

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

Return of Organization Exempt From Income Tax
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)
 Do not enter Social Security numbers on this form as it may be made public. By law, the IRS generally cannot redact the information on the form.
 Information about Form 990 and its instructions is at www.irs.gov/form990

OMB No 1545-0047
2013
Open to Public Inspection

A For the 2013 calendar year, or tax year beginning 01-01-2013, 2013, and ending 12-31-2013

B Check if applicable: <input 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 Number and street (or P.O. box if mail is not delivered to street address) Room/suite 7315 WISCONSIN AVENUE NO 1200W City or town, state or province, country, and ZIP or foreign postal code BETHESDA, MD 20814	D Employer identification number 13-2982969 E Telephone number (240) 223-9200 G Gross receipts \$ 10,994,551
F Name and address of principal officer CAROL EMIG 7315 WISCONSIN AVENUE NO 1200W BETHESDA, MD 20814		H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all subordinates 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

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		17
4	Number of independent voting members of the governing body (Part VI, line 1b)	4		16
5	Total number of individuals employed in calendar year 2013 (Part V, line 2a)	5		155
6	Total number of volunteers (estimate if necessary)	6		16
7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a		0
7b	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)	10,865,935		10,705,267
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	199,695		258,379
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	142		27,613
	12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	7,774		3,292
		11,073,546		10,994,551
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)	7,455,374		7,652,170
	16a Professional fundraising fees (Part IX, column (A), line 11e)	0		0
	b Total fundraising expenses (Part IX, column (D), line 25) <u>473,083</u>			
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	3,689,687		4,049,476
	18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)	11,145,061		11,701,646
19 Revenue less expenses Subtract line 18 from line 12	-71,515		-707,095	
Net Assets or Fund Balances		Beginning of Current Year		End of Year
	20 Total assets (Part X, line 16)	4,881,127		6,566,671
	21 Total liabilities (Part X, line 26)	1,054,199		3,446,838
22 Net assets or fund balances Subtract line 21 from line 20	3,826,928		3,119,833	

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	Print/Type preparer's name FRANK H SMITH	Preparer's signature
	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 or note to any line 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 \$ 2,300,817 including grants of \$) (Revenue \$ 54,002)
 EARLY CHILDHOOD- THE U S DEPARTMENT OF HEALTH AND HUMAN SERVICES (THE AGENCY) 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 CONTINUING TO CONDUCT A SYSTEM-WIDE PROGRAM EVALUATION OF THE DCPS EARLY CHILDHOOD PROGRAM THAT INCLUDES CLASSROOM OBSERVATIONS IN A REPRESENTATIVE SAMPLE OF TITLE I EARLY CHILDHOOD CLASSROOMS ACROSS THE DISTRICT, DIRECT CHILD ASSESSMENTS ON A SUB-SAMPLE OF CHILDREN IN THESE 111 CLASSROOMS, DIRECT CHILD ASSESSMENTS ON CHILDREN FROM THE FIRST YEAR OF THE EVALUATION AS THEY MOVE INTO NEW CLASSROOMS (BOTH PRE-K AND KINDERGARTEN), AND A COMPARISON OF SCHOOLS PARTICIPATING IN THE TOOLS OF THE MIND CURRICULUM WITH THOSE USING OTHER CURRICULA IN THIS SECOND YEAR OF THE EVALUATION, COMPARISONS WILL BE DRAWN AMONGST CLASSROOMS IMPLEMENTING TOOLS OF THE MIND FOR A SECOND YEAR, THOSE IMPLEMENTING TOOLS FOR THE FIRST YEAR, AND THOSE THAT HAVE NOT YET IMPLEMENTED TOOLS RESULTS FROM THE PROGRAM EVALUATION WILL BE USED TO EVALUATE THE QUALITY OF THE EARLY CHILDHOOD PROGRAM IN DCPS AND PROVIDE OPPORTUNITIES TO COMPARE CLASSROOMS USING THE TOOLS OF THE MIND CURRICULUM WITH THOSE THAT ARE USING ALTERNATIVE CURRICULA AND HOW THIS CURRICULUM MIGHT RELATE TO CHILD OUTCOMES

