432 MANAGEMENT AND GENERAL EXPENSES 0 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 1,616,432 OUTSIDE SERVICES - CONSULTANTS PROGRAM SERVICE EXPENSES 335,094 MANAGEMENT AND GENERAL EXPENSES 256,871 FUNDRAISING EXPENSES 3,693 TOTAL EXPENSES 595,658