4b (Code) (Expenses \$ 2,139,786 including grants of \$) (Revenue \$ 95,009)
 YOUTH DEVELOPMENT- WITH FUNDING FROM THE US 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 CHILD TRENDS WORKED WITH THE LOS ANGELES UNITED SCHOOL DISTRICT AND FAMILIES IN SCHOOLS TO PILOT AND EVALUATE ABRIENDO PUERTAS PARENT EDUCATION PROGRAM CHILD TRENDS DEVELOPED PROTOCOLS, CONDUCTED RANDOM ASSIGNMENT OF PARTICIPANTS (PARENTS WITH PRESCHOOL AGE CHILDREN), DEVELOPED IMPLEMENTATION AND OUTCOME REPORTS, ASSESSED INTERVENTION PARENTS' KNOWLEDGE AND ATTITUDES ON CHILD AND YOUTH DEVELOPMENT, USING COMMUNITY RESOURCES, AND SERVED AS ADVOCATES FOR THEIR CHILDREN'S EDUCATIONAL OPPORTUNITIES WITH FUNDING FROM THE JPB FOUNDATION, 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

4c (Code) (Expenses \$ 804,633 including grants of \$) (Revenue \$ 67,157)
 FERTILITY AND FAMILY STRUCTURE- CHILD TRENDS SERVES AS THE LEAD COMMUNICATIONS PARTNER TO THE OFFICE OF ADOLESCENT HEALTH, WITHIN THE OFFICE OF THE ASSISTANT SECRETARY FOR HEALTH, DEPARTMENT OF HEALTH AND HUMAN SERVICES IN THIS ROLE, CHILD TRENDS IS RESPONSIBLE FOR DEVELOPING AND MAINTAINING AN INFORMATION-RICH WEBSITE WITH STATE-OF THE ART DESIGN AND FUNCTIONALITY AS A PART OF WEBSITE DEVELOPMENT, CHILD TRENDS PROVIDES CONTENT-RICH WEB TEXT, NATIONAL AND STATE DATA, AND RESOURCES ON MULTIPLE DIMENSIONS OF ADOLESCENT HEALTH, INCLUDING PHYSICAL HEALTH, MENTAL HEALTH AND REPRODUCTIVE HEALTH, SUBSTANCE USE AND HEALTHY ADOLESCENT RELATIONSHIPS ADDITIONALLY, CHILD TRENDS HOST WEBSITES AND DEVELOPED A WEB PORTAL WITH TRAINING, TECHNICAL ASSISTANCE, AND RESOURCES FOR OAH GRANTEEES CHILD TRENDS ALSO WORKED WITH THE OAH TO CREATE THE NATIONAL ADOLESCENT HEALTH AGENDA THIS PROCESS INVOLVES DEEP OUTREACH TO ORGANIZATIONS ACROSS THE FIELD OF ADOLESCENT HEALTH, INCLUDING HEALTH CARE, PUBLIC HEALTH, AND EDUCATION 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 WITH FUNDING FROM THE US 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 THREE MAIN COMPONENTS OF THE EVALUATION A DESIGN AND IMPLEMENTATION STUDY, A PERFORMANCE ANALYSIS STUDY, AND AN IMPACT AND IMPLEMENTATION STUDY OF A SELECT NUMBER OF PREP-FUNDED PROGRAMS CHILD TRENDS IS LEADING ALL ACTIVITIES ASSOCIATED WITH THE PERFORMANCE ANALYSIS STUDY, AND IS ALSO INVOLVED IN TASKS FOR THE OTHER TWO COMPONENTS

(Code) (Expenses \$ 688,143 including grants of \$) (Revenue \$ 5,508)
 CHILD WELFARE

(Code) (Expenses \$ 450,206 including grants of \$) (Revenue \$ 12,768)
 POLICY AND COMMUNICATIONS

(Code) (Expenses \$ 367,338 including grants of \$) (Revenue \$ 16,596)
 EDUCATION

(Code) (Expenses \$ 313,762 including grants of \$) (Revenue \$ 6,333)
 INDICATORS

(Code) (Expenses \$ 205,650 including grants of \$) (Revenue \$ 1,006)
 EMERGING ISSUES

(Code) (Expenses \$ 151,483 including grants of \$) (Revenue \$ 0)
 PARENTING AND FAMILY DYNAMICS

4d Other program services (Describe in Schedule O)
 (Expenses \$ 2,176,582 including grants of \$) (Revenue \$ 42,211)

4e Total program service expenses 7,421,818

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 other assistance to or for any foreign organization? <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 other assistance to or for foreign individuals? <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 or other assistance to any domestic organization or government 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 or 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 25a</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	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? <i>If so, 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 or note to any line in this Part V

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable.		
1b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable.		
1c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	Yes	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return.		
2b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions).	Yes	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?		No
3b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O.		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?		No
b	If "Yes," enter the name of the foreign country: _____ See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		No
5b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		No
5c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?		No
6b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
7	Organizations that may receive deductible contributions under section 170(c).		
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?		No
7b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		
7c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		No
7d	If "Yes," indicate the number of Forms 8282 filed during the year.		
7e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		No
7f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		No
7g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		
7h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?		
9	Sponsoring organizations maintaining donor advised funds.		
9a	Did the organization make any taxable distributions under section 4966?		
9b	Did the organization make a distribution to a donor, donor advisor, or related person?		
10	Section 501(c)(7) organizations. Enter		
10a	Initiation fees and capital contributions included on Part VIII, line 12.		
10b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities.		
11	Section 501(c)(12) organizations. Enter		
11a	Gross income from members or shareholders.		
11b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them).		
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?		
12b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year.		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		
13a	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O.		
13b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans.		
13c	Enter the amount of reserves on hand.		
14a	Did the organization receive any payments for indoor tanning services during the tax year?		No
14b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.		

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 or note to any line in this Part VI

Section A. Governing Body and Management

		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year		
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O		
1b	Enter the number of voting members included in line 1a, above, who are independent		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?		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.)

		Yes	No
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 **MD**
- 18** Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
 Own website Another's website Upon request Other (explain in Schedule O)
- 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 NO 1200W
 BETHESDA, MD 20814 (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 or note to any line in this Part VII

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

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

• List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid

• List all of the organization's **current** key employees, if any See instructions for definition of "key employee "

• List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations

• List all of the organization's **former** officers, key employees, 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				234,146	0	35,637
(2) WILLIAM THORNE CHAIR	1 00	X		X				0	0	0
(3) LAUREN SMITH VICE CHAIR	1 00	X		X				0	0	0
(4) ANDREW SCHNEIDER-MUNOZ SECRETARY	1 00	X		X				0	0	0
(5) LISA KARLISCH TREASURER	1 00	X		X				0	0	0
(6) FRED BOLLERER BOARD MEMBER	1 00	X						0	0	0
(7) LEONARD BURTON BOARD MEMBER	1 00	X						0	0	0
(8) DAN CARDINALI BOARD MEMBER	1 00	X						0	0	0
(9) ROB GEEN BOARD MEMBER	1 00	X						0	0	0
(10) ALAN HAUSMAN BOARD MEMBER	1 00	X						0	0	0
(11) CHERYL HAYES BOARD MEMBER	1 00	X						0	0	0
(12) ROBERT KENNEY JR BOARD MEMBER	1 00	X						0	0	0
(13) JACK LEONE BOARD MEMBER	1 00	X						0	0	0
(14) JUDY NEE BOARD MEMBER	1 00	X						0	0	0
(15) GREGORY NIBLETT BOARD MEMBER	1 00	X						0	0	0
(16) BRENDA WELBURN BOARD MEMBER	1 00	X						0	0	0
(17) DON WINSTEAD BOARD MEMBER	1 00	X						0	0	0

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
(18) NATALIA PANE SENIOR VP OF RESEARCH & OPERATIONS	37 50			X				155,985	0	28,386
(19) MIKE NOSIL VP OF FIN & ADMIN AS OF 06/2013	37 50			X				89,353	0	11,510
(20) FRANK WALTER VP OF COMMUNICATIONS	37 50			X				134,735	0	19,212
(21) KRISTIN MOORE SENIOR SCHOLAR	37 50				X			235,293	0	25,839
(22) KAREN WALKER SENIOR PROGRAM AREA DIRECTOR	37 50					X		156,361	0	20,398
(23) JENNIFER MANLOVE SENIOR PROGRAM AREA DIRECTOR	37 50					X		144,884	0	27,239
(24) TAMARA HALLE SENIOR PROGRAM AREA DIRECTOR	37 50					X		143,134	0	16,469
(25) KATHRYN TOUT SENIOR PROGRAM AREA DIRECTOR	37 50					X		142,139	0	15,984
(26) LAURA LIPPMAN SENIOR PROGRAM AREA DIRECTOR	32 00					X		137,083	0	19,432
1b Sub-Total										
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)								1,573,113	0	220,106

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 **19**

	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
FEDSOLUTIONS 1133 19TH ST NW 10TH FL WASHINGTON DC 20036	IT CONSULTING	209,134
REGENTS OF UNIVERSITY MINNESOTA PO BOX 1450 MINNEAPOLIS MN 554855957	CONSULTING SERVICES	206,523
TRUE NORTH GROUP LLC 1319 WOODSIDE PKWY SILVER SPRING MD 20910	CONSULTING SERVICES	186,878
TRILOGY INTERACTIVE LLC PO BOX 4177 MOUNTAIN VIEW CA 94040	CONSULTING SERVICES	155,679
IHR 15800 CRABBS BRANCH WAY SUITE 350 ROCKVILLE MD 20855	HUMAN RESOURCE SERVICE	124,478

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 **5**

Part VIII Statement of Revenue

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

			(A)	(B)	(C)	(D)		
			Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512-514		
Contributions, Gifts, Grants and Other Similar Amounts	1a	Federated campaigns 1a						
	b	Membership dues 1b						
	c	Fundraising events 1c						
	d	Related organizations 1d						
	e	Government grants (contributions) 1e	6,938,419					
	f	All other contributions, gifts, grants, and similar amounts not included above 1f	3,766,848					
	g	Noncash contributions included in lines 1a-1f \$						
	h	Total. Add lines 1a-1f	10,705,267					
Program Service Revenue	2a	GENERAL SUPPORT SERV						
		Business Code						
		900099	210,200	210,200				
	b	HONORARIUM						
		900099	48,179	48,179				
	c							
	d							
e								
f	All other program service revenue							
g	Total. Add lines 2a-2f	258,379						
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts)	27,613			27,613		
	4	Income from investment of tax-exempt bond proceeds						
	5	Royalties						
	6a	b	c	d	(i) Real	(ii) Personal		
					Gross rents			
					Less rental expenses			
					Rental income or (loss)			
	d	Net rental income or (loss)						
	7a	b	c	d	(i) Securities	(ii) Other		
					Gross amount from sales of assets other than inventory			
					Less cost or other basis and sales expenses			
					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	MISCELLANEOUS	900099	3,292		3,292			
b								
c								
d	All other revenue							
e	Total. Add lines 11a-11d		3,292					
12	Total revenue. See Instructions		10,994,551	258,379	0	30,905		

Part IX Statement of Functional Expenses

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.		(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to 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.	970,096	239,752	693,179	37,165
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.	4,492,752	3,338,007	879,229	275,516
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions).	418,761	302,028	90,687	26,046
9	Other employee benefits.	1,312,532	877,903	355,711	78,918
10	Payroll taxes.	458,029	298,066	132,937	27,026
11	Fees for services (non-employees)				
a	Management.				
b	Legal.	1,990		1,990	
c	Accounting.	43,326		43,326	
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).	2,298,217	1,676,002	615,148	7,067
12	Advertising and promotion.				
13	Office expenses.	240,124	101,680	137,159	1,285
14	Information technology.	123,423	9,972	113,451	
15	Royalties.				
16	Occupancy.	819,136		819,136	
17	Travel.	188,902	144,562	43,747	593
18	Payments of travel or entertainment expenses for any federal, state, or local public officials.				
19	Conferences, conventions, and meetings.	1,269	954	315	
20	Interest.				
21	Payments to affiliates.				
22	Depreciation, depletion, and amortization.	192,221		192,221	
23	Insurance.	32,653		32,653	
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	RECRUITMENT	38,890	315	38,575	
b	MEMBERSHIP/SUBSCRIPT	31,714	7,798	23,916	
c	GIFTS-SURVEY PARTICIP	16,951	16,951		
d	BOOKS AND PUBLICATIONS	13,250	12,527	723	
e	All other expenses	7,410	395,301	-407,358	19,467
25	Total functional expenses. Add lines 1 through 24e.	11,701,646	7,421,818	3,806,745	473,083
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720).				

Part X Balance Sheet

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

		(A)		(B)
		Beginning of year		End of year
Assets	1 Cash—non-interest-bearing	250	1	250
	2 Savings and temporary cash investments	2,413,908	2	2,899,361
	3 Pledges and grants receivable, net	2,032,188	3	1,793,150
	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	297,268	9	174,234
	10a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a 2,521,109		
	b Less accumulated depreciation	10b 824,343	96,592	10c 1,696,766
	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	2,910
16 Total assets. Add lines 1 through 15 (must equal line 34)	4,881,127	16	6,566,671	
Liabilities	17 Accounts payable and accrued expenses	835,730	17	735,930
	18 Grants payable		18	
	19 Deferred revenue	213,538	19	467,647
	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	4,931	25	2,243,261
	26 Total liabilities. Add lines 17 through 25	1,054,199	26	3,446,838
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	1,837,775	27	1,848,789
	28 Temporarily restricted net assets	1,989,153	28	1,271,044
	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	3,826,928	33	3,119,833	
34 Total liabilities and net assets/fund balances	4,881,127	34	6,566,671	

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	10,994,551
2	Total expenses (must equal Part IX, column (A), line 25)	2	11,701,646
3	Revenue less expenses Subtract line 2 from line 1	3	-707,095
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	3,826,928
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	3,119,833

Part XII Financial Statements and Reporting

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

	Yes	No
1 Accounting method used to prepare the Form 990 <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

2013

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.
- ▶ Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Department of the Treasury
Internal Revenue Service

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?

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

(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)

(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) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")	6,864,055	8,378,865	8,946,266	10,865,935	10,705,267	45,760,388
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	6,864,055	8,378,865	8,946,266	10,865,935	10,705,267	45,760,388
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						1,159,018
6 Public support. Subtract line 5 from line 4						44,601,370

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
7 Amounts from line 4	6,864,055	8,378,865	8,946,266	10,865,935	10,705,267	45,760,388
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	75,532	31,609	198	142	27,613	135,094
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)	7,120	33,166	19,434	7,774	3,292	70,786
11 Total support (Add lines 7 through 10)						45,966,268
12 Gross receipts from related activities, etc (see instructions)					12	835,419
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 2013 (line 6, column (f) divided by line 11, column (f))	14	97.030 %
15 Public support percentage for 2012 Schedule A, Part II, line 14	15	92.450 %
16a 33 1/3% support test—2013. 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—2012. 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—2013. 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—2012. 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) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(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) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(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 2013 (line 8, column (f) divided by line 13, column (f))	15	
16 Public support percentage from 2012 Schedule A, Part III, line 15	16	

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2013 (line 10c, column (f) divided by line 13, column (f))	17	
18 Investment income percentage from 2012 Schedule A, Part III, line 17	18	

- 19a 33 1/3% support tests—2013.** 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—2012.** 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. 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	
Return Reference	Explanation
SCHEDULE A, PART II, LINE 10, EXPLANATION OF OTHER INCOME	MISCELLANEOUS - 2009 AMOUNT \$ 7,120 2010 AMOUNT \$ 33,166 2011 AMOUNT \$ 19,434 2012 AMOUNT \$ 7,774 2013 AMOUNT \$ 3,292

SCHEDULE D (Form 990)

Supplemental Financial Statements

OMB No 1545-0047

2013

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. Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

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 to (during year), Aggregate grants from (during year), Aggregate value at end of year, 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 of conservation easement, Held at the End of the Year. Rows include Purpose(s) of conservation easements, Total number of conservation easements, Total acreage restricted by conservation easements, Number of conservation easements on a certified historic structure, Number of conservation easements included in (c) acquired after 8/17/06, Number of conservation easements modified, transferred, released, extinguished, or terminated, Number of states where property subject to conservation easement is located, Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?, Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year, Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year, Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?, In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

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

Table with 2 columns: Description of collection, Amount. Rows include If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items; If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items; Revenues included in Form 990, Part VIII, line 1; Assets included in Form 990, Part X; If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items; Revenues included in Form 990, Part VIII, line 1; Assets included in Form 990, Part X.

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

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

- a** Public exhibition
- b** Scholarly research
- c** Preservation for future generations
- d** Loan or exchange programs
- e** Other

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII

5 During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" 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

	Amount
1c Beginning balance	
1d Additions during the year	
1e Distributions during the year	
1f Ending balance	

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.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

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

	Yes	No
(i) unrelated organizations	3a(i)	
(ii) related organizations	3a(ii)	
b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?	3b	

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

Part VI Land, Buildings, and Equipment. Complete if the organization answered 'Yes' to Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements		1,690,380	145,267	1,545,113
d Equipment		830,729	679,076	151,653
e Other				
Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c).)				1,696,766

Part VII Investments—Other Securities. Complete if the organization answered 'Yes' to Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

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

Part VIII Investments—Program Related. Complete if the organization answered 'Yes' to Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

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

Part IX Other Assets. Complete if the organization answered 'Yes' to Form 990, Part IV, line 11d. 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. Complete if the organization answered 'Yes' to Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1 (a) Description of liability	(b) Book value
Federal income taxes	
DEFERRED RENT AND CONSTRUCTION ALLOWANCE	2,243,261
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)	2,243,261

2. Liability for uncertain tax positions In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return Complete if the organization answered 'Yes' to Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements		1	10,994,551
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		
c	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII)	2d		
e	Add lines 2a through 2d		2e	0
3	Subtract line 2e from line 1		3	10,994,551
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	10,994,551

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return. Complete if the organization answered 'Yes' to Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements		1	11,701,646
2	Amounts included on line 1 but not on Form 990, Part IX, line 25			
a	Donated services and use of facilities	2a		
b	Prior year adjustments	2b		
c	Other losses	2c		
d	Other (Describe in Part XIII)	2d		
e	Add lines 2a through 2d		2e	0
3	Subtract line 2e from line 1		3	11,701,646
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	11,701,646

Part XIII Supplemental Information

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

Return Reference	Explanation
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, 2013 AND 2012, 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

Part XIII Supplemental Information (*continued*)

Return Reference	Explanation

Schedule J
(Form 990)

Compensation Information

OMB No 1545-0047

2013

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, line 23.

▶ Attach to Form 990. ▶ See separate instructions.

▶ Information about Schedule J (Form 990) and its instructions is at www.irs.gov/form990.

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 idemnification 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 directors, trustees, officers, including 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 checked="" 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	Yes	
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				
(1) CAROL EMIG PRESIDENT AND CEO	(i)	234,146	0	0	24,000	11,637	269,783	0
	(ii)	0	0	0	0	0	0	0
(2) NATALIA PANE SENIOR VP OF RESEARCH & OPERATIONS	(i)	155,985	0	0	16,794	11,592	184,371	0
	(ii)	0	0	0	0	0	0	0
(3) FRANK WALTER VP OF COMMUNICATIONS	(i)	134,735	0	0	14,208	5,004	153,947	0
	(ii)	0	0	0	0	0	0	0
(4) KRISTIN MOORE SENIOR SCHOLAR	(i)	210,293	25,000	0	20,733	5,106	261,132	0
	(ii)	0	0	0	0	0	0	0
(5) KAREN WALKER SENIOR PROGRAM AREA DIRECTOR	(i)	156,361	0	0	15,397	5,001	176,759	0
	(ii)	0	0	0	0	0	0	0
(6) JENNIFER MANLOVE SENIOR PROGRAM AREA DIRECTOR	(i)	144,884	0	0	16,747	10,492	172,123	0
	(ii)	0	0	0	0	0	0	0
(7) TAMARA HALLE SENIOR PROGRAM AREA DIRECTOR	(i)	143,134	0	0	14,912	1,557	159,603	0
	(ii)	0	0	0	0	0	0	0
(8) KATHRYN TOUT SENIOR PROGRAM AREA DIRECTOR	(i)	142,139	0	0	14,550	1,434	158,123	0
	(ii)	0	0	0	0	0	0	0
(9) LAURA LIPPMAN SENIOR PROGRAM AREA DIRECTOR	(i)	137,083	0	0	16,074	3,358	156,515	0
	(ii)	0	0	0	0	0	0	0

Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II

Also complete this part for any additional information

Return Reference	Explanation
PART I, LINE 7	SENIOR SCHOLAR, KRISTIN MOORE RECEIVED A BONUS DURING THE YEAR ENDED DECEMBER 31, 2013 BASED ON AN APPRAISAL OF HER PERFORMANCE

Additional Data

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 PRESIDENT AND CEO	(i) 234,146 (ii) 0	0 0	0 0	24,000 0	11,637 0	269,783 0	0 0
NATALIA PANE SENIOR VP OF RESEARCH & OPERATIONS	(i) 155,985 (ii) 0	0 0	0 0	16,794 0	11,592 0	184,371 0	0 0
FRANK WALTER VP OF COMMUNICATIONS	(i) 134,735 (ii) 0	0 0	0 0	14,208 0	5,004 0	153,947 0	0 0
KRISTIN MOORE SENIOR SCHOLAR	(i) 210,293 (ii) 0	25,000 0	0 0	20,733 0	5,106 0	261,132 0	0 0
KAREN WALKER SENIOR PROGRAM AREA DIRECTOR	(i) 156,361 (ii) 0	0 0	0 0	15,397 0	5,001 0	176,759 0	0 0
JENNIFER MANLOVE SENIOR PROGRAM AREA DIRECTOR	(i) 144,884 (ii) 0	0 0	0 0	16,747 0	10,492 0	172,123 0	0 0
TAMARA HALLE SENIOR PROGRAM AREA DIRECTOR	(i) 143,134 (ii) 0	0 0	0 0	14,912 0	1,557 0	159,603 0	0 0
KATHRYN TOUT SENIOR PROGRAM AREA DIRECTOR	(i) 142,139 (ii) 0	0 0	0 0	14,550 0	1,434 0	158,123 0	0 0
LAURA LIPPMAN SENIOR PROGRAM AREA DIRECTOR	(i) 137,083 (ii) 0	0 0	0 0	16,074 0	3,358 0	156,515 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.

▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at
www.irs.gov/form990.

OMB No 1545-0047

2013

**Open to Public
Inspection**

Name of the organization
CHILD TRENDS INC

Employer identification number

13-2982969

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 11	THE FEDERAL FORM 990 DRAFT IS REVIEWED BY THE CONTROLLER, VP OF FINANCE & ADMINISTRATION AND THE PRESIDENT AND CEO 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 WITH THE INTERNAL REVENUE SERVICE, 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 CEO 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 CEO AND VICE PRESIDENT OF FINANCE AND ADMINISTRATION ALSO REQUESTS ITS 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 AVAILABLE MARKET DATA IS CONDUCTED ANNUALLY TO DETERMINE THE COMPETITIVENESS OF STAFF AND EXECUTIVE SALARIES EVERY TWO YEARS, OR MORE REGULARLY AS DETERMINED NECESSARY, AN INDEPENDENT CONSULTANT IS USED TO CONDUCT AN ORGANIZATION WIDE SALARY REVIEW AN INDEPENDENT CONSULTANT WAS HIRED TO CONDUCT AN ORGANIZATION WIDE SALARY REVIEW DURING 2013 A SUMMARY OF THE INDEPENDENT CONSULTANT'S REPORT IS PROVIDED TO THE COMPENSATION COMMITTEE FOR REVIEW AND COMPARISON TO MARKET THE BOARD OF DIRECTORS REVIEWS RECOMMENDED EXECUTIVE SALARY INCREASES FOR REASONABLENESS SALARY INCREASES ARE DETERMINED BASED ON MERIT (TIED TO PERFORMANCE REVIEWS) AND PROMOTION (TIED TO PERFORMANCE AND EXPERIENCE) A SALARY ESCALATION PERCENTAGE IS INCLUDED IN THE ANNUAL BUDGET FOR MERIT AND PROMOTION INCREASES AND PRESENTED TO THE BOARD OF DIRECTORS FOR APPROVAL
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
FORM 990, PART IX, LINE 11G	SUBCONTRACTORS PROGRAM SERVICE EXPENSES 1,455,232 MANAGEMENT AND GENERAL EXPENSES 0 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 1,455,232 OUTSIDE SERVICES - CONSULTANTS PROGRAM SERVICE EXPENSES 220,770 MANAGEMENT AND GENERAL EXPENSES 615,148 FUNDRAISING EXPENSES 7,067 TOTAL EXPENSES 842,